QAA

University of Sunderland

March 2009

Annex to the report

Contents

Introduction

A team of auditors from the Quality Assurance Agency for Higher Education (QAA) visited the University of Sunderland (the University) 16 to 20 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 of the University.

Outcomes of the Institutional audit

As a result of its investigations, the audit team's view of the University 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.

As the University will be subject to a separate audit of its collaborative provision, these judgements do not apply to that provision.

Institutional approach to quality enhancement

The University's current approach to quality enhancement has been to develop a strategy and new system of quality management that combines quality assurance and quality enhancement. The audit team found that the University takes deliberate actions at the institutional level to improve the quality of the learning opportunities available to students.

Postgraduate research students

The audit team concluded that the University's procedures for the support, assessment and supervision of research degrees align with the *Code of practice for the assurance of academic quality and standards in higher education (Code of practice), Section 1: Postgraduate research programmes*, published by QAA.

Published information

The audit team established that the University provides an extensive and accessible range of published information for prospective and current students both electronically and printed. The team concluded that reliance can reasonably be placed in the integrity and reliability of the information that the University publishes about its educational provision.

Features of good practice

The audit team identified the following areas as being good practice:

- the delivery of a clear academic strategy, supported by structures which define responsibility and accountability (paragraphs 11, 100)

- the management of change which has both engaged and developed staff (paragraphs 13, 94)

- the regular predictive analysis of data to support student retention (paragraph 44).

Recommendations for action

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

The University is advised to:

- improve the oversight of regulations pertaining to its awards (paragraphs 24, 39, 42)

- develop a comprehensive evaluation framework for its approach to quality assurance (paragraphs 56, 107).

It would be desirable for the University to:

- reduce the potential for internal conflicts of interest in the chairing of committees (paragraph 14)

- review criteria for the appointment of external advisers in programme approval and review (paragraphs 19, 21, 26).

Section 1: Introduction and background

The institution and its mission

1   The University has two campuses, one in the city centre, the other on the opposite bank of the River Wear. The University traces its origins to Sunderland Technical College which opened in 1901. The institution grew to become Sunderland Polytechnic in 1969, eventually embracing both Sunderland Teacher Training College and the School of Art. In 1992, it became a university, and has full degree awarding powers, awards currently offered ranging from foundation to postgraduate research degrees, including professional doctorates.

2   The University's Corporate Plan stresses its 'exceptional reputation in widening participation…a strong and continually improving academic record…a local and regional contribution which is regarded as exceptional and distinctive' and 'a significantly developed international profile', all of which are encapsulated in a vision to 'be recognised as one a new generation of great civic universities - innovative, accessible, aspirational and outward looking'. This vision is underpinned by an academic strategy, introduced in September 2008, which has three strategic aims: to promote innovative and flexible learning opportunities; to provide a high quality learning experience with exemplary support; and to prepare students for fulfilling employment and a contribution to society.

3   There has been growth in student and staff numbers in recent years from 11,351 to 11,682 full-time equivalent (FTE) students and from 629 to 673 FTE academic staff between 2002-03 and 2006-07 according to the Higher Education Statistics Agency data. Collaborative provision is a very important part of the University's activity, accounting for some 29 per cent of the student body, but was not the subject of this audit. Data submitted by the University for 2007-08 showed there to be 8,815.3 FTE students not associated with collaborative provision, of whom 84.6 per cent were undergraduates, 13.4 per cent taught postgraduates and 2 per cent postgraduate research students. Of this total, 13.7 per cent comprised overseas (non-European Union) students. The gender balance was 44 per cent male, 56 per cent female. Of the total FTE (including that for collaborative provision) 27 per cent was made up of part-time students, mostly undergraduates.

The information base for the audit

4   The information available to the audit team included the following QAA documents:

- Institutional audit report, 2004

- Collaborative provision audit report, 2006

- Review of postgraduate research programmes report, 2006

- Major review of healthcare programmes report, 2005.

5   The University provided the audit team with documents and information including a helpful and informative Briefing Paper with hyperlinks to supporting material, and intranet access to a wide range of internal and published documents.

6   The audit team was grateful to representatives of the University of Sunderland Students' Union who produced a student written submission that included helpful research on student views of the University.

Developments since the last audit

7   Since the last Institutional audit in November 2004, the University has engaged with QAA through a Major review of healthcare programmes in November 2005, an audit of collaborative provision in April 2006 and a Review of postgraduate research degree programmes. The University delayed taking substantial measures in response to the 2004 Institutional audit until the appointment of a new Deputy Vice-Chancellor (Academic) in September 2006 and a new Director of Academic Services in March 2007, and then did so as part of a general review of strategy, regulations and structures in time for the beginning of academic year 2008-09.

8   In 2004, QAA's Institutional audit team recommended that the University should consider further action in a number of areas to ensure that the academic quality and standards of the awards that it offers were maintained. The team advised that:

- the Academic Board should ensure greater clarity in the articulation and operation of its policy, making explicit the minimum requirements for adherence across the University as a whole. In addition, that Academic Board should ensure central oversight and assurance in the operation of its assessment boards

- in the context of the University's key strategic initiatives, the University should refine its definitions of quality assurance and quality enhancement, and establish more clearly its interpretation of the relationship between them. In doing so, the University was advised to secure an approach to improvement that was more systematic, timely and strategically driven

- the Academic Board should introduce measures to secure a greater degree of critical analysis throughout its annual monitoring process, and more consistency in the annual monitoring reports from schools. This was hoped to increase the University's capacity for synthesis of key matters and thereby ensure that annual monitoring made a more effective contribution to strategic decision-making and institution-wide implementation

- the recommendation made by the previous audit team's report of 2001 for more explicit institutional consideration of professional, statutory and regulatory body accreditation reports, and the introduction of a standard procedure for responding to these, should be fully addressed to capture intelligence and good practice

- as identified by the 2001 audit team, the University should ensure that the development and implementation of improved mechanisms for the collection, analysis and use of student feedback were addressed as a matter of priority

- the University should prioritise the enhancement of management information and data analysis, build staff capacity and maximise the benefits of systems to address the acknowledged problems with the quality of statistical data

- the University should secure, and assure, an equivalence of student experience for students registered on the Joint Honours Scheme.

9   The audit team also recommends the University to consider the desirability of:

● keeping under review personal support for students to ensure that the variety of personal tutoring arrangements continued to reflect their particular needs.

10   The current audit team confirmed that the University had made substantial progress in addressing these recommendations, especially through the introduction of a new framework for managing the quality of learning opportunities and academic standards in the context of a revised academic strategy. The team noted, for example, that considerable effort was made to safeguard the experience of combined subjects (formerly joint honours) students, whose programme was located within the Faculty of Education and Society and subject to detailed annual monitoring. These students were offered fortnightly meetings with their personal tutors, had their own student-staff liaison committee and were given access to their own communication zone on the University's intranet. The team was also satisfied that in respect of Academic Board oversight, consideration of professional, statutory and regulatory body reports, student feedback and collection and analysis of data, the University had dealt successfully with recommendations made at the previous audit. The team noted the progress which the University had made towards the implementation of a coherent quality enhancement strategy, towards increasing the effectiveness of annual monitoring and towards the consistent operation of the personal tutor system.

