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Introduction

A team of auditors from the Quality Assurance Agency for Higher Education (QAA) visited the University of the West of England, Bristol (UWE, or the University), from 23 to 27 March 2009 to carry out an Institutional audit. The purpose of the audit was to provide public information on the quality of the learning opportunities available to students and on the academic standards of the awards that the University offers.

Outcomes of the Institutional audit

As a result of its investigations, the audit team's view of the University of the West of England, Bristol is that:

- confidence can reasonably be placed in the soundness of the institution's present and likely future management of the academic standards of the awards that it offers
- confidence can reasonably be placed in the soundness of the institution's present and likely future management of the quality of the learning opportunities available to students.

Institutional approach to quality enhancement

The University has clearly identified enhancement of the student learning experience as being core to its mission and enhancement has been a key driver of its strategic thinking. Although the University's approach has led to identifiable enhancements, its full potential has yet to be realised.

Institutional arrangements for postgraduate research students

The audit found that the arrangements for postgraduate research students, including those for support, supervision and assessment, were effective and fully met the expectations of the *Code of practice for the assurance of academic quality and standards in higher education (Code of practice), Section 1: Postgraduate research programmes*.

Published information

The audit found that reliance could reasonably be placed on the accuracy and completeness of the information that the University publishes about the quality of its educational provision and the standards of its awards.

Features of good practice

The audit team identified the following areas of good practice:

- the University's commitment to student representation and the effective engagement of students in the development of policy and practice (paragraph 72)
- University initiatives under the Student Experience Programme that support key aspects of the student learning experience (paragraph 87, 88, 91 and 101).

Recommendations for action

The audit team recommends that the University consider further action in some areas.

Recommendations for action that the team considers advisable:

- reconsider its timetable for Internal Academic Review, prioritising those areas which have fallen outside the University's stated timeframe (paragraph 40)
- complete the task of codifying the regulations, responsibilities, protocols and roles relating to collaborative provision (paragraph 117 and 118)

- strengthen the means by which the University oversees and manages its collaborative activity as a collective entity (paragraph 127)
- ensure greater consistency in the operation of arrangements for postgraduate research students as described in the University's Code of Practice, and communicate its policies and procedures clearly to students (paragraphs 133, 134, 137, 141 and 143).

Recommendations for action that the team considers desirable:

- to reflect on the balance between the effectiveness of its processes for quality management and the burden those processes may place on staff (paragraph 24, 33, 35, 42 and 43)
- to consider ways of enhancing the integration of central and faculty support and guidance for staff in respect of learning and teaching (paragraph 74, 96 and 97)
- to explore means of recognising and rewarding teaching excellence at institutional level (paragraph 95).

Section 1: Introduction and background

The institution and its mission

1 The University traces its history through Bristol Polytechnic to the Merchant Venturers' Navigation School, established in 1595, the Merchant Venturers' Technical College, Bristol Technical College, the West of England College of Art and the teacher training colleges of Redland and St Matthias. The University was designated as such and took its title under the *Further and Higher Education Act 1992*. In 1996, the Colleges of Health of Avon and Gloucestershire and of Bath and Swindon were incorporated into the University.

2 The University has four campuses in and around the city of Bristol. Most of its students (around 65 per cent in 2007-08) are based at the Frenchay Campus, which lies north of Bristol city centre. The other campuses are at Bower Ashton (south-west of the city centre), Glenside (about one mile from Frenchay) and St Matthias (about 2.5 miles from Frenchay). Additionally, there are what the University calls 'outposts' of the Faculty of Health and Life Sciences at Bath, Swindon and at Hartpury, Gloucestershire.

3 UWE engages in a range of collaborative provision. Its longest standing collaborative link is with Hartpury College which has been an affiliated institution and associate faculty of the University since 1997. The Bristol Old Vic Theatre School was designated an affiliated institution and associate school of the Faculty of Creative Arts in 2000. The University manages other regional partnerships through the UWE Federation, a network of further education partner colleges, and has a number of international partnerships.

4 In 2006-07, the University had a total of 29,798 students, 80 per cent of whom were pursuing undergraduate qualifications, 19 per cent were on taught postgraduate programmes, and 410 students were pursuing research degrees. The proportion of part-time students was 21 per cent (undergraduate), 69 per cent (postgraduate taught) and 54 per cent (postgraduate research).

5 The University's mission is to be, by the year 2012, an internationally acknowledged centre for knowledge exchange, drawing upon excellent teaching, scholarship and research in order to prepare students for the various needs and challenges of work and society. Its aim is to support students' learning across a spectrum of activity, offering lifelong learning, progression pathways and excellent standards in learning and teaching leading to high quality employment outcomes through the relevance and practicality of its curriculum.

6 As the University's Briefing Paper noted, at the time of the audit, the University was reaching the end of a period of restructuring from nine faculties to five (see paragraph 12). The five faculties of the University are the Bristol Business School; Creative Arts; Environment and Technology; Health and Life Sciences, and Social Sciences and Humanities.

The information base for the audit

7 The University provided the audit team with a Briefing Paper and supporting documentation, including that related to the sampling trails selected by the team. The index to the Briefing Paper was referenced to sources of evidence to illustrate the institution's approach to managing the security of the academic standards of its awards and the quality of its educational provision. The team had a hard copy of all documents referenced in the Briefing Paper and was given access to the University's intranet.

8 The Students' Union produced a student written submission (SWS), which set out the students' views on the accuracy of information provided to them, the experience of students as learners and their role in quality management.

9 In addition, the audit team had access to:

- the report of the previous Institutional audit (December 2004)
- reports of reviews by QAA at the subject level since the previous Institutional audit
- reports produced by other relevant bodies (for example, Ofsted and professional, statutory and regulatory bodies)
- the report of the QAA Review of postgraduate research degree programmes (2006)
- the University's internal documents
- the notes of audit team meetings with staff and students.

Developments since the last audit

10 The five-year period since the last Institutional audit has been one of transition, development and, as the University stated in its Briefing Paper, at times, unsettling change in respect of strategy, senior management and organisational structure. Most significantly, in early 2006, the Vice-Chancellor of some 20 years retired. His replacement joined the University in early 2006 and left in 2007. The present Vice-Chancellor was appointed in May 2008, following a period during which he fulfilled the role on an interim basis. An intention to reposition the University that was agreed by the Board of Governors in 2005-06 and reiterated in 2007-08 has been accompanied by restructuring and a refocusing of strategic direction.

11 A new Strategic Plan, which was adopted in July 2006, sets out the current priorities in respect of an enhanced student experience, research and knowledge exchange, plus engagement with further education through the UWE Federation. The University is gradually implementing new ways of achieving these priorities through its enabling strategies for development of the estate developments in support of the staff experience (considered 'long overdue' by the institution), more effective use of information technology, plus internationalisation of the curriculum and the student body. A major capital building project will locate most of the University onto one main site (Frenchay) and provide further opportunities to improve service provision and the social environment for students and staff.

12 At the time of the audit, a new senior management team and a new organisational structure were being introduced to support the new strategic direction. Two key appointments had been made, while other senior managers were being recruited to provide leadership in priority areas, such as research and knowledge exchange. Since 2006, the Dean of Students has provided leadership for the Student Experience Programme (see paragraph 87), and the Assistant

Vice-Chancellor for Learning, Teaching, Assessment and the Student Experience has provided senior executive leadership and coordination for learning and teaching support activities since November 2008. The Board of Governors and the Academic Board aim to work more closely together, which has led to revised academic governance arrangements that are reflected in new committee structures and procedures at institutional and faculty levels. Faculty organisation and operation has changed, with a reduction from nine faculties to five which are operating under revised arrangements. There has been a reorientation of the ways by which institutional service teams support academic units. The intention is that professional administrators will provide local support to academic units under institution-wide leadership and direction. The new arrangements had not been fully implemented at the time of the audit. The audit team was given to understand that there might be further amendments following an evaluation of the changes.

13 Senior managers of the University recognise that the main challenge facing the University is the engagement of staff and students in the creation of a unified University that will ultimately be located on a single site. The audit team found, however, that the duration and complexity of the restructuring and reorganisation had created uncertainty and the team was presented with contradictory views by staff about the ways in which systems and procedures should operate. This confusion has not helped the University's intention (see the following paragraphs) to establish a shared understanding of arrangements at institutional and faculty levels for quality management and enhancement.

14 The findings of the Institutional audit in 2004 were one starting point used by the last Vice-Chancellor to initiate a process of modernisation of the institution through a series of strategic reviews that were later reflected in the objectives of the Strategic Plan 2006. The 2004 audit made five recommendations, three of them advisable, and two desirable. The 2004 audit team advised the University to consider how to ensure the development of a shared understanding with respect to quality management in a devolved structure; reconsider minimum expectations that impinge on variability of the student experience (in assessment for example), and to consider how the academic audit process might yield more effective oversight. The desirable recommendations encouraged the University to seek to improve the common understanding of terminology used to describe the University's quality management processes, and to consider means to help increase understanding of central quality assurance processes and faculty responsibilities.

15 There have been significant developments in the provision of information about the policies and procedures for the management of quality and standards and the use of Internal Academic Audit in the development of revised approaches to assessment policy. However, while the University has made progress in addressing the recommendations of the last audit and to build upon features of good practice within its Strategic Plan, the audit team found that it was not yet possible to evaluate the full impact of the revised approaches, there being much that is still subject to further development and final implementation. This includes ensuring that revised approaches to providing assessment feedback are having a clear impact on the student learning experience; ensuring that revised arrangements for the management of quality and standards within the new organisational structure are understood and fully implemented; and determining how the outcomes from its processes for quality management, such as Internal Academic Audit, might have more immediate impact in terms of problem solving.