Institutional framework for managing academic standards and learning opportunities

11   During 2007-08, the University undertook a fundamental review of its strategic aims, regulations and executive and deliberative structures, with the result that for academic year 2008-09 the following were revised: the Academic Strategy, the hierarchy of Academic Board committees and subcommittees, the Quality Management Policy with several concomitant processes and regulations, and the location of academic departments in four faculties (instead of five schools) each with a dean and associate deans. Because of the recency of change, there was therefore limited evidence available to the University and to the audit team from which to evaluate the effectiveness of current systems, although all groups of staff whom the team met spoke positively about the recent changes which had closely aligned the committee structure to the priorities of the Academic Strategy, and had clarified lines of communication and of responsibility within and between the faculties and services. The team concluded that the new arrangements facilitated vertical communication between and within university and faculty management levels, and also aided communication between similarly situated management levels, including dialogue between faculty and services staff. Responsibilities and lines of accountability are set out in role profiles, and clearly understood by staff. The team concluded that the recent, smooth implementation of a clear Academic Strategy and new accompanying structure represents good practice.

12   The new Academic Strategy articulates with the current Corporate Plan and emphasises three strategic aims. These concern programme development, the student experience, and employability and outreach. The deliberative systems have been reorganised so that while the Academic Board retains formal responsibility for all matters pertaining to academic quality and standards, the three committees which report to it are new. These cover, respectively, Academic Development, Academic Experience and Academic Futures. Their terms of reference reflect the three strategic aims, and their membership includes the associate dean of each faculty with responsibilities relevant to the work of the committee and also senior members of services. This arrangement is mirrored at faculty level where there are three corresponding faculty committees, each chaired by the associate dean who attends the cognate University committee. The Academic Experience Committee, the terms of reference of which include advice to the Academic Board on matters of academic quality and standards, oversees the Quality Management Sub-Committee, which deals with operational matters in quality assurance and enhancement. The Research Sub-Committee reports on different aspects of its work to both the Academic Experience Committee and the Academic Futures Committee. This structure, which replaced one

based upon quality assurance and learning enhancement boards at both university and school (now faculty) level, was approved by Academic Board at its final meeting of 2007-08, along with the Academic Strategy. In turn, the objectives and key performance indicators for each of the three committees were agreed at the Academic Board's first meeting of 2008-09. Associate deans of faculty also meet periodically outside the committee structure to discuss university-wide issues relating to their respective areas of responsibility.

13   Staff had been consulted at various stages during the development of the new strategy and structure, had received staff development on their implementation and in some cases had taken on new roles, for example as associate deans of faculties. It was apparent to the audit team that the restructuring had been effectively communicated to staff and student representatives, as had regulatory changes. Members of staff who met the team consistently affirmed their engagement with the process of change and their commitment to making a success of the outcome. Accordingly, the team considered there to have been good practice in staff development and staff engagement in the making of the changes.

14   At the time of the audit, there remained some matters for development. For example, it was evident that, by the time of the audit, the Academic Futures Committee had not made the same impact as the other two committees at this level, having received its terms of reference and begun to engage substantially with its remit for research and reach-out only in January 2009. There was inconsistency in the inclusion of standing agenda items in faculty-level committees for the reporting of matters from the equivalent University committees. In particular, the audit team identified potential conflicts of interest which might arise from the current arrangements for chairing committees and subcommittees. The Deputy Vice-Chancellor (Academic) frequently chairs the Academic Board on behalf of the Vice-Chancellor while also being the designated chair of its subordinate Academic Futures Committee. The Academic Experience and Academic Development Committees are chaired by faculty deans who receive reports and proposals from their own faculties. The University confirmed to the team that the chair of the Academic Development Committee did not step down when a proposal from that person's own faculty was under consideration. Within Applied Sciences, the Associate Dean, Student Experience (Quality and Enhancement) chairs the Faculty's Quality Management Sub-Committee, the Faculty's Academic Experience Committee and the University's Quality Management Sub-Committee. While provision is made in this case for a deputy chair to take over the University Quality Management Sub-Committee when independence cannot otherwise be sustained, for example, over the approval of external examiners proposed by Applied Sciences, the team considered it desirable for the University to reduce the potential for such conflicts of interests by revising its arrangements for the chairing of committees at both university and faculty level.

15   It was the view of the audit team that, overall, the framework for the management of academic standards and the quality of learning opportunities adopted by the institution was well-designed in relation to the Academic Strategy, clearly understood by staff, and operated effectively.

Section 2: Institutional management of academic standards

Approval, monitoring and review of award standards

16   In its Briefing Paper, the University identified its Academic Board as the owner of academic standards, with delegated authority to the Academic Experience Committee to 'maintain and develop robust procedures and regulations to ensure that academic standards are maintained in line with national benchmarks'. These procedures are embodied within processes of programme approval, periodic review, annual monitoring and programme and short-course modification. In practical terms, however, the University's Academic Services Department manages these processes and also provides staff development for academic issues and postgraduate research programmes.

Approval

17   The revised process has moved from a dual-level process, with a faculty stage followed by a university stage, to a single event, informed by initial approval through Academic Development Committee (which monitors resource needs and overall portfolio planning and gives approval to proceed to validation of the programme).

18   A development team is required to engage with the Academic Infrastructure (and Northern Ireland Credit Accumulation and Transfer System guidelines) in establishing the external reference points for a new programme. Additionally, liaison is required with the University's Student and Learning Support Service in order to ensure that resources exist to support delivery. This process is monitored through the Academic Development Committee which includes representation from all support services.

19   The approval panel, including at least one member external to the University, is approved by the Quality Management Sub-Committee. Vocational programmes have both an external academic and an employer representative. However, there is not sufficient guidance provided for the appointment of external panel members to ensure the recommendation of external panel members with sufficient experience to fulfil their duties. Scrutiny of the documentation within one sampling trail indicated that an external member was not clearly qualified to the level of the award being approved when this might have been expected to be the case. It was the view of the audit team that it would be desirable for the University to change its appointment criteria and provide clearer guidance to programme teams.

20   An approval panel meeting typically leads to recommendations upon which approval is dependent, or which require longer-term engagement from the programme team. The completion of recommendations that are conditions for approval is signed off by the panel, and approval is signalled to the chair of the Quality Management Sub-Committee. Longer-term recommendations are monitored at the next point of annual review.