16 In summary, there has been much upheaval and change at the University since the last audit. This change has hindered the University's ability to respond fully to the recommendations of the previous audit, although its intentions are clear. The audit team strongly encourages the University to use the findings of this report to secure further the attainment of a shared understanding and acceptance of quality management and the attendant responsibilities in a devolved structure.

Institutional framework for the managing academic standards and learning opportunities

17 The framework for the management of academic standards and quality is presented in the UWE Quality Management and Enhancement Strategy and Framework, the aims of which reflect what the audit team thought to be a mature approach to quality management and enhancement in the current national context.

18 The UWE Quality Management and Enhancement Strategy specifies four main processes. Award and Programme Approval and Validation is used to consider new proposals. Annual Monitoring and Evaluation provides for reflective evaluation by teaching teams, departments and faculties for taught and postgraduate research provision, while Internal Academic Review includes critical review and revalidation, normally on a six-yearly cycle. Internal Academic Review was suspended for two years during 2005-07 under the direction of the previous Vice-Chancellor (see paragraph 40). Finally, Internal Academic Audit is an annual process conducted at university level to reflect upon the effectiveness of operational arrangements within faculties on a theme determined by Academic Board and to develop policy and proposals for enhancement opportunities.

19 Academic Board is responsible for defining, maintaining and assuring academic standards and for the management of academic quality. In practice, the Vice-Chancellor, as Chair of Academic Board, delegates these responsibilities to standing committees of the Board under the executive leadership of the Assistant Vice-Chancellor for Learning, Teaching, Assessment and the Student Experience. The terms of reference, schedule of activities and membership of the standing committees are clearly defined and outlined in the Committee Handbook, 2008-09.

20 The standing committees of Academic Board include the Learning, Teaching and Assessment Committee (LTAC), which has a subcommittee, the Quality and Standards Committee (QSC); the Research Committee; Research Degrees Committee (RDC) and the Research Degrees Examining Board. Additionally, Executive Groups (that were still under review at the time of the audit) provide guidance to the relevant executive leads for the Internationalisation Strategy, Student Experience and the UWE Federation. Academic Board assigns the responsibility for oversight of the University's quality management and enhancement framework to LTAC. LTAC is also responsible for external examiner appointments, the identification of cross-University themes, and oversight of learning and teaching projects. QSC has responsibility for considering proposals for new awards; the operation of University-managed validation events; Internal Academic Audit; the oversight of faculty-managed validation events and faculty operation of annual monitoring and Internal Academic Review of taught provision; plus oversight of links with professional, statutory and regulatory bodies. The Research Committee has a strategic role in the development of research activity, while the RDC is responsible for the oversight of faculty arrangements for postgraduate research students and the Research Degree Examining Board for the research degree examination process.

21 Faculty leadership and direction is provided through an executive dean, one or more associate deans, a faculty academic registrar and heads of departments. Responsibilities are assigned to faculty boards, which are standing committees of Academic Board, for managing aspects of academic standards of all awards, and for managing the quality of learning opportunities provided to all students, including postgraduate research students. The quality management functions that are located at faculty level are curriculum design, new module approval, operation of faculty-managed programme approvals, annual monitoring of taught and research degree provision, nomination of external examiners, internal academic review, plus liaison with student representatives and responding to student feedback.

22 The University operates a devolved responsibility structure. In addition to a faculty board, to mirror the structure at university level, all faculties should have committees that manage quality and standards, learning and teaching, plus research and knowledge exchange. Any further committees are established as appropriate for the management of the faculty. In most faculties,

a common framework has been implemented through the use of three or four committees. One faculty, however, operates a model that uses 10 committees. The audit team was advised that the arrangements in this faculty were likely to be reviewed and simplified by the University. Current faculty committee structures were approved by the Vice-Chancellor in August 2008.

23 Comprehensive reporting arrangements are in place to provide detailed information about the operation of the quality management and enhancement arrangements within faculties. QSC and LTAC produce detailed reports for Academic Board that present a full picture of how each of the quality management and enhancement processes has operated during a cycle. The audit team felt that the length, complexity and discursive nature of some reports detracted from their effectiveness and that there is scope to provide key information in a more focused, action-oriented way, to optimise its impact.

24 The University considers itself to be mature and to have robust processes and systems for quality management and enhancement. The revised arrangements are described as still settling in to the new structure. Arrangements are subject to evaluation and, if they do not work, they are changed. The institution recognises the need for greater integration of quality management and enhancement processes with its agendas for strategic development; enhanced and timely provision of management information, particularly to inform faculty based processes; further devolution to faculties of responsibilities for operation of processes such as award and programme approval and validation. The audit team concurs with this assessment and considers that the framework, when fully implemented, will be fit for purpose and that there is scope for improvement as identified by the University.

25 The audit team found that the University operates a comprehensive set of processes and procedures that form a framework for the management of standards and quality that is generally fit for purpose. However, the team concurred with the University's own analysis of shortcomings recorded in the preceding paragraph. The team also identified scope for furthering the shared understanding of this framework at the subject level, based on the excellent information that is contained in the material on the Academic Registry web pages. The team concluded that the workload associated with some of these processes seemed high and that the University might reflect on this, as noted in paragraph 43.

Section 2: Institutional management of academic standards

Approval

26 Fundamental to the University's approach to quality management and enhancement are the University's programme approval, monitoring and review processes, Internal Academic Audit arrangements, assessment regulations and admissions policy, all articulated in the University's Academic Regulations and Procedures.

27 The University's Quality Management and Enhancement Strategy and Framework defines academic standards as 'the skills and knowledge expected of students for a particular subject area at a particular level'. The strategy states that responsibility for quality management and enhancement is shared between faculties and the centre and defines the responsibilities of Academic Board and its subcommittees and those of faculties. Faculty and central processes are joined through ongoing dialogue concerning the operation of such processes; termly learning, teaching and assessment fora; faculty reporting of the outcomes of processes to central University committees, and the reporting of outcomes of Internal Academic Audit to the Learning, Teaching and Assessment Committee (LTAC) and the Quality and Standards Committee (QSC). The audit team felt that these activities led to an effective interaction between central and faculty processes, although, as noted in paragraph 23, more focused reports would enhance their effectiveness, as would greater consistency in what they cover. The four elements of the quality management and enhancement processes are those discussed below, namely, approval, monitoring, review and audit.

Approval, monitoring and review of award standards

28 The process for approval (and validation) of programmes is documented in the Award and Programme Approval Handbook 2009, with additional guidance on the roles of panel members and chairs provided by Academic Registry. The process of validation is clearly laid out in the Academic Regulations and Procedures.

29 Programme approval is, essentially, a three-stage process. First, an initial outline proposal including a market impact assessment of proposed programmes is considered for approval by QSC and endorsed to proceed to validation. An initial scrutiny is undertaken by a panel to clarify any ambiguities within a proposal prior to a validation event taking place.

30 In 2006-07, the University introduced faculty-managed validations within a risk-based approach. QSC is responsible for deciding whether a validation is managed centrally, or by a faculty. Faculties may manage 'lower-risk' approvals, such as the validations of existing programmes introducing a new pathway, or existing programmes introducing a new mode of delivery, or programme modifications. In all other cases, including collaborative proposals and new programmes in a new subject area, the validation is centrally managed. The procedures used for faculty-managed validations are expected to mirror those for centrally-managed ones. Faculty panels make recommendations on the outcome of validations to QSC.

31 The size and composition of panels for validation events depends on the nature and scope of the programme(s) under approval. Validation panels comprise members from QSC, members from within the University and external members nominated and approved according to institutional procedures. There must be at least one subject specialist from another higher education institution. An employer, or professional practitioner, may be involved if there is a substantial vocational element. The panel will be chaired by a senior member of the University outside of the faculty proposing the programme.

32 A similar process occurs for those programmes subject to limited-term approval, whereby the faculty produces a critical appraisal and revised programme specifications. The report and its recommendations are reported to the University. QSC receives an annual report on validations and approvals. This report focuses on any issues that have occurred in respect of programme approvals and, if necessary, amendments to processes are approved by QSC with a focus on enhancing the student learning experience and/or the processes themselves.

33 From scrutinising available documents, the three-stage approval process appeared to the audit team to be burdensome. Indeed, the team noted that such concerns had been raised in 2007 at university level in the Programme Approval Committee. The team also noted that, after consideration by the predecessor of QSC, the University concluded that the preliminary scrutiny part of the process was valuable in ensuring that relevant information was available to the validation panel (see paragraph 43).

Annual monitoring

34 The University requires that all taught provision at module and programme level, as well as supervised research contributing to an award, be annually monitored and evaluated. Faculties are required by Academic Board to establish procedures and arrangements for the monitoring and evaluation of provision that align with the University's framework. Summary reports to the University, which outline the faculty's approach to monitoring and evaluation, are produced by scheme and award management committees and received by faculty boards. Monitoring of actions from such reports is undertaken at faculty and award level. An annual overview report for each faculty, presented by the Executive Dean, is received by QSC in the autumn term.

35 The Academic Regulations and Procedures set out the purpose of monitoring and evaluation, stipulate the areas that must be reviewed and the supporting evidence to be used.

The faculty summary report is produced on a University pro forma that includes consideration of the Graduate Development Programme (see paragraph 87), all provision delivered by the University, the identification and dissemination of good practice, collaborative provision and, as noted in the previous paragraph, a commentary on the faculty's approach to monitoring and evaluation. The audit team noted that one faculty, in its annual monitoring and evaluation report, recommended that the University reconsider its current approach to annual monitoring and evaluation reporting, and consider the efficacy of what it felt was a resource-intensive process. The faculty stated that the report template is increasing both in size and scope, and solicits reporting of matters that may have already been formally considered elsewhere in the University. Another faculty noted duplication of reporting. The team felt that there was some substance to these views, although recognised that some duplication was not required by the University (see paragraph 43).

36 In 2007-08 and 2008-09, the University outcomes from monitoring and evaluation processes (along with outcomes from internal academic audit and a summary of issues arising from programme approvals) were referred to a university-level scrutiny group, which produced a detailed report to LTAC and QSC and made recommendations on priorities for learning and teaching developments. The 2008-09 report highlighted progress resulting from the 2007-08 report and detailed recommendations in a Learning and Teaching Development Plan 2008-09.

Internal Academic Review

37 The Academic Regulations and Procedures state that one of the purposes of Internal Academic Review is to provide evidence that standards continue to be met. Internal Academic Review occurs on a six-year cycle and typically focuses on a subject or scheme. The review panel consists of members external to the faculty in which the scheme or subject resides, together with members external to the University. Both the Academic Regulations and Procedures and Academic Registry guidance explain in detail the process and what should be included in the self-evaluation document and lists other documentation which should be available to the panel. This documentation includes, inter alia, outcomes from annual monitoring and evaluation; student performance data and feedback; external examiners' reports, and the outcomes of any recent programme validation and professional, statutory and regulatory body (PSRB) activities. The Executive Dean presents the report on Internal Academic Review to QSC together with an action plan and the review is reported to Academic Board as part of QSC's annual report. In some cases, Internal Academic Review is carried out in conjunction with PSRB re-approval visits.

38 The audit team saw a number of examples of completed Internal Academic Reviews which enabled it to form the view that the process was rigorous in all the instances it saw. However, the team found that the self-evaluation documents provided by subject teams were variable in detail and analysis. In addition, from the paperwork seen by the team, the monitoring of action plans arising from such reviews by the relevant academic units also appeared to be variable.

39 QSC annually receives a paper on Internal Academic Reviews from the previous year, and is able to view the individual reports and conditions. The annual paper also gives detail of the dates of future academic reviews. The paper received by QSC in its autumn 2008 meeting specified three recommendations arising out of the review process which were directed at the University. These recommendations were incorporated into the Learning and Teaching Development Plan 2008-9.

40 The Briefing Paper stated that the previous Vice-Chancellor had suspended the operation of Internal Academic Review between 2005 and 2007 in order to conduct a number of strategic reviews within the University. The audit team was told that the University realised that this suspension was a cause for concern but that it was catching up. It was pointed out to the team that a lot of provision is also subject to PSRB accreditation, which continued during the suspension of the internal processes. The team noted that the Academic Regulations and

Procedures state that 'internal academic review is concerned with academic standards and the quality of the subjects and/or programmes of study leading to University awards'. While the team was cognisant of the fact that it had been a previous Vice-Chancellor's decision to suspend the operation of Internal Academic Review, it also noted that the University's timetable for future Internal Academic Review still meant that some provision would be significantly outside the University's stated time scale of six years (by as much as three years) at its next review. Given the University's definition of the purpose of the process, the team would advise the University to reconsider its timetable for Internal Academic Review, prioritising those areas which have fallen outside the University's stated timeframe.

Internal Academic Audit

41 In its Briefing Paper, the University stated that Internal Academic Audit 'provides an opportunity for the University to review the effectiveness of faculties' management of devolved responsibilities for QME [quality management and enhancement]'. The audit process is conducted annually by a small group of staff who are normally members of Academic Board or its subcommittees. The internal audit team looks at each faculty's quality processes and for evidence of their effectiveness. The faculty produces a briefing paper and a list of appropriate evidence. The internal audit team examines the evidence and meets with relevant staff, then prepares a report, which lists essential or advisable actions for the faculty and identifies good practice. The theme for each audit is determined annually by QSC, which, in so doing, draws on the outcomes from the previous year's quality management and enhancement processes. The audit reports are considered by faculty boards which produce a response. QSC receives a report on each audit and the faculty response and reports the outcomes to Academic Board.

42 The audit team noted that one faculty had questioned the efficacy of the University process of Internal Academic Audit in its annual monitoring and evaluation report. In particular, it noted that the process was resource intensive and recorded concern that the pre-audit agenda and identification of key issues was not mirrored completely in the ensuing audit.

43 The audit team looked at all of the University's processes for programme approval, monitoring and review and concluded that all such processes make an effective contribution to the institution's responsibility for the management of academic standards. However, the team also felt that, taken as a whole, the processes were very resource intensive, which led the team to question whether some of the purposes of the processes might be achieved in a less resource intensive way that avoids duplication (especially that not required by the University) without reducing the efficacy of those processes. The team suggests that the University consider the desirability of reflecting on the balance between the effectiveness of its processes for quality management and the burden those processes may place on staff.

External examiners

44 The University operates a two-tier structure of examining within its taught modular scheme. A chief external examiner of a modular scheme is responsible for ensuring that the assessment process has been carried out fairly and rigorously, whereas a field examiner has responsibility for the security and comparability of standards at the subject/module level. Field external examiners' reports are available to chief external examiners. The Academic Regulations and Procedures list clear criteria for the appointment of both classes of examiner. These criteria are supplemented by the General Information for External Examiners for both taught modular and non-modular schemes, which sets out in detail the roles and responsibilities of all external examiners, and includes details of the University Assessment Policy. The pro forma for external examiners' reports specifically asks for comments with respect to alignment with the Academic Infrastructure and the comparability of standards.

45 External examiners are nominated by faculties, approved by Academic Board via LTAC and report annually to the Vice-Chancellor. External examiners' reports are scrutinised by faculties and, on behalf of QSC, Academic Registry, which produces a report to QSC for its first meeting of the session in September. This report identifies good practice along with issues that require action. It is an explicit requirement of faculty boards that, when exercising their oversight of monitoring and evaluation, they 'give due consideration to the reports of external examiners, to their consideration and response by scheme and award teams, and ensuring that feedback on responses and action taken is given to external examiners'. Responses to issues raised by external examiners form part of the annual monitoring and review process.

46 The audit team observed that one faculty in its annual monitoring and evaluation report had noted that the field external examiners and the chief external examiner had stated that the balance between rubber stamping and discussions around award board decisions was problematic. One chief external examiner had questioned his role, stating that the 'lack of opportunity to interact with students and their work means that one's understanding of a programme beyond its assessment is necessarily limited'. The team also noted that in September 2008, QSC determined to look at the role of chief external examiners as part of a review of examination boards.

47 The audit team concluded that the University's use of external examiners was strong and scrupulous and that its processes for external examining make an effective contribution to assuring the academic standards of programmes and awards.

Academic Infrastructure and other external reference points

48 The Briefing Paper stated that the 'University's approach to curriculum design, approval, monitoring and review is rooted in the QAA Academic Infrastructure'. The validation process requires the programme team to produce programme specifications and documentation to enable a validation panel to satisfy itself that, inter alia, the programme addresses external reference points such as *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ), and subject benchmark statements. Guidance Notes issued to validation panel members emphasise the role of the external member, particularly in respect of verifying that subject benchmark statements have been considered.

49 The University requires that the documentation produced by the team for Internal Academic Review demonstrates how far the provision addresses the requirements of external bodies such as QAA and any PSRBs. The audit team saw examples (including the work-based learning policy) that clearly showed where the *Code of practice* had been used as a benchmark for the review and development of new policy.

50 The Briefing Paper stated that the University works with over 70 PSRBs and that the University's engagement with these bodies is 'a fundamental element to our strategic aims in relation to employability and the student experience'. The Academic Regulations and Procedures state that the Academic Registrar is the designated official correspondent with all PSRBs in respect of the formal accreditation of awards and the formal notification of decisions and responses arising in the context of accreditation; the Academic Registrar should be kept informed of communication between the faculties and the relevant PSRB, and any accreditation visits should initially be sought through the Academic Registrar, as should any changes the PSRB may require to the University regulations. QSC took over the responsibility for the oversight of the outcomes of PSRB activities from LTAC when it was established in 2008. While QSC receives a list of activities and outcomes, the audit team was told that the responsibility for monitoring action plans lay with faculty executives and associate deans. In addition, as part of the self-evaluation document produced for Internal Academic Review, programme teams are expected to take into account the outcomes from PSRB visits and actions arising from such.

51 On asking how the University was responding to the *European Standards and Guidelines for Quality Assurance*, the audit team was informed that as the University considered itself to adhere to the Academic Infrastructure and, as the Academic Infrastructure is consistent with the *European Standards and Guidelines*, the latter had not been explicitly considered at institutional level.

52 The audit team considered that the University's use of the Academic Infrastructure and other external reference points was effective and contributed to its management of standards.

Assessment policies and regulations

53 The Academic Regulations and Procedures provide clear and comprehensive guidance relating to awards of the University and awards for professionally recognised or accredited programmes. The guidance provided covers topics that include credit (including credit values); credit structure of awards; credit transfer; credit rating of work-based learning and placement; assessment, including guidance on moderation, re-assessment, professional practice, late submission and non-submission; composition of assessment boards and responsibilities of examiners, and results and awards, which includes classification, extenuating circumstances, assessment offences and academic appeals. The regulatory framework was revised for the 2008-09 session with the aim of codifying existing documentation into a single point of reference. The revised document was discussed with faculties and students and was discussed fully in LTAC, with considerable contribution from the student representatives, before being recommended (with revisions) to Academic Board. LTAC instigated a series of Faculty Reading Days to disseminate the revised policy to faculties.