21   Through the scrutiny of documentation in the sampling trails, the audit team considered that the above was a robust process which provided adequate assurance of engagement with external reference points, including subject benchmark statements and *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ). Although, at the time of the audit, the system had not been tested in all parts of the University, there was clear evidence that the approval process had operated satisfactorily, with good reporting and completion of recommendations, and assurance that recommendations for immediate action had been followed up. However, it would be desirable for the University to revise its criteria for the appointment of external panel members.

Annual monitoring

22   Following the last Institutional audit, the University created a revised process of annual monitoring 'alternating a lighter-touch reporting requirement with a more extensive one on a two-year cycle'. However, this 'quickly proved to be excessive in its demands and in the context of a full review of all our main quality processes' and, shortly before the Institutional audit, the University decided to introduce a new process that had been piloted in one department.

23   Annual monitoring in the University is well supported by data on completion and progression (which feeds into more extensive work in this area in support of the university-wide project on student transition and retention). Annual monitoring uses standard reporting protocols, with a December date. Reports viewed by the audit team were ample, if a little descriptive at times, and action plans were concise and focused.

24   The University's process for programme and short course modification and module approval and modification (minor modifications process) allows for extensive programme modification without full programme reapproval. Modifications allowed within the minor modifications process

include change of programme title, the agglomeration of single programmes into frameworks, the splitting of frameworks into programmes, and unlimited module changes, additions and deletions. Changes may be made each year, and changes may be made to previous changes, as long as the overall learning outcomes of the programme are not changed. While the audit team heard that there were plans and procedures to track and monitor the incremental effect of such changes, given a six-year review cycle, the audit team considered it a challenge for the University to keep track of all such incremental changes. Thus, the team recommends that it is advisable for the University to develop processes to monitor the integrity of its programmes which change as a result of minor modifications enacted between periodic reviews.

Periodic review

25   As a part of its general review of quality assurance procedures, the University has recently introduced a revised six-year cycle process of periodic review for taught programmes. This culminates in an event of two or three days (depending on the scope of the review), and includes extensive student input. The review is for re-approval of the programme for a maximum of six years.

26   A periodic review panel includes membership external to the University, which is slightly more extensive than that required for approval. External panel members are approved by the Quality Management Sub-Committee. As with initial approval or validation panels, the audit team considered that it would be desirable for the criteria for the appointment of external panel members to offer more advice to the programme team with respect to the experience and seniority of likely candidates.

27   In reviewing the University's processes for the approval, monitoring and review of academic programmes, the audit team found that, while very much in the opening stages of operation, and within the qualifications noted above, overall these processes provided a solid basis for assuring the standards of academic awards.

External examiners

28   The University operates a two-tier examination board process, with examination boards operating both at module and award levels. External examiners are appointed at both levels and can, thus, comment both on the standards of modules within a particular award and on the operation of the University's regulations for progression and the classification of achievement. More than one external examiner may be responsible for an individual award. External examiners' authority extends to the conducting of oral examinations with students.

29   The University's policy on the appointment and duties of external examiners is set out within the Quality Handbook. This gives clear guidance for the criteria for appointment (expressed both in terms of the qualities desired within a candidate as well as in terms of the restrictions inhibiting appointment), and provides a useful brief both to examiners and to appointing departments in the operation of the role within the University. External examiner nominations are received, and approved, by the Quality Management Sub-Committee. External examiners are offered institutional induction, particularly where they are new to the role, and mentoring schemes have been in implemented in the Faculty of Business and Law.

30   In meetings with staff, the audit team heard that the Academic Services Department maintained a list of current external examiners of the University. The University has a good level of monitoring and safeguarding against reciprocity of duties, and therefore potential conflicts of interest, with other higher education institutions.

31   Through sampling trails, the audit team saw external examiner reports and the responses to those reports made through annual monitoring. Reports covered both the standards of awards and the quality of student learning opportunities, and also gave general advice to the programme team and the University. Reports were, in the main, full and helpful, and responses

were focused and detailed. Where an external examiner raised matters that were beyond the remit of the programme team, these were passed to faculty level in faculty annual reports. The Quality Management Sub-Committee also receives an annual overview report on external examiners which raises issues identified for the University as a whole. The audit team heard that this report instigates action between the faculties and the Academic Services Department, and this is generally followed through the executive structure under the remit of the associate deans (student experience). All reports are received by the Academic Services Department and considered, alongside responses from programmes to individual issues, by the Deputy Vice-Chancellor (Academic).

32   The audit team found that the University had a clear understanding of the role of external examiners, had put this into operation across the University, and maintained a careful overview of the process. External examiners' reports were considered seriously and fed into other quality assurance procedures, instigating prompt action at the required level. The comments of external examiners are made available to students. The University keeps a careful oversight of the appointment of suitable external examiner candidates, and ensures that no reciprocal arrangements exist.

33   The audit team concluded that the University's approach to external examining was making a significant contribution to the security of the academic standards of its awards.

Academic Infrastructure and other external reference points

34   The University's procedural documents and academic reports show engagement with external reference points, chiefly the FHEQ, subject benchmark statements, the *Code of practice*, the Northern Ireland Credit Accumulation and Transfer system, the Burgess Report on higher education qualifications and, to some extent, the *Standards and Guidelines for Quality Assurance in the European Higher Education Area*.

35   In its Briefing Paper, the University stated that is had 'adopted a more systematic approach to mapping our procedures against the QAA *Code of Practice*', and this mapping was evident to the audit team through the minutes of the (former) Quality Assurance Board and (current) Quality Management Sub-Committee.

36   Validation and periodic review reports clearly reflect the engagement of external panel members in validation and review events. Requirements of professional, statutory and regulatory bodies are also clearly met in the formulation and conduct of validation and review events.

37   The audit team considered that the University had fully engaged with a range of external reference points, and that this engagement was clearly evidenced within documentation giving guidance on, and responding to, its quality processes.

Assessment policies and regulations

38   After making small changes to its Academic Regulations in 2007, the University undertook a more major review, leading to the introduction of new regulations at the beginning of the 2008-09 academic year. These regulations apply to students commencing their academic programmes in September 2008, and transitional arrangements are in place for continuing and progression award students. In meetings with staff, the audit team heard that the annual process of staff development and training for examination board chairs and officers, organised by the Academic Services Department, would fully advise chairs as to the effect of these revised and transitional regulations, particularly with regard to student progression and completion, areas where changes to regulations have had an important impact. When required, for example by a professional, statutory or regulatory body, programmes may seek exceptions from the Academic Regulations through the validation process. Such exceptions are subject to the approval of the Academic Board.

39   The audit team noted that the Academic Regulations did not fully cover all the awards of the University, the recently implemented (and currently delivered) professional doctorate not being listed. While in meetings with staff the team heard that the Academic Board received and approved an up-dated version of the Academic Regulations each year, the team advises the University, as one aspect of keeping oversight of academic standards, to review its processes for tracking and logging changes to the Academic Regulations, to ensure absolute certainty and clarity at all times.