54 Any changes to regulations are approved by Academic Board. The Academic Regulations and Procedures include the University Assessment Policy, which specifically refers to the *Code of practice, Section 6: Assessment of students*, and which places prime responsibility for devising and implementing assessment strategies on faculties. These responsibilities include considering the appropriateness and balance of assessment; the timing of such; requiring faculties to keep under review module assessment regimes, turnaround time and feedback; comparability of assessment demands across modules in different fields within the faculty; and the provision for staff development.

55 Internal Academic Review specifically looks at assessment criteria and marking guidance. Student handbooks seen by the audit team refer students to the relevant academic regulations. The assessment policy is underpinned by clear principles and articulates the responsibility of the University to ensure that assessment is anonymous where possible; underpinned by published assessment criteria; double-marked according to University policy; and returned within a specified time with appropriate feedback. The Assessment Policy is included in the General Information for External Examiners. The joint LTAC/QSC Scrutiny Group paper submitted to QSC in March 2009 identified a number of issues of good practice with respect to assessment timing and content raised by annual monitoring, internal academic audit and external examiners' reports, although it also noted that assessment is still an issue in the National Student Survey.

56 The audit team concluded that, overall, the University's policies and regulations for the assessment of students made an effective contribution to the maintenance of academic standards.

Management information - statistics

57 The Briefing Paper stated that Internal Academic Review and annual monitoring of provision at module, programme, field and scheme level are informed by statistical data showing entry profiles, progression and other performance indicators. The Academic Regulations and Procedures state that statistical data should inform the faculty-wide summary report. The faculty summary reports presented to QSC, and accompanying programme-level reports, appeared to the audit team to be variable in their use and analysis of statistical data. However, the team also noted that in the annual monitoring and evaluation reports of two faculties, issues had been raised in respect of access to data by programme and field teams.

58 In 2008, QSC established the joint LTAC/QSC scrutiny group (see paragraphs 36 and 55) to develop a Learning and Teaching Development Plan arising from the outcomes of annual monitoring and other quality management and enhancement processes. The plan identified statistical data as a key priority to be taken forward as part of the University Learning and Teaching Development Plan 2008-09, stating that this was important and urgent. In addition, in its Briefing Paper the University stated that 'the time is now right for centralised data production' in order to facilitate institutional scrutiny. The priority of the Planning and Business Intelligence Unit had been to produce management information to support key performance indicators. An LTAC project has been set up to develop information requirements to underpin institutional quality management and enhancement processes.

59 While noting the comments above, the audit team's analysis of faculty and university-level committees revealed the consideration of data as part of routine business. In addition, the team noted that the most recent meeting of Academic Board at the time of the audit had approved its receipt of an annual overview report entitled Institutional Oversight of Academic Standards and Quality, which would give the Board oversight of issues such as progression and achievement in addition to other information and a timetable as to when such issues would be considered.

60 In respect of the above, the audit team was able to confirm that the institution's use of statistical data making a contribution towards assuring the academic standards of programmes and awards. The team identified some variability in practice, but noted that the University is seeking to address this as a matter of priority.

61 Overall, the audit found that UWE's management of academic standards is operating as intended. The application of the institution's regulations and policies is largely consistent and the associated guidance reflects consideration of the elements of the Academic Infrastructure. There is effective use of external input in approval and review processes and effective use of management information in the establishment and maintenance of the academic standards of awards. There is also strong and scrupulous use of external examiners in the summative assessment of provision. All of these features support a judgement of confidence in the soundness of the University's current and likely future management of the academic standards of its awards.

Section 3: Institutional management of learning opportunities

Academic Infrastructure and other external reference points

62 As noted above (paragraph 49), the audit team saw examples of where the *Code of practice* is used as a benchmark for the review and development of new policy. These examples included the University's Research Degree Programmes Code of Practice 2006, which draws heavily on the *Code of practice, Section 1*, and is now an appendix to the Academic Regulations and Procedures. The team also saw how the UWE Federation Code of Practice and section H of the Academic Regulations used the *Code of practice, Section 2*, as its reference point. The review of the assessment feedback policy took as its starting point the *Code of practice, Section 6* and, as a result, a policy on student minimum entitlement to feedback on assessed performance was introduced in February 2006, and was the focus of Internal Academic Audit 2007-08. The Quality and Standards Committee (QSC) noted the publication of the new FHEQ in October 2008.

Approval, monitoring and review of programmes

63 All procedures in relation to approval and review of programmes are clearly documented in the Academic Regulations and Procedures, which are supplemented by clear and helpful Academic Registry Guidance as noted above (paragraphs 28 and 37). Both processes involve external panel members whose role is clearly defined. Faculties may vary their own arrangements and structures for monitoring and report these arrangements as noted in paragraph 34. While the regulations define the role of faculty boards in relation to monitoring and evaluation,

together with the evidence which should be contained in such monitoring, the audit team found that the collaborative provision reports attached to the faculty summary reports presented to QSC were very diverse, particularly in their analysis of statistical data (see paragraph 57).

64 The Academic Regulations and Procedures state that the emphasis of Internal Academic Review 'should be on the evaluation of student achievement of the appropriate academic standards, and of the learning opportunities offered to students to support their achievements'. This emphasis is further endorsed by the Academic Registry Guidance on the process which clearly specifies the criteria for review and the documentation required. Faculties have authority to modify approved modular and non-modular programmes, awards, modules and units of study. The regulations stipulate clear criteria and processes for such modifications, which must include external scrutiny and, when the faculty wants to modify provision that will affect students currently on the programme or module, consultation with students.

65 The audit team noted that there was no University process for the closure of programmes. The University provided the team with examples that described how programmes had been closed in the past and the faculty processes involved. In all cases, it stated that the decision to close a programme had been taken by the faculty executive, reporting into the University, when looking annually at its portfolio through its annual planning processes. In one case, students had been involved in the decision and in another the faculty concerned stressed that the student experience had been a priority during the period in which the programme was closed. While the team saw no evidence that the student experience had been compromised in any of these cases of closure, it felt that the University might wish to consider whether a written policy would ensure consistency of practice and assure the University that the student experience is maintained appropriately through closure.

Management information - feedback from students

66 Student feedback is obtained through a variety of mechanisms, all of which inform the annual monitoring and evaluation process of modules and programmes at faculty level and the deliberations of QSC and the Learning, Teaching and Assessment Committee (LTAC) at institutional level. Student feedback is also an integral part of the evidence base used by the Internal Academic Audit and review processes described above. In addition to module evaluations, extensive consideration is given to the outcomes of both the National Student Survey and the University's own annual internal student satisfaction survey which was introduced in 2001. Analysis of the survey outcomes is undertaken and responses and follow-up actions identified. Postgraduate students complete either the Postgraduate Research Experience Survey or the Postgraduate Taught Experience Survey according to their mode of study. These postgraduate surveys feed into the annual monitoring and evaluation reports considered by faculty and university-levels Research Degrees Committee and LTAC respectively.

67 All faculties have a committee, usually called the student experience committee (SEC), or programme management committee, which focuses upon the student experience. There is a significant number of student representatives on these committees which are concerned with all aspects of the student experience. These committees feed into the Faculty Learning and Teaching Committee (FLTAC). Student representatives have access to training offered by the Students' Union (see paragraph 71 below), which includes ways of collecting student views and feedback.

68 The audit team found evidence that issues raised by students informed decision-making at all levels of the monitoring and evaluation process, as well as informing the Internal Academic Review and Internal Academic Audit processes. The team noted that there is not a standard University module questionnaire and that faculties managed their equivalent of the student experience committee in slightly different ways.

69 The audit team found that the University's arrangements for student feedback were effective.

Role of students in quality assurance

70 The student written submission (SWS) noted that there had been 'vast improvements' in terms of student representation and that student representatives make an input at all levels of the University's committees. There are student representatives on faculty-based committees for the management of programmes, faculty boards, and FLTACs. There are also student representatives on Academic Board, while the Students' Union President was a lead member of the Internal Academic Audit team that undertook a major audit of assessment and feedback policy and practice across the institution. There are two student representatives on the Student Experience Executive Group and student representatives serve on the faculty SECs.

71 Student representatives have been closely involved in the development of policy and procedures. Of particular note are the review and development on assessment and feedback practice, the UWE Charter, the Peer Assisted Learning Scheme, the Graduate Development Programme, and the seminars and workshops organised by LTAC. The Students' Union has been closely involved at all stages of planning for the University's new campus development. The Union also facilitates student councils in each faculty or school, representatives of which form the Student Representative Council, which considers University-wide issues. The SWS considered that this council 'has proved a popular and respected channel for student opinion with many staff from the University requesting to attend to gauge student feedback for their respective projects'. The Students' Union provides basic training for student representatives and advanced training for those on higher level committees, or with chairing responsibilities. The Students' Union did note the need for 'elements of practice to be standardised within and across faculties' and for all staff to understand how student representation works in their faculty in order to achieve its full potential, but is still of the view that the University has become 'one of the leaders in the field within the UK' in relation to student representation.

72 The audit team found that the University has an extensive and effective framework of student participation in its quality management and enhancement processes and noted the high level of student involvement in the University's deliberative and consultative processes. The team found the University's commitment to student representation and the effective engagement of students in the development of policy and practice to be a feature of good practice. From its discussions with students, the team found that external examiners' reports are not yet widely available to student representatives. The team would therefore encourage the University to share external examiners' reports, with personal information anonymised as necessary, with students at the earliest opportunity.

Links between research or scholarly activity and learning opportunities

73 The University's Strategic Plan commits the institution to ensuring that the curriculum continues to be properly informed by research, a commitment that is confirmed by supporting strategies and action plans. The University has formally defined the role of a 'UWE Academic' (see paragraph 94) as engaging in subject, professional and pedagogic research as required to support teaching activities and research teaching practice in ways appropriate to level and role.

74 Students who met the audit team spoke positively about the ways in which research informed teaching, although their examples at undergraduate level focused primarily upon the ways in which staff ensured the currency and professional relevance of subject content. The introduction of the Internal Knowledge Exchange Network (IKEN) as a means of developing and sharing good practice has engaged and informed interested staff across faculties. The team learned, however, that relatively few staff had been involved. In the view of the team, the cross-faculty sharing and dissemination of good practice has been a positive development but it would benefit from stronger central coordination and support which could be provided by the proposed Learning and Teaching Development and Innovation Unit (see paragraphs 96 and 97).

75 The audit team found that the University's arrangements for maintaining links between research or scholarly activity and teaching and students' learning opportunities are generally effective, especially in areas of the Research Assessment Exercise success although these arrangements could be strengthened.

Other modes of study

76 At the time of the audit, the University had only a limited amount of flexible and distributed learning. Nonetheless, the University has amended its requirements for programme approval to reflect the precepts of the *Code of practice, Section 2*, and it has accordingly updated guidance for staff.

77 A draft Technology Enhanced Implementation Plan has been developed. A cross-University development workshop, held in March 2009, was attended by 22 faculty staff and 12 staff from relevant central units to discuss the development and implementation of the plan and to profile examples of good technology enhanced learning practice. An E-Learning Development Unit has been established in Library and Information Services to provide guidance and support for staff in the use of e-learning. Student feedback has noted the value of support offered through the University's virtual learning environment but it has also highlighted the variability of staff use in terms of both extent and quality. Staff who met the audit team noted the way in which the Unit offers staff development support and is beginning to work closely with faculty staff. It was noted that one faculty is in the process of appointing two learner technologists who will be based in the central unit to enable a coordinated and coherent approach to enhancing the use of e-learning.

78 The University currently has very little work-based learning, in terms of learning achieved and demonstrated in the workplace, although it does view this as an area of potential growth. At the time of the audit, it was in the process of revising its work-based learning policy, originally developed in 2003, to reflect current developments in the field and the proliferation of vocationally relevant qualifications and to incorporate the relevant sections of the *Code of practice*.

79 The audit team concluded that the University's arrangements for its engagement with other modes of study were still developing but generally effective.

Resources for learning

80 The University's Strategic Plan aims to 'ensure that UWE students have the space and opportunity to pursue a wide range of activities and developmental opportunities, whether academic, cultural or social'. This is reflected in the Learning, Teaching and Assessment Strategy 2007 to 2010, which aims to develop inclusive, flexible and accessible curricula, learning spaces and resources that enable personalised learning in-campus, placement and work-based settings. As noted in paragraph 11, the University is planning a major redevelopment of the main campus with the primary objective of enhancing the academic and social experience of students. The Students' Union has been closely involved in the planning process.

81 The appropriateness and availability of learning resources are considered at the proposal stage for new programmes and is regularly evaluated through the annual monitoring and evaluation and Internal Academic Review processes. Appropriate actions are identified in the institutional Learning and Teaching Development Plan and faculty action plans. A University-wide LTAC Seminar on Learning Spaces was held in 2008 to reflect on the outcomes of the annual monitoring and evaluation process around the quality, quantity and flexibility of learning spaces and to take a more holistic view of learning spaces informed by sector-wide innovative practice. From its meetings with the Vice-Chancellor and student representatives, the audit team learned that particular attention is being paid to the provision of social learning spaces both within existing buildings and the planning of new build.

82 Student focus groups, whose views were captured in the SWS, and students who met the audit team praised library resources at the University, especially the 24-hour opening of the main campus library and the quality of service delivered by library staff. However, students did confirm the lack of sufficient copies of core texts in some areas, as reflected in the University's own annual library survey. The students also commented that the extension of 24-hour opening to libraries at all University campuses would be beneficial. More generally, the students highlighted difficulties in accessing available computers, particularly on the main campus, and a lack of group working spaces. The University has responded to the latter concerns by establishing a Space Management and Timetabling Advisory Group to consider strategies and approaches to support the future of academic delivery. This Group, which has student representation, is also considering issues around timetabling, including the Students' Union's recommendation to centralise timetabling further.

83 The audit team found that the University's arrangements for managing resources for learning were making an effective contribution to the management of the quality of learning opportunities.

Admissions policy

84 Admissions procedures for undergraduate and postgraduate taught provision are managed centrally by the Admission and International Recruitment Service. Admissions processes are reviewed in the light of developments such as reforms to secondary education and the new 14-19 Diploma. Appropriate training is provided for staff involved in the admissions process. Admissions procedures for postgraduate research students are managed by the Research Degrees Committee and training is available for staff involved in postgraduate research student admissions (see paragraph 132).

85 The University has adopted a strategic approach to widening participation to increase the numbers and proportions of entrants to the University's undergraduate programmes from those groups identified as being under-represented. The University's Widening Participation Strategy is closely aligned to other, relevant strategies, including the Learning, Teaching and Assessment Strategy, and it encompasses an extensive range of outreach and other relevant activities. Implementation of the strategy is overseen by the Widening Participation Operational Group, which identifies annual priorities and carefully monitors performance against these. The University has performed well against national benchmarks for widening participation.

86 Students who met the audit team expressed their satisfaction with the University's admission procedures. The team found that the University's admissions policy contributes to its management of learning opportunities.

Student support

87 The University's Strategic Plan notes that the student experience lies at the heart of the Corporate Strategy. In 2006, the University introduced the Student Experience Programme (SEP) as its most ambitious and comprehensive student-facing development since the last Institutional audit. The programme was developed in recognition of the view that 'in a very large, comprehensive, credit-based institution the student experience may be fragmented'. The programme aims to provide institutional-level leadership, coordination and management of a number of connected initiatives designed to enhance the student experience. These include the 'Welcome' project encompassing induction and other critical points throughout the whole student journey; the Graduate Development Programme (GDP), which focuses upon the development of study skills and personal development planning; the Employability Project; the development of the UWE Charter; and Peer Assisted Learning. The programme is coordinated by the Dean of Students and is overseen by the Student Experience Executive, which has representation from each of the faculties and includes student representatives. The Student Experience Executive reports to LTAC and Academic Board regularly. The audit team heard

positive comments from staff and students involved in these initiatives, particularly the GDP, which is a central component of all undergraduate student programmes.

88 It is evident from the report of an extensive internal evaluation of the GDP in 2008 that considerable investment of time and resource has been made in introducing the GDP to first-year programmes and it has a major profile in annual monitoring and evaluation processes at faculty and institutional levels. It is acknowledged that the GDP has made a stronger impact in some areas than others and that important lessons have been learned including the need for timely and appropriate guidance and support for staff. A comprehensive staff guide has subsequently been developed and the programme is being extended to later programme stages, with a particular focus upon employability skills. The audit team found that feedback from both staff and students involved in the peer-assisted learning element of the SEP has been positive. The view of the team is that the SEP is an example of planned enhancement which has provided a valuable focal point for student development and support. It has made a positive impact upon the quality of the student learning experience, even though the programme is at an early stage of development (see paragraphs 91 and 101).

89 Student handbooks provide details of student support services which are also highlighted during induction. The University does not have a personal tutoring policy although personal tutoring is provided in some faculties. Undergraduate students normally view the first point of contact on academic issues as the module tutor. Faculty student advisers (FSAs) have been appointed in each faculty to provide pastoral support and guidance to students. The FSAs, who are trained for the role, network across faculties. The impact of FSAs was positively commented upon by students who met the audit team.

90 The audit team met students taking full and part-time, undergraduate and postgraduate taught programmes, all of whom stated their awareness of and satisfaction with the range of support and guidance available to them both centrally and in the faculties. This satisfaction included the support received from the Careers Development Unit, which has developed an electronic employability learning tool (MyFuture) that has been introduced at level two of the GDP.

91 The audit team found the institution's arrangements for student support to be effective. The team found that some University initiatives under the SEP that support key aspects of the student learning experience to be a feature of good practice. In particular, the team found that the student welcome weekend and student portal had successfully enhanced the student experience.

Staff support (including staff development)

92 The audit team was advised that staff development activities were managed through a devolved and diverse set of arrangements at central and faculty level. The University induction process and website provide appropriate information and guidance for all categories of new staff. The University's appraisal system, which is managed at faculty level, operates on a two-year cycle and incorporates peer observation.

93 The University provides specific support programmes for different categories of teaching staff. The Academic Development Programme is accredited by the Higher Education Academy and its successful completion is a probationary requirement for new teaching staff. There is a Mini-Academic Development programme for staff with contracts below 0.5, and there is an Introduction to Learning and Teaching programme for staff with limited teaching responsibilities, such as postgraduate researchers.

94 The 'UWE Academic' is a concept introduced in 2000 that 'embraces excellence in teaching, research, knowledge exchange and/or professional practice development against national and international benchmarks'. It has been revised to incorporate the nationally agreed national academic framework profiles and provides a framework for career progression that encompasses all aspects of the academic role.

95 There is no institutional scheme for recognising and rewarding excellence in teaching. At a meeting with the audit team, it was acknowledged that there was insufficient internal recognition and reward for teaching excellence and that the University was currently exploring ways in which this could be introduced. The team concluded that it is desirable that the University explore means of recognising and rewarding teaching excellence at institutional level.