40   The University operates a wide range of assessment types in its academic programmes, and has implemented an Assessment Policy, which fully covers all aspects of assessment, and sets clear guidelines for staff and students. These are further iterated in module guides and student handbooks which establish the expectations of students in the assessment of their work. In meetings with students, the audit team heard that students fully understood what was expected of them and received clear and helpful guidance from staff. The Assessment Policy also sets expectations for the quality and timeliness of feedback to students. Assessment feedback was raised within the student written submission as an area within which the University might establish firmer control. There are standard regulations for the submission of late work, and the use of mitigating circumstances protocols which operate across the University.

41   Examination boards operate at both module and programme levels; the former confirm marks and assure standards, the latter deal with matters of student progression and achievement. Progression is defined as student progress across stages, rather than levels of an award, and a stage may include modules from more than one level. Since the 2004 Institutional audit, the University has had considerable debate regarding the regulations around compensation and condonement of student failure in modules, and subsequent impact upon student progression. These regulations have been revised in order to improve clarity and consistency. Members of staff met by the audit team were confident that they could exercise the revised regulations equitably for both new and continuing students. The Academic Services Department conducts annual refresher training for chairs of examination boards.

42   Overall, the audit team's view was that assessment was carefully handled and secure. Institutional-level processes managed most aspects, and where local deviations were necessary, these were adequately reported and secure. However, there was some inconsistency in the reproduction of standard material, particularly with regard to the listing of the awards offered by the University, and the team advises the University to implement, as part of the improvement of oversight of regulations pertaining to its awards, a more secure process for ensuring that changes to regulations appear in all relevant documents.

Management information - statistics

43   The University maintains figures on student admission, progression, completion and achievement, developed in a common format and used in annual monitoring. This data includes details on gender, ethnicity, age, and mode of attendance and, when fully utilised, are particularly effective in the monitoring of progression and achievement. While it was clear that analysis of this data varied somewhat across different reports, it provides the basis for clear and consistent reporting.

44   Similar data informs a university-wide project on student transition and retention, which takes data on attendance, submission of assessment, achievement and progression. This data is monitored each month at university and faculty levels. In discussion with staff and through the minutes of the university-level group charged with the operation of this project, it was clear that this data is used effectively, enabling predictive analysis of issues around student progression and retention. The audit team further heard that this data was enabling the University to identify groups of students who might benefit from tailored induction and support, and that this work was informing development of these areas. The team considered that this demonstrated good practice. The Academic Board also receives overall figures on student achievement, progression and complaints.

45   The audit team considered that the University had clearly identified, and was continuing to develop, an approach to the use of management information which supported the assurance of the standards of its awards. Common datasets feed into key quality assurance processes and the operation of the project on student transition and retention, supported by the regular predictive analysis of data, enables a high level of responsiveness to issues of retention and progression.

46   The audit team concluded 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.

Section 3: Institutional management of learning opportunities

Academic Infrastructure and other external reference points

47   In its Briefing Paper, the University stated that it takes careful account of the Academic Infrastructure in reviewing its policies and procedures. The University has adopted a mapping approach to ensure the continued fit of its procedures with the revisions of the *Code of practice*. For example, in 2007, the University made comparisons of its practice with the 2006 revisions of *Section 6: Assessment of students,* and *Section 10: Admissions to higher education*.

48   The outcomes of these comparisons were reported to the Quality Assurance Board and, in the case of assessment, resulted in the drafting of an updated Assessment Policy as part of the 2008 revision of the Quality Handbook. The resulting 2008 Assessment Policy is clearly referenced against the *Code of practice, Section 6*.

49   The audit team confirmed that the University had also paid heed to other external references points such as the Leitch report on skills and employability, and the European standards and guidelines on quality assurance in reviewing the programme approval processes. In addition, use is made in programme development, approval and review of the benchmark statements published by QAA. The team concluded that the University makes effective use of the *Code of practice*, other parts of the Academic Infrastructure, and other external reference points in ensuring the quality of the students' learning opportunities.

Approval, monitoring and review of programmes

50   Programme approval is initiated by a proposal, made to the Academic Development Committee, which includes a rationale for the programme, and consideration of marketing, outline resourcing and fit with the strategic direction of the school and the University. Approval and review panels receive documentation which includes the programme specification, module outlines, the *Code of practice*, the FHEQ and subject benchmark statements. Programme approvals also require a statement of learning resource approval from the library and a statement from the Careers and Employability Service to confirm that careers advice and guidance issues have been addressed and align with the University's Career Education, Information and Guidance Policy. In the case of periodic reviews, the documentation also includes the recent annual monitoring and external examiners' reports. The audit team was able to confirm that there was specific consideration by the panel of the reference documentation, with regard to learning opportunities, as recorded in the resultant reports.

51   The audit team read documentation from completed cycles under the previous system and the first stages of reviews undertaken under the current system, although these could not be tracked to completion. The documentation provided from the previous system showed that that review process had been thorough action points had been identified and their completion signed off by the relevant committees.

52   The approval panels' reports contain points of commendation and also recommendations, these latter being divided into those to be completed by the next annual monitoring report and those that must be acted upon prior to commencement of the programme. These recommendations are responded to by the proposing department, and completion of action points confirmed by the Quality Management Sub-Committee. In accordance with the revised committee structures for the University, these procedures come within the purview of the Quality Management Sub-Committees at faculty and institutional levels. Given the relatively recent introduction of the new approvals process, the audit team was unable to confirm the follow-up of the panels' recommendations through the annual monitoring process.

53   The report of the 2004 Institutional audit included recommendations that led to the University's introduction of revised annual programme monitoring. This required the programme leaders to produce annual monitoring reports (AMRs) incorporating consideration of student recruitment, retention and achievement data, feedback from students, staff and external examiners and the actions arising from recommendations made in the previous year. In addition, the programme leaders were required to produce a more detailed biennial report on the quality of teaching, learning and assessment, and the overall student experience.

54   Documentation read by the audit team demonstrated that these AMRs were extensive and completed in detail, and that completion of previous action points had been confirmed by the relevant boards. Introduction of this revised scheme of monitoring was made in conjunction with an increase in the term for periodic reviews from a five to a six-yearly cycle, the additional information requested for the AMRs being designed to accommodate this change.

55   The University stated that the new AMR process had 'quickly proved to be excessive in its demands', being seen as 'particularly burdensome' and having attracted criticism as 'a sterile activity'. In this context, the audit team noted that although the reports were extensive, some sections were copied from one year's report to the next with little or no change. In response to the internal criticism, the University is piloting a new system for the AMRs. This process is centred around the completion of a form with a development theme, including the identification areas of good practice, areas of concern, progress on current action points with associated evidence, and identification of action plans. This pilot is now in its second calendar year of operation, and the team was informed that the department involved considered it to be more effective than the parent system, particularly for maintaining a record of activity, and for fostering improvement to students' learning opportunities. At the time of the audit, the University had plans to evaluate the pilot.