96 Centrally-led staff development activity for learning and teaching revolves around areas in which there is institutional strategic steer. Major developmental workshops were held in 2007-08 and 2008-09 on priority areas that included assessment and feedback, the student experience, technology enhanced learning and a programme of workshops to support staff involved in curriculum design. The University sets aside four institutional staff development days which are used in ways determined by individual faculties. The audit team noted examples of faculty learning and teaching conferences profiling innovations in learning and teaching. In their responses to Internal Academic Audit, faculties acknowledged the need to share good practice more effectively within faculties and to make better use of IKEN. However, it was also acknowledged by faculty representatives that, while faculty-based staff support is specifically designed to meet local need, benefit would derive from integrating this with cross-institutional staff support activities. The team supported this view (see paragraph below). The Learning and Teaching Development Plan recommends the establishment of a central Learning and Teaching Development and Innovation Unit to provide guidance and to support staff development and effective sharing of practice across the University.

97 The audit team concluded that the University's arrangements for staff support and development are reasonably effective. However, as acknowledged by the University, the team felt that this could be improved and concluded it desirable that the University consider ways of enhancing the integration of central and faculty support and guidance for staff in respect of learning and teaching.

98 The audit team found that the University's systems for the management of learning opportunities were broad in scope, fit for purpose and largely operating as intended. The University engages well with the Academic Infrastructure and other external reference points. There is an extensive framework for student participation in quality assurance and students are involved in policy development. Resource allocation procedures are making an effective contribution, as are the University's arrangements for student support. Students are well provided with resources for learning, and there are effective arrangements for staff development and support, although there is some scope for improvement. These features support a judgement of confidence in the soundness of the University's current and likely future management of learning opportunities.

Section 4: Institutional approach to quality enhancement

99 The University identifies its approach to enhancement of the student learning experience as central to its vision for the future. The improvement of the student experience is the main goal of the 2006 Strategic Plan and the planned approach clearly seeks to make improvements at the institutional level. In this context, there is a number of strategic initiatives that are planned to yield improvements in the study environment and the support services. Examples of these initiatives include the major development project to consolidate the majority of the University onto one campus (see paragraph 11); the concomitant consolidation of support services for staff and students; the future development of research and knowledge exchange networks; internationalisation; investment of time and energy in the staff experience; and improved use of the student record system. While the vision is clear and plans are in hand, the audit team heard that the University is not yet maximising its approach to enhancement and that planned outcomes are not yet being realised fully.

100 Within its Quality Management and Enhancement Strategy and Framework, UWE defines enhancement as 'the implementation of deliberate processes of change intended to improve students' learning experience in higher education and to respond to the changing needs and interests of stakeholders'. The relationship between the Quality and Standards Committee (QSC) and the Learning, Teaching and Assessment Committee (LTAC) is intended to ensure that the quality management and enhancement processes are focused on enhancement of the quality of learning and teaching. During the audit, the audit team heard that the institution was pleased to have established a seamless link between quality assurance and enhancement. However, while the team found evidence to support this claim, it found that it had yet to be realised fully in terms of effective impact on the student learning experience and faculty engagement. A collegiate approach to enhancement is encouraged and can be seen in the operation of IKENs that stimulate consultation and discussion at school and departmental level in respect of approaches to learning and teaching. The papers submitted for consideration by QSC, LTAC and Academic Board were similarly found to evince a consultative and reflective approach to learning and teaching. As noted in paragraph 23, however, the team felt that these reports could have greater impact.

101 The audit team found evidence of an enhancement approach in the Student Experience Programme (SEP) (paragraph 87); the Learning and Teaching Development Plan and its focus on priority areas of the UWE Learning and Teaching Strategy; the development of the UWE Code of Practice for Postgraduate Research Degree Programmes, and the concept of IKENs (see paragraphs 74 and 96). Some of these approaches are clearly leading to enhancement; for example within SEP, the student welcome weekend and student portal developments have been particularly successful at enhancing the student experience (see paragraph 88).

102 The University has clearly identified enhancement of the student learning experience as being core to its mission and enhancement has been a key driver of its strategic thinking. Although the University's approach has led to identifiable enhancements, its full potential to develop a culture of continuous improvement has yet to be realised.

Section 5: Collaborative arrangements

103 The Briefing Paper stated that for the purposes of Institutional audit 'collaborative provision is defined as the delivery by an external education or training provider of whole or part of a programme leading to a UWE award'. When the audit process began, the University's collaborative provision fell into three broad categories: UWE Federation partnerships, other UK partnerships, and international partnerships. To this must be added a fourth category, the 'Shell Award Framework', which was validated just before the audit visit. Although the essence of the framework is credit recognition and transfer, this could involve contractual relationships with partners. For example, as noted in the UWE Federation Strategy, any continuing professional development delivered by a partner college of further education will fall under the aegis of the UWE Federation.

104 During the period of the audit, the University produced a helpful mapping of partner against type of provision, with some of the associated implications for quality assurance. The list comprises credit recognition; progression agreement; full and part franchise; top-up; split master's; dual awards; joint degrees, and staff/student exchange agreements. In addition, one international partnership is characterised as both dual award and distance learning. Although the number of partnerships is not large, the range of contractual agreements is wide, which brings a concomitant need for clarity about the requirements for managing particular types of partnership.

105 At the time of the audit, there were 15 partnerships based in the UK and 12 overseas, either active or close to starting, which between them covered some 150 awards. Some partnerships deliver a substantial number of awards, in particular Hartpury (an Associate Faculty) and Bristol Old Vic Theatre School (an Associate School). The University's register of collaborative provision is regularly updated and reported to the Quality and Standards Committee (QSC) but is not publicly available on the University's website.

106 Following a period of limited collaborative activity, the University has entered a phase of relatively rapid growth, with plans to increase provision, including international and UK partners outside the UWE Federation. The University has adopted an Internationalisation Strategy of which international partnerships form a part. The Briefing Paper stated that 'as part of the University's strategic development, considerable institutional effort has been devoted in recent years to the development of collaborative partnerships, internationally and regionally'. It further states that 'the choice of partners is strategic, even if their emergence as candidates in the first place may in some cases have been serendipitous'.

107 The due diligence process leading towards Affiliated Institution status is strong. The audit team considered case studies of both UK and international approval processes and was satisfied that the process from planning to visit to approval to memorandum of agreement is well conducted, with sufficient evidence and external expertise.

UWE Federation

108 The UWE Federation has grown rapidly in the three years since its inception in 2006. The UWE Federation Code of Practice developed in 2006 sets out the arrangements for the operation and management of the UWE Federation and associated collaborative provision.

109 An academic agreement is developed with each partner to capture responsibility for particular functions. The academic agreement is supported by schedules including a service schedule to ensure student access to student services offered by the University. An annual operating agreement details clearly the timetable of activities for the year and sets out the roles and responsibilities of individual named staff in each institution. Discipline networks have been established in business, creative arts, computing and environmental health. The audit team saw this as emerging good practice in the University's approach to developing partnerships. These networks are complemented by workshops and a UWE Federation annual conference. Through examining annual monitoring and evaluation reports, the team found evidence of effective overall management of the UWE Federation, and examples of good communication and active staff development with certain individual colleges, although less active engagement with others. These reports also clearly highlighted any problems that occurred.

110 The UWE Federation is still relatively new and the concept and practice are evolving. The University maintains clear oversight of the UWE Federation, as it evolves through its committees.

Other partners

111 The non-UWE Federation UK partners are managed and monitored individually. International partnerships are overseen by the Internationalisation Strategy Group (ISG) which also oversees matters relating to international students. The University plans to establish an International Development Office, part of the responsibilities of which will be to support the operation of international partnerships.

The Shell Award Framework

112 The very recent innovative Shell Award Framework development, which includes collaboration and credit exchange and exemption agreements with educational and employer partners, has considerable implications for the management of standards and the quality of student experience, and the University has recognised that regulatory changes will be needed to accommodate the full realisation of the concept. It also has implications for UWE Federation, such as that noted in paragraph 103. The University itself has expressed the challenges thus: 'The Shell Award Framework initiative raise(s) some fundamental issues about a shift in the definition or understanding of what constitutes higher education as well as specific issues about how to safeguard the standards of HE [higher education] awards and not compromise their value when they are achieved in less conventional ways'.

113 The validation process identified a significant number of elements still unresolved, with eight conditions to be met. These elements will require detailed attention before students can be enrolled and careful monitoring thereafter. The audit team supports the University's analysis, expressed through documentation leading up to the final validation event, that any large scale Shell Framework activity will present challenges to the current infrastructure used to support collaborative activity (for example, monitoring and reporting arrangements, information technology, student tracking, data production, student support and guidance, significant modifications to assessment regulations). The validation stipulated that the framework should be reviewed after its first year of operation.

Faculty management of collaborative provision

114 The Briefing Paper, in characterising the University's framework for managing standards and quality, stated that quality assurance processes 'are largely identical across all five faculties, with differences reflecting only local circumstances...in the course of 2008-09 QSC shall assure itself that faculties are fulfilling their responsibilities for managing academic standards by scrutinising and approving these processes'.

115 The audit team, in seeking to verify those statements in relation to faculty management of collaborative provision, found it difficult to gain conclusive evidence of the means or effectiveness of local processes. This is largely because faculty arrangements differ from each other and there is no institutional map of how faculties manage provision. Various people and groups act to manage and oversee partnership provision in faculties but no standard arrangements prevail. For example, two faculties have a collaborative provision coordinator but one looks after UWE Federation partnerships and the other looks after international partnerships. The other faculties do not have any such role. The team was told that the functions were covered by senior faculty personnel but no details could be provided for the faculties that were not represented. Role descriptions do exist for some individuals with particular collaborative responsibility (for example, UWE Federation Director, a Business School Collaborative Programmes Administrator), but there are no generic role descriptions for staff with lead responsibility for academic liaison with partners.

116 The audit team found little evidence of mutual understanding of collaborative provision across the University apart from UWE Federation networks. QSC has not as yet approved or monitored the details of faculty arrangements and senior University staff seemed to be unaware of the details of those arrangements. The team found no evidence to suggest that there were significant problems with faculty arrangements. However, as these arrangements have not yet been benchmarked against a complete set of University expectations specific to collaborative provision, the team felt it would be difficult for the University to assure itself that those arrangements are sufficient (see paragraph 127).

117 Although UWE Federation has a Code of Practice, there is no approved collaborative handbook or equivalent for the University, which brings together all relevant material in a single source, although one was reported to be in development in 2006. A Collaborative Provision Workshop in 2008 resulted in an action plan that highlighted the need to codify collaborative arrangements. The team was given sight of a partially drafted handbook during the course of the audit. Still to be added were sections on governance, roles and responsibilities, and guidance for staff, such as when visiting partners. Specific collaborative responsibilities are identified for UK partners in the Annual Operating Agreement and, for international collaborations, in Memoranda of Agreement. There are also details in Academic Regulations and Procedures for such processes as due diligence and approval, although not for closure of partnerships.

118 As noted above, the audit team found that the University had begun the task of codifying regulations, protocols, and roles relating to collaborative provision. In the team's view, this would contribute to achieving greater clarity and securing better oversight of collaborative provision. Consequently, the team advises the University to complete the task of codifying the regulations, responsibilities, protocols and roles relating to collaborative provision.

119 At the time of the audit, the University had recently disbanded a (short-lived) Collaborative Provision and Partnerships Committee (CPPC). The audit team was therefore interested in the extent to which collaborative activity was actively considered in the major University committees. The terms of reference of the major committees, including faculty boards, contain few references to responsibilities for collaborative provision, other than the Learning, Teaching and Assessment Committee's (LTAC's) role in agreeing proposals to proceed towards approval and Academic Board's formal approval of Affiliated Institution status. There are references to strategic considerations in the main University committees but these are limited. The LTAC Annual Report for 2007-08, for example, refers to a developing relationship with an overseas university in support of the Internationalisation Strategy and to a UWE Federation Review. The availability of information about collaborative activity presented to senior committees over the two years prior to the audit was variable and, on the basis of the minutes, there was less evidence of the deliberative approaches to collaborative provision that had characterised the dedicated CPPC.

120 For the 2007-08 Annual Monitoring and Evaluation process, faculties were asked to reflect explicitly on taught provision leading to a UWE award that is delivered in whole or in part by an affiliated institution in the UK or internationally. The audit team would encourage this practice to continue in order to improve oversight. As an Associate Faculty, Hartpury is required to prepare an annual monitoring report in the same format.

121 The UWE Federation Executive Group produced a useful summary analysis of the outcomes from UWE Federation programme reports for 2007-08. Issues raised for consideration at university level were identified in four areas: quality monitoring and enhancement; admissions and recruitment; curriculum; and staff development. It seemed clear from this summary, and from a study of the federation reports, that the UWE Federation is a work in progress, with examples of good and developing practice along with areas of concern identified by the University. Annual Monitoring and Evaluation also draws attention to late or missing partner reports. Individual partner reports are variable in format and quality but generally useful. The audit team was not always able, on the evidence provided, to find how actions arising from individual reports are subsequently tracked and recorded by faculties.

122 ISG considered reports, including programme reports, relating to UWE taught provision delivered in whole or part by an affiliated international institution. ISG was concerned about the variability of the information provided by faculties through the monitoring and evaluation process, noting in particular that there could have been more about the collaboration with a particular college, a partnership requiring significant actions which are now being monitored by ISG. It was observed that there was a need to educate international students better with respect to plagiarism, and to put in place methods for better prevention and detection. ISG also discussed the need to understand better how the management information system can facilitate the monitoring and reporting of international collaborative provision. These issues will be taken forward by ISG as part of the wider institutional development of the quality management and enhancement framework.

123 Information drawn from Internal Academic Review and other sources of evidence is used to inform the Learning and Teaching Development Plan. The most recent draft plan at the time of the audit recognised the summary reports by ISG and the UWE Federation Executive Group, and included an annex detailing faculty issues requiring consideration and action, including comments on collaborative provision. Progress on these actions will be monitored by the UWE Federation Executive Group. Similarly, any actions identified for international partnerships will be monitored via ISG and reported to QSC and Academic Board.

124 At the time of the audit, there had been no institutional overview report on collaborative activity for three years, since an informative paper was presented to Academic Board in June, 2006. A paper to the meeting of Academic Board immediately before the audit visit promised a future report on 'institutional oversight of academic standards and quality' that will include

'comparative academic standards' achieved by students at UWE and in partner organisations. While the audit team would encourage this development, it felt that the University may nevertheless wish to consider whether the Board might find it helpful to receive a dedicated overview report on all aspects of collaborative provision.

125 The audit team studied in detail two reviews, the evidence base for which included self-evaluation documents, external examiners' reports (all relevant external examiners' reports now include separate commentaries on partners), programme reports and minutes of programme committee meetings, along with reports of the review and associated action plans. The team formed the view that these reviews were sufficiently evidence-based, well conducted, used external expertise appropriately and were reported into relevant committees.

126 The evidence gathered by the audit team from documents and meetings indicated that individual collaborative provision is generally overseen and managed in such a way as to assure standards and quality. In particular, the different forms of overview of Annual Monitoring and Evaluation reports, and the reports of periodic reviews, reassured the team that the University was acting to monitor collaborative provision and identifying actions to be taken. The team also found that the University engages fully with the Academic Infrastructure. In general, the University's central processes for approving and reviewing partnerships are strong and visible. However, faculty, school and department arrangements are less visible and vary in effectiveness.

127 The audit team found no visible coordinated University management or monitoring of provision for collaborative provision as a whole, although most elements of provision are coordinated separately through the UWE Federation and ISG. Such separate arrangements have developed historically for good reasons and, in themselves, appear to be generally effective in the terms they set themselves. It is the team's view, however, that as the University moves towards a larger and more complex set of provision, a more integrated, coherent approach to strategy and quality assurance will be required. The reports of previous Institutional audits, going back nine years, drew attention to the virtue of managing UK and overseas collaboration within a single structure and for clear direction to faculties over their responsibilities in securing standards in the collaborative provision for which they have devolved responsibilities. In its Briefing Paper, the University recognised that further work needs to be done, stating that a 'task will be undertaken to draw together our collaborative work into a single strategy: one of the benefits of this will be that the strategy and supporting University structures will encompass also those UK collaborations that fall outside the scope of the UWE Federation'. The team concurs with this view and advises the University to strengthen the means by which the University oversees and manages its collaborative activity as a collective entity. The UWE Federation, which the team felt was emerging good practice, could provide a model for a more holistic University approach to developing, overseeing, monitoring and reporting collaborative provision.

Section 6: Institutional arrangements for postgraduate research students

128 UWE operates a devolved approach to assuring the quality of research degree programmes at faculty level under the University's Academic Regulations and Procedures. Arrangements are clearly specified within the UWE Code of Practice for Postgraduate Research Degree Programmes, which is based upon the *Code of practice, Section 1*. Faculties are responsible for devising local arrangements for managing the experience of postgraduate research students and were at the time of the audit aligning their processes to the UWE Code of Practice. The effectiveness of the operation of the UWE Code of Practice for Postgraduate Research Degree Programmes is scheduled to be the subject of the next Internal Academic Audit.

129 The University claims to be one of the fastest growing new universities for research, with an emphasis upon interdisciplinary and collaborative work with partners including employers. UWE has established cross-disciplinary research institutes in three areas of potential research

strength and plans to identify research beacons based on the outcomes of the 2008 Research Assessment Exercise. It intends to foster research activity around these beacons in order to strengthen the research environment in a limited number of areas. The UWE Code of Practice for Postgraduate Research Degree Programmes specifies the requirements for a supportive research environment, the arrangements for which are at the discretion of the faculty.

130 In 2006-07, there were 189 full-time and 221 part-time postgraduate research students, plus 47 part-time professional doctorate students. UWE has established graduate schools to enhance the research environment and provides dedicated administrative support for postgraduate research students. Some of the students that met the audit team confirmed the existence of regular research seminar programmes and opportunities to present their research work within the University and at conferences. However, there were others for whom this was not part of their experience. Indeed, more than one student reported their disappointment with the quality of the research environment, as they were not located with other research students and felt isolated.

131 The quality of the research environment was said in the Briefing Paper to be monitored by the Research Degrees Committee (RDC) through annual monitoring reports, the nature of which is at the discretion of the faculty. The audit team could find little evidence that these reports did cover the quality of the research environment. However, the existence of variations in the research environment by faculty and/or site have been noted and acknowledged by RDC.