56   The audit team came to the conclusion that the processes for programme approval, annual monitoring and review with regard to the quality of learning opportunities were being implemented in line with the University's procedures. The procedures serve to ensure the continuing provision of programmes of study that help students to achieve the intended learning outcomes of their programmes and attain their awards. However, the current procedures are new and, in order to reduce risks, it would be advisable for the University to develop a comprehensive evaluation framework of its approach to quality assurance.

Management information - feedback from students

57   Following the recommendation from the 2004 QAA Institutional audit that the University should 'improve mechanisms for collecting, analysing and using student feedback', the 2008 Academic Strategy includes the objective to 'listen to the student voice and engage with students in a supportive manner'. The student representation system has been strengthened. The Student Satisfaction Working Group was established in 2006 by the Executive Board. This Group identified recommendations among which was that of ensuring an overall coherence of approach to survey activity and analysis under the direction of the Marketing and Communications Service. Changes implemented included revising the University's student survey to focus beyond the programme of study, so as to avoid duplication with programme level reviews and provide a broader picture of

the student experience, and to conduct this survey every year. At the same time, the frequency of module surveys was reduced to biennial, with the use of focus groups to gain feedback during the alternate years.

58   Also, in response to the recommendations, a new Student Representation and Feedback Policy was implemented from September 2008, following consultation with the Students' Union. There is student representation for university-level committees, including the Academic Board, the Academic Experience Committee, Academic Development Committee and the Academic Futures Committee and Quality Management Sub-Committee, through the sabbatical officers, and with research students having representation on the Research Sub-Committee. The student body has representation on the matching faculty-level committees and programme and module boards of study through departmental student representatives. The new policy also sets out a formalisation of programme representation, with each faculty being required to have staff-student liaison committees (SSLCs) to cover all taught programmes.

59   Also in 2008, the Academic Experience Committee established a 'task and finish group' to consider further means by which the University could ensure that the students' voice is heard effectively. Initial recommendations arising from these discussions include 'branding' the concept of the 'student voice' to enhance students' awareness of the opportunities they are given to provide feedback and of the actions taken in response'. At the time of the audit, these processes were still under discussion, and actions remained to be implemented.

60   The Student Representation and Feedback Policy sets out clearly the expectations of the University for soliciting student feedback. The AMRs and committee minutes showed that procedures were being operated effectively across the University. The Policy also requires that the outcomes of student feedback should be made available to the student body through means that include the virtual learning environment and student representatives on SSLCs. Lecturers are expected to make students aware of changes resulting from their feedback, and students confirmed to the audit team that this took place.

61   The Marketing and Communications Service undertakes the analysis of the National Student Survey (NSS) data; this is circulated to faculties for action, and considered in conjunction with the University's annual student experience survey by university-level committees. University student survey analysis is effectively included in programme review and AMR as part of the set of student feedback information. The NSS outcomes are also discussed extensively at the meetings of the faculty academic experience committees.

62   The audit team concluded that the University has effective systems for acquiring feedback from students and for analysing the outcomes of student surveys.

Role of students in quality assurance

63   At the time of writing of the student written submission, the Student Representation and Feedback Policy was not fully in operation. The University has a multiple system for student representation. The sabbatical officers of the Students' Union on the university-level committees including the Academic Board and its subcommittees. Research postgraduates are represented by two elected representatives on the Research Sub-Committee. The student written submission notes that the Students' Union 'enjoys a good working relationship with the University, enabling representation of students at a high strategic level'.

64   The student written submission noted that 'although it would be premature to pass judgement on their success, the progress made to date has certainly been very encouraging'. The Students' Union has a Student Representation Department with a Student Representation Coordinator responsible for training and supporting the representatives. The student written submission reported that in 2007-08 only one third of all the representatives had received training. In meeting with a group of student representatives, the audit team learnt that the

current representatives had all received training, and believed that it was effective in supporting them in their roles.

65   The SSLCs vary markedly in the number of programmes covered, from two to 22, programmes in similar subjects being grouped together, with undergraduate and taught postgraduate programmes together in some instances. The SSLCs are chaired by a senior member of faculty staff, frequently the head of department or the associate dean, student experience. The faculty policy statements also set out the operational procedures for the committees, the processes for elections of representatives, and the roles for the members.

66   Students told the audit team that departments took representatives' input seriously, and that they acted on suggestions for improving learning opportunities. Students who were not representatives were not all aware of whether the minutes or other outcomes of SSLC meetings were publicised. The survey undertaken for the student written submission, however, did reflect areas of student concern, with only 38 per cent of respondents feeling confident that their feedback was listened to, and a further 24 per cent who did not believe that the student representation system worked well.

67   Each faculty has a set of committees that match the University's higher-level committee structure; these faculty committees have student representation. Student opinion also feeds into quality assurance procedures such as programme review, which involves meetings with students to obtain their feedback. Students are not members of the review panels. According to the University's policy statements, the representatives for the higher-level committees are elected from among the SSLC membership, although the representatives whom the audit team met were unaware of this procedure, and reported having been invited to attend the other committees as they wished. The representatives from the higher-level committees informed the team that they considered that the University took their views seriously, with action taken on learning opportunity issues raised at faculty and University committees.

68   The audit team audit concluded that the University's mechanisms for engaging students in quality assurance make a significant contribution to the quality of the learning opportunities provided.

Links between research or scholarly activity and learning opportunities

69   The University's Briefing Paper stated that it is 'part of our mission that research should inform our teaching' and the current programme specification template includes the requirement to 'describe the areas of research/consultancy/outreach/scholarship which inform the programme'. There is also an explicit recognition that 'teaching and learning that is informed by research activity and advanced scholarship adds greatly to the overall students learning experience'.

70   The University has supported developments in the first three of the Higher Education Funding Council for England's (HEFCE) areas for research-informed teaching: keeping the curriculum up-to-date; enabling staff to engage with developments in their field and link them to teaching; and enabling students to experience research and develop research skills. However, it recognises that there has been insufficient evaluation and dissemination of this practice, and that there has been incomplete embedding of research-informed teaching in institutional structures. To this end, the University has established an initiative to progress research-informed teaching, to be implemented during the 2008-09 academic year, with each faculty being required to undertake an audit of current research-teaching linkages and to identify the ways in which research and scholarly activity inform curriculum design and development of teaching, learning and assessment. This work is supported by central University funding and staff support.

71   The University is taking steps to make an explicit link between its developing research plan and research-informed teaching. Following the outcomes of the 2008 Research Assessment Exercise of HEFCE, the University implemented a bidding process for the establishment of 'Beacon' research areas, to be supported by quality related funding, and the proposal to be

submitted by departments should include statements identifying the relationship to taught programmes and how the research will impact on the student experience.

72   The audit team found evidence for current research-teaching linkages in the project work undertaken by students in the final year of undergraduate programmes, and also in the taught master's programmes, with some specialist modules also showing evidence of a link to subject research. In discussions with the team, students said that they were impressed by the currency of some of the programme materials and the external contacts of academic staff. Pedagogical research activity, for example in e-learning with the use of materials developed for an online virtual world, also provides positive impact on the learning opportunities available to students.

73   The audit team concluded that the University was taking steps to develop the links between research and teaching to inform curriculum content and design and so enrich the student learning experience.

Other modes of study

74   The University manages a very extensive portfolio of collaborative provision which will be the subject of a separate audit of collaborative provision. It also offers programmes involving distance learning, placements and work-based learning. The distance-learning portfolio is restricted to a very small number of programmes, being mainly at postgraduate level, and these are currently managed within the framework of existing quality assurance systems.

75   Scrutiny of student handbooks setting out the support for placements showed that this was comprehensive, including provision of guidance regarding finding the placement, the processes of assessment and the level of support that could be expected from the University and the placement provider. The stages of engagement with a placement provider were described in detail by the programme leaders to the audit team, who concluded that these were appropriate. Students described their experience of the assistance provided in finding a placement and the support afforded during the placement both from the University's staff and the placement supervisor as generally good. There were, however, variations in this area, with the support provided by some departments being perceived to be less vigorous, and with placement supervisors apparently not receiving briefing about the students' requirements.

76   The University has developed and approved a framework for the operation of work-based learning, published in 2008 as part of the update of the Academic Quality Handbook. This framework encompasses programme structures ranging from foundation studies certificates through to master's programmes. As part of the updating, the University compared its work-based learning protocols with revised *Code of practice, Section 9: Work-based and placement learning*. At the time of the audit, the University had also just established a 'task and finish' group to scrutinise the management of work-based learning within the University, as it had recognised that there was a need for a full typology and evaluation of links. As a consequence, the Academic Development Committee had also agreed that work-based learning should be a standing item on its agenda.

77   A Centre for Flexible Learning has been established in the Faculty of Business and Law with the aim of developing expertise in the development and delivery of programmes by distance and work-based learning within the Faculty and also more widely across the University.

78   The audit team concluded that the University has suitable mechanisms to enable it to offer effective learning opportunities through its provision of distance, work-based and placement learning.

Resources for learning

79   In its Briefing Paper the University expressed its aim 'to ensure that students have access to appropriate and quality resources at the point of need and, increasingly, independent of time and place'. The library offers services at both main campuses, and the University affirmed that 'we work closely with faculties to ensure that, wherever possible, resources and library staff are aligned with the principal programme delivery points on each site'. Through the minutes of meetings at faculty and institutional levels, and in meetings with service personnel, the audit team confirmed that there are clear routes for effective discussion between service providers and academic staff, with the services being represented on committees from school to university level. Furthermore, the representatives who met the team welcomed the revised, increased clarity of responsibility and communication through the associate deans and committee structures.

80   The library and Information Technology Services receive feedback from staff and students along a variety of paths, including the annual monitoring reviews. The audit team was informed that these are used to make subsequent resource investments in faculties, and examples were given of this. Additional routes for student feedback on service provision come from module surveys, the University's annual survey and the NSS, all of which evidence an overall high level of satisfaction on the theme.

81   The audit team found that the University's arrangements for the provision, allocation and management of learning resources were effective in maintaining the quality of the student learning opportunities.

Admissions policy

82   The Academic Strategy has among its objectives the promotion of the experience of university education to participants from under-represented groups. Consideration of applications to taught programmes is governed by the University's admissions policy which sets out criteria for admission, and the procedures for recruitment and admission of students.

83   Admissions criteria are subject to annual review, and are applied by admissions tutors and an admissions team. During the 'clearing' period of applications placed through the University and Colleges Admissions Service, the admissions teams are supported centrally by the Admissions Support Unit, members of which receive compulsory training. Central and faculty admissions staff meet regularly as an Admissions Coordinators' Group in order to discuss common themes, with the intention of disseminating good practice and consistency in applying the University's policy.

84   As part of its approach to admissions, the University permits accreditation of prior learning (APL) where this learning had been achieved through formal study or through work experience outside the framework of a higher education programme. At the time of the audit, the University was developing a new policy governing the application of APL.

85   Admissions tutors and programme leaders are permitted to exercise discretion in admissions for non-standard applications; in these cases it is standard practice to use interviews to explore candidate suitability. Certain programmes of study carry entry requirements that are additional to the academic credentials required. These requirements include such matters as concurrent work experience, or special English language proficiency for international students intending to take pharmacy programmes. These additional entry requirements are authorised as part of the programme approval process.

86   In the view of the audit team, the University has developed a coherent and clearly defined admissions policy that permits local interpretation, and is being consistently applied. The University's approach to admissions meets the expectations of the *Code of practice* and makes a positive contribution to the management of the quality of learning opportunities.

Student support

87   The Academic Board has devolved to the Academic Experience Committee responsibility for maintaining oversight of all aspects of the student experience. The Academic Experience Committee has produced a new Student Charter.

88   The University implemented a new policy on personal academic tutoring in September 2008. The policy sets out the minimum expectations regarding student accessibility to personal tutors, the conduct expected, and the range of a tutor's responsibilities. Prior to the implementation of the revised policy, the approach to personal academic tutoring had been inconsistent, and this inconsistency had been identified in analyses of student feedback viewed by the audit team in the student written submission. The approach had been identified as a point of recommendation in the QAA Institutional audit report of 2004. Students whom the 2009 audit team met praised the support that they had received, indicating that in some areas practice already met the expectations of the new policy.

89   There is a Disability Service (which includes support for students with dyslexia) located within the Student and Learning Support Unit. Responsibility for specialised learning support is shared between central units (such as the Disability Service) and faculties, with each faculty appointing a liaison contact. The University informed the audit team that, in addition to the faculty contact, there was a considerable level of expertise among many of the teaching staff, some of whom had a professional interest in this area.

90   Employability is a feature of the Academic Strategy, and the University stated that it was developing a strategic approach to skills development. There is a central Careers and Employability Service, and representative staff from the unit are members of the faculty-level academic futures committees. The University's strategic approach to careers and employability is embodied in a new Career Education, Information and Guidance Policy that reflects the institutional commitment to developing employability. The audit team saw evidence that generic skill development that addressed future employability featured in the documentation for new programme proposals in line with the expectations of the Academic Strategy. Meetings with students provided evidence that some programme teams were involved the Careers and Employability Service to provide guidance to students at the later stages of their studies.