132 The arrangements for selection, admission and induction of students are specified in the UWE Code of Practice for Postgraduate Research Degree Programmes and in the UWE Regulations and Procedures. Arrangements at faculty level operate under delegated responsibility from Academic Board. In practice, this is managed through the faculty research degrees committee or its equivalent. Since the QAA Review of postgraduate research degree programmes in 2006, the University has introduced a mandatory requirement that staff attend specialist training before acting as the chair of a research degree student recruitment panel. While the take up of the research recruitment training day was low (16 per cent of supervisors) it was clear from the minutes of faculty committees concerned with research that chairs of recruitment panels were selected from the pool of trained personnel, thereby placing reliance on a small number of individuals. Research students that the audit team met indicated that the quality of induction arrangements varied. For some students, informative and helpful briefing sessions with key personnel were accompanied by the provision of a comprehensive Graduate School Handbook, whereas in other cases postgraduate research students reported that they had not received any induction.

133 Faculty research degrees committees are responsible for ensuring that supervisory teams led by a Director of Studies include at least two, but not more than three supervisors, who are suitably qualified and experienced. In addition, access to administrative support, possibly through Research Degrees or Graduate School offices, ensures that postgraduate research students are aware of generic University support services and administrative requirements. The postgraduate research students whom the audit team met indicated that they knew where to go for help and support and that this included a range of people. At least two students met by the team were unaware that they had more than one supervisor, which suggests that the arrangements for establishing supervisory teams at faculty level and those for monitoring the supervisory arrangements via RDC are not working as specified in the UWE Code of Practice.

134 A three-day basic training programme had been completed by 21 per cent of current research supervisors. The programme is offered at institutional level and is designed for new and inexperienced research supervisors who can opt to be assessed on a module that is rated at 20 M-level credits. All research supervisors are invited to an annual research supervisor away day that is a focus for updating and sharing of good practice. The most recent such away day attracted only 23 per cent of supervisors. Faculty-level arrangements in support of supervisors include mentoring arrangements and bespoke training.

135 All full-time postgraduate research students are required to complete a progression examination towards the end of their first year of study (pro rata for part-time students). Careful progression monitoring of individual students is undertaken by faculty research degree committees (or equivalent) with institutional oversight for annual monitoring through RDC. A Research Student Progress Report is completed for each student by the supervisory team and by the individual student. These are then considered at the faculty research degrees committee (or equivalent), which makes an overall report to RDC that covers the highlights, challenges, progression statistics and key issues that are being addressed by the faculty. The University has identified a need to improve the quality of its management information to enable more effective monitoring of recruitment, progression and completion rates for postgraduate research students.

136 According to the UWE Code of Practice for Postgraduate Research Degree Programmes, a training needs analysis is a required part of the formal registration process to be conducted within six months of the start date for a postgraduate research student. However, the postgraduate research students met by the audit team were unable to confirm that the nature of this analysis matched arrangements described in the UWE Code of Practice. Skills training is available at institutional and faculty levels and there is a regulatory requirement that all students pass an assessed research training programme of 60 credits which is matched to their needs.

137 The UWE Code of Practice for postgraduate research programmes clearly specifies arrangements for provision of student feedback. The postgraduate research students that the audit team met had little awareness of mechanisms for the collection of feedback on the student experience, however some, when prompted, remembered participating in the Postgraduate Research Experience Survey. RDC, which had considered the findings from the Postgraduate Research Experience Survey for two consecutive years, agreed that detailed analyses be provided for consideration at each faculty research degrees committee (or equivalent). In general, students felt able to discuss any concerns with their supervisory team and professional administrators within the school or department in which they were based.

138 Assessment of postgraduate research students is managed by the Academic Registry on behalf of Academic Board under arrangements that are clearly presented in the UWE Research Degree Regulations and the UWE Code of Practice for Postgraduate Research Programmes. External and internal examiners are nominated by the Director of Studies and approved by the faculty research degrees committee prior to formal confirmation by the Academic Registry on behalf of Academic Board. Since the QAA Review of postgraduate research degree programmes in 2006, members of the supervisory team or any collaborating partners have not been able to act as internal examiners, and the University has introduced mandatory training for independent chairs of viva voce examinations. The UWE Code of Practice also contains provision for training of internal examiners, however, the audit team did not see evidence that this training was being implemented. The UWE Regulations and Procedures and Code of Practice for Postgraduate Research Degree Programmes contain clear procedures for formal re-examination and for resolving problems and academic complaints. Students met by the team had little knowledge of the arrangements for complaints, appeals and examination and of the UWE Code of Practice, and they conveyed a general lack of awareness of the regulatory framework for postgraduate research provision at UWE.

139 The Research Degrees Examining Board determines whether a student has complied with the requirements to receive an award and makes a recommendation to Academic Board accordingly. The decision is based on recommendations from viva voce examiners for postgraduate research awards and the outcomes from field boards on taught modules contributing towards the credit requirement in respect of research training.

140 As indicated in section 1, the responsibility for the arrangements for management of academic standards and quality of postgraduate research programmes is located in standing committees that include the Research Committee, RDC, Research Ethics Committee and Research Degrees Examining Board.

141 Students reported variable experiences in relation to publication, funding, provision of learning resources and support. This suggests the need for greater consistency in how research supervisors implement section 9 of the UWE Code of Practice. The student written submission reported limited engagement of postgraduate research students in quality assurance arrangements, such as student representation, and this was further confirmed on discussion with postgraduate research students.

142 University-level training and support is available on a voluntary basis for postgraduate research students with teaching duties. Postgraduate research students, who had teaching duties, told the team that they had attended the 'introduction to learning and teaching' programme that is accredited as a UWE programme and by the Higher Education Academy, and that they had found this valuable.

143 In summary, the evidence considered by the audit team led it to conclude that the policies and procedures for postgraduate research students, including those for support, supervision and assessment, met fully the expectations of the *Code of practice, Section 1: Postgraduate research programmes*, and in general were able to make an effective contribution to the management of postgraduate research programmes. However, the team found a number of examples of variability of practice in application policy and procedures, and a general lack of awareness on the part of students of policies and procedures which might support them. The team therefore advises the University to ensure greater consistency in the operation of arrangements for postgraduate research students as described in the University's Code of Practice, and communicate its policies and procedures clearly to students (see paragraphs 132, 133, 136 and 141).

Section 7: Published information

144 The audit team examined published information, including University-wide policy and procedural documentation; faculty documentation; course handbooks; regulations; the University's website and intranet; prospectuses, and committee minutes.

145 Through its website, the University publishes a substantial and easily accessible range of materials, including a clear set of information about the University (Contact-UWE), its policies and strategies and information about academic and administrative services. It also contains information intended to be useful for particular target audiences, including future students, alumni, businesses and other external organisations, and schools and colleges.

146 There is an accessible range of published information for prospective and current students both electronically and in hard copy. Prospectuses are on the University website, one each for undergraduate study and for postgraduate, professional and research study. Although some students commented on inaccurate course information and misleading module titles, the great majority found information to be accurate. The student written submission (SWS) identified that students would like access to module information before and after study.

147 The SWS offered general praise for the website, although it stated that it is not always up to date. The Briefing Paper commented that editorial control of web-based information is 'challenging' and in need of 'more rigorous quality control'. Editorial control of prospectuses is exercised by Marketing and Communications with input from faculties and services as required. Faculties and central professional services are responsible for the accuracy and completeness of their websites. Marketing and Communications has oversight of branding of the website.

148 Programme specifications are clearly available on the website. Specifications are confirmed at validation and faculty academic registrars have responsibility for publishing and updating them. Course handbooks are also online. The audit team's study of a range of handbooks confirmed that handbooks, although they vary in quality, contain essential information for students. The University Student Handbook, which is reviewed annually, also contains essential information. It is published in diary form, as the 'UWE Diary and Info'. Students confirmed the usefulness of these documents.

149 The University's portal, MyUWE, incorporates Sharepoint, student email, the virtual learning environment, timetabling, library online resources and the student record system. The portal is seen as useful and informative by staff and students. Sharepoint, for example, contains the minutes of major committee meetings and is used for consultative and developmental activities, for example IKEN. Other services include a feedback channel, an announcements channel, a channel allowing students to re-register and pay fees and a channel allowing staff to access and print photosets of students by tutorial or seminar group, the e-Library Metalib service and the Library account web service. The University's Briefing Paper stated that 'priority has been to enhance the student experience so the emphasis to date has been on providing services to students rather than to staff'. The University's virtual learning environment, recognised by staff and students to be an important and improving service, provides a variable range of information and guidance within module sites.

150 Information relating to arrival and induction is also available online. Applicants have access to a personalised UWE Welcome Web page, which provides information relating to the progress of their application and about arrival and induction processes.

151 The University provides a range of published information for staff, including Academic Regulations and Procedures (2008), The Committee Handbook, a 93-page guide to the Graduate Development Programme, and staff development opportunities.

152 Regulations are clearly available online (as is a facility that enables students to calculate their progress towards a degree classification) and in handbooks. The majority of students surveyed claimed to be aware of them, although students who met the audit team were often unsure about arrangements for complaints and appeals. They were, however, generally clear about assessment requirements, especially about regulations governing plagiarism, and about the range of student services available. The team found that student services are particularly proactive in informing students.

153 The results and responses to student surveys are made available to students, but external examiners' reports and programme annual reports are not yet widely available to student representatives (see paragraph 72). Apart from those exceptions, the audit team found that the University makes available the documentation specified in annex F of HEFCE's document 2006/45, *Review of the Quality Assurance Framework: Phase two outcomes*.

154 The University approves collaborative partners' publicity material by persons identified as being responsible in Academic Agreements. A University monitoring exercise of partners' websites in 2008 confirmed the accuracy of promotional material but identified ways in which the information could be more helpful to potential students.

155 The audit team found that reliance could reasonably be placed on the accuracy and completeness of the information that the University publishes about the quality of its educational provision and the standards of its awards.

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