91   Much specialist advice, covering matters such as a counselling service and financial advice, is made available to students by professional staff. These are located in a dedicated centre in 'The Gateway' area of the administration building, provide a 'one stop shop' for guidance or referral, and are supported by an extensive set of information on a dedicated website. Additional support is available from a similar set of services in the Students' Union.

92   There are two members of the central University staff with specific responsibility for providing support to international students. Their role is supported by detailed and wide-ranging information on the University intranet, and complemented by a prospectus that has been designed especially for international students. The Students' Union supports international students particularly through the Welfare/Immigration Officer and other colleagues in the Union's Advice Centre.

93   Overall, the audit team concluded that the University offers a comprehensive range of services to support students in their use of learning opportunities, and that these are well-matched to its strategic objectives. The University has addressed the recommendations from previous audits regarding the development of mechanisms to promote consistency in the provision of personal tutoring. The team noted that sufficient time had not passed for a full evaluation of this action.

Staff support (including staff development)

94   The University's Human Resources Service aims 'to create and develop an inclusive and supportive working environment where staff are highly valued and feel motivated, based on fairness, equity and business needs'. The audit team noted that this, together with the recently revised Staff Development Policy and the Developmental Appraisal Scheme (which applies to all academic staff except visiting lecturers), was set firmly in the context of meeting corporate objectives. The strategic approach towards these matters is confirmed by the Staff Development Plan for 2008-09, received by the Academic Experience Committee in November 2008, which emphasises personal tutoring, assessment and feedback, and blended learning as priorities identified by the former quality assurance and learning enhancement boards. Under this Plan, the Academic Development team within Academic Services has organised a programme reflecting institutional priorities, with a mixture of optional and mandatory sessions. Sessions are typically mandatory for staff new to the University or taking new responsibilities. Of particular importance is the systematic manner in which the revised Academic Strategy, new deliberative structures and amended regulations have been communicated to staff before and at the beginning of academic session 2008-09, through seminars, committee business and other documentation.

95   It was also confirmed to the audit team that new academic staff receive as part of induction a two-day orientation programme. Those new to higher education teaching also take the Postgraduate Certificate (PgCert) in Teaching and Learning in Higher Education, accredited by the Higher Education Academy. Members of the University have also participated in a Higher Education Academy 'Pathfinder Programme' on staff development in e-learning. The value placed by the University on good teaching is signified by the inclusion of teaching as one of the criteria which might be taken into account in the award of professorial status, while innovation in support of student learning is an expectation of the role of a senior lecturer. All doctoral students engaged in teaching are required to undertake an introductory programme on teaching and learning. There is also training in postgraduate research supervision.

96   However, while some staff whom the audit team met praised university-wide staff development sessions that they had attended, it was clear that there had been low attendance at the Learning Enhancement Conference held in early 2008. The team was also provided with a paper and accompanying evidence on peer observation of teaching and mentoring. From this it concluded that, while the University had a documented policy on peer observation, and while there was an optional session about this in the staff development programme, the policy was not consistently implemented across the institution (other than within the PgCert Teaching and Learning in Higher Education), and was currently the subject of working group deliberations. It also appeared from this paper that no University written policy or guidelines on the mentoring of staff existed, although those who met the team confirmed that they had received mentoring, either as newly-appointed to the institution or as new to the role of faculty associate dean. Accordingly, the team concluded that, while the University exercised considerable oversight of staff development activity in general, its peer observation policy was not being fully implemented and a mentoring policy had yet to be developed.

97   In the opinion of the audit team, the University has, overall, a coherent system of staff development and appraisal that fits with institutional priorities. There is also wider support for staff, notwithstanding an apparent lack of written guidance on mentoring and inconsistent implementation of peer observation of teaching. The team noted that a University working party was addressing peer observation and allied themes.

98   Overall, the features described in this section support a judgement of confidence in the soundness of the University's current and likely future management of learning opportunities in its provision.

Section 4: Institutional approach to quality enhancement

99   The University's approach to quality enhancement has been to develop a Quality Management Policy which combines the institutional philosophies regarding quality assurance and quality enhancement. The University considers these concepts to be distinct but complementary.

100   The broad aims of the policy are to implement a structured set of assurance activities such as those involving the approval, review and monitoring of its provision, with a parallel set of summary reports to provide oversight on matters such as external examiners' reports, student achievement, the results of student surveys and relationships with professional bodies. The complementary approach to assurance and enhancement within the Quality Management Policy was evident to the audit team at several levels of academic management. The subcommittee structure of the Academic Board has been devised specifically to implement the Academic Strategy and the accompanying Quality Management Policy, and reflected this complementarity. There is a subcommittee for each of the three major strands of the Academic Strategy; the committee operationalisation closely follows the terms of the Strategy. The structure of university-level committees is mirrored at faculty level, and has been accompanied by the creation of the faculty post of associate dean (student experience) to provide a focus of responsibility for quality enhancement and the dissemination of good practice. The team considered that the structures provided a useful separation of the deliberative and operational aspects of the Quality Management Policy, with clear lines of responsibility.

101   Enhancement of student learning opportunities is intended to flow from the dissemination of the good practice identified in the summary reports that the Academic Experience Committee receives on management data, student surveys and external views of the provision, and from its the wider scrutiny and monitoring activities. Student employability is a feature of the Academic Strategy and has been addressed by including the development of generic skills within programme curricula. The audit team learnt that it was the intention to identify and develop enhancement themes that would form the focus of developmental activity. In meetings with the team, staff noted that the Academic Experience Committee intended also to draw together enhancement themes from approval and review events. There is a regular Learning Enhancement Conference involving presentations by external and internal speakers, and seminars on good pedagogical practice.

102   The audit team considered that the University had adopted a considered approach to quality enhancement through the development of a policy and accompanying managerial structures that reflect the broad philosophy forming the Academic Strategy. At the time of the audit, the relevant committees had met only a few times, and therefore activities such as the preparation of summative reports and the development of themes were still in early stages. Nevertheless, the team found that there was among staff widespread understanding of, and support for, the overall enhancement approach. Staff identified benefits such as improved communication and clarity of roles.

103   The audit team considered that the University had devised a secure and well-argued strategy for enhancement and that it was taking deliberate steps at an institutional level to improve the quality of learning opportunities.

Section 5: Collaborative arrangements

104   The University has collaborative arrangements for programmes of study within the UK and with overseas partners. The collaborations predominantly involve taught programmes of study. This area of the University's activity was not a theme for this audit, and will be reviewed in a separate audit of collaborative provision in 2011.

Section 6: Institutional arrangements for postgraduate research students

105   The number of research students as a proportion of the total student population is relatively low, and was around two per cent of full-time equivalent students at the time of the audit visit. Responsibility for research degree programmes has been devolved by the Academic Board to the Academic Experience Committee, which exercises its business in this area through its Research Sub-Committee. Institutional responsibility for policy development in research rests with the Academic Futures Committee of the Academic Board. The Research Sub-Committee reports to both the Academic Experience Committee and the Academic Futures Committee. This committee structure arose directly from the creation of the revised Academic Strategy, and represents a significant strategic change since QAA's Review of research degree programmes conducted in 2006.

106   In early 2008, the University introduced a new regulatory framework that defined policy and practice for all classes of research degrees, and covers such matters as admissions, progress appraisal and assessment. The regulations form a part of the Academic Quality Handbook published on the University intranet. The regulations are complemented by an extensive set of documentation in the form of guides and handbooks for research students and supervisors. These appear on the University virtual learning environment and, in the view of the audit team, provide a high-quality and well-structured resource for staff and students.

107   The University has applied a revised version of the process for the approval of new programmes to a recent proposal for a professional doctorate with a significant research component (DProf). The University did not, at the time of the audit, have a process for the regular review of its research degree provision that was equivalent to that for taught programmes. The audit team considered that the lack of clear framework for regular review of this area of provision represented a potential weakness in the quality assurance arrangements for research degrees. The University is advised to consider this point within the development of a more general evaluation of its procedures for the managing standards and quality.

108   At the time of QAA's Review of research degree programmes in 2006, the central administrative functions for research degree programmes had lain within a virtual 'Graduate Research School'. Following the abolition of the University's school-based structure, the administrative functions of the Graduate Research School have been passed to a new Graduate Research Support Unit (GRS) responsible for the administration of research degrees throughout the University. All faculties have a post of research student manager, a member of academic staff who forms the first point of contact for students, and acts as the main liaison with the GRS and Research Sub-Committee. The research student body is represented on the Research Sub-Committee by two student members selected by an election conducted on the virtual learning environment. The audit team noted that the representatives lacked an effective means of communicating the outcomes of Research Sub-Committee discussions to their fellow research students.

109   Entry criteria are clearly defined within the University's admissions framework, and allow for an element of local discretion. The audit team confirmed in meetings with students and staff that all potential candidates are interviewed by an admissions panel involving senior staff. The protocols for the form and scope of the interviews permit a degree of tailoring to suit the needs of individual disciplines, including doctorates by creative works and by professional practice, and research degrees in areas of laboratory-based sciences. Supervision is allocated to a small team of supervisors which is tailored to the needs of each proposed research project. Each proposed supervision team requires confirmation by the Research Sub-Committee of such matters as the overall supervisory load of each member of staff, the experience that potential supervisors have had in this role, their seniority and their subject-specific suitability.

110   The audit team learnt that, following the last Research Assessment Exercise, the University was in the process of developing a more strategic approach to research. A central element of this approach is to develop special research centres or 'research beacons' in a few areas. The University informed the team that a part of this strategy would be to focus recruitment of research students in these areas in order to provide an enhanced quality of research environment, and to promote a research student culture.

111   There is a clearly defined process of progress review, and the regulations permit, within constraints, changes in registration from, for example, MPhil to PhD, and in reverse. Such changes at the request of a student are allowed only following a formal assessment of satisfactory progress. All research degree programmes contain a mandatory element of taught modules aimed at developing generic academic skills. The University has introduced a universal system of personal development planning which has to be completed satisfactorily before formal assessment of the academic research can take place. The accreditation of prior learning framework may be applied to obtain limited remission of academic credit within elements of the taught component of a programme.

112   Teaching professionalism for staff is promoted through the provision of the Postgraduate Certificate in Teaching and Learning in Higher Education which is accredited by the Higher Education Academy. Similar training of a more restricted nature is mandatory for those postgraduate research students who are involved in any form of undergraduate teaching. Postgraduate research students who had attended this programme and met the audit team recorded that it provided a thorough and valuable preparation for their role, although they voiced some uncertainty as to whether the modules carried transferable academic credit.

113   The approach to the assessment of research degrees is described in detail in the Student Handbook and the Regulations, and centres on an oral examination based on a thesis, and, where appropriate, by the submission of a portfolio of works. The University responded to a recommendation of QAA's Review, and modified its earlier processes to include at each oral examination an independent chair with clearly defined responsibilities and authority. In other respects, both the overall criteria for assessing student work and the judgements available to the examining panel follow accepted practice, and meet the expectations of the *Code of practice*.

114   Students who met the audit team were complimentary about a number of aspects of their learning experience, and highlighted the developmental nature of the interviews at admission, and the care with which this admission had been conducted. They believed that they were well-supported in their studies, and that they were adequately trained when required to take on any teaching role. The team also learned that the GRS and faculty research student managers were active in providing information about conferences and sources of funding to support attendance.

115   The audit team concluded that the University had devised and implemented a comprehensive and clearly articulated framework to support research degree students that met the expectations of the *Code of practice*.

Section 7: Published information

116   The University's main point of contact for prospective students is through its website, which contains extensive information about the courses, insights into student life and the local area, and commentaries from former students that emphasise the employability of the University of Sunderland graduate. The website is maintained by the Marketing and Communications Service. The responsibility for the accuracy of the content at course level lies with the relevant department with oversight at faculty level by the associate dean (recruitment and development). The Marketing and Communications Service has implemented a commercial content management system to manage the website content, monitor it for currency and facilitate checking. The audit team was informed in meetings with staff that the University intended to create a new technical post within the Service in order to provide enhanced support for its web presence. Student Recruitment and business partnerships is responsible for ensuring the accuracy of the University's statistical returns that underpin the teaching quality of information on the national Unistats website.

117   Pre-entry published material largely centres on printed prospectuses, with one prospectus being produced specifically for international students. Responsibility for the material within the prospectuses follows the same general pattern as that published on the website. The audit team noted that one prospectus contained entries for courses that were still undergoing approval, and that the provisional nature of these courses was indicated clearly.

118   Course-specific material such as module guides are the responsibility of the programme team, as is the use of the virtual learning environment to support student learning on modules. The University has a policy that specifies the minimum content requirement. The virtual learning environment has an extensive section that provides handbooks and regulatory material for postgraduate research students and their supervisors, and a dedicated website that is maintained by the Graduate Research Support Unit.

119   The intranet is used extensively by the University to provide a wide range of documentation and committee-related material. The audit team noted, in particular, the web-based Academic Quality Handbook that has been published by Academic Services, considering it to be a well-structured and accessible source of information that provides effective support to teaching staff. The University makes available as required by the HEFCE those documents specified in its circular 06/45, *Review of the Quality Assurance Framework: Phase two outcomes.*

120   The audit team found that, overall, the University has robust systems to secure the accuracy and completeness of the information that it publishes about the quality of its educational provision and the standards of its awards. The team concluded that reliance can reasonably be placed in the integrity and reliability of the information that the University publishes about its programmes.