QAA

University of Brighton

May 2008

Annex to the report

Contents

Introduction

A team of auditors from the Quality Assurance Agency for Higher Education (QAA) visited the University of Brighton (the University) from 12 to 16 May 2008 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 Brighton 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 a strong commitment to continuing improvement of the student learning experience, and has established a range of effective mechanisms to provide a structured framework for its enhancement activity that take due regard for institutional cultures and existing organisational frameworks.

Institutional arrangements for postgraduate research students

The audit found that the University's management of support, supervision and assessment of its postgraduate research students to be rigorous and effective. The University's polices, procedures and regulations meet 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 by QAA.

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 academic standards of its awards.

Features of good practice

The audit team identified the following areas of good practice:

- the inclusive and consultative way in which the University's new Corporate Plan was developed (paragraph 15)

- the clarity and accessibility of documents that describe the University's processes and procedures for quality assurance (paragraph 33)

- the contribution to staff development and enhancement of practice made by the annual workshop to prepare staff to be external examiners (paragraph 46)

- the high degree of responsibility, which includes agenda setting, delegated to students by the Student Affairs Committee of the Board of Governors (paragraphs 140 and 141)

- the annual staff development conference for administrative and support staff which contributes to an inclusive approach to staff development (paragraph 162)

- the role played by the Academic Partnership Committee in maintaining oversight of UK-based partnerships for the purposes of quality assurance and enhancement (paragraph 168)

- the maintenance of a register of staff eligible to supervise PhD students, together with training for those wishing to gain eligibility (paragraph 181).

Recommendations for action

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

Recommendation for action that the audit team considers advisable:

- to ensure it promptly reviews its Staff Development and Review Scheme in line with any changes to be introduced as a result of its planned review of staff development (paragraph 152).

Recommendations for action that the audit team considers desirable:

- to keep under review the balance between central policy and local flexibility with respect to assessment and feedback to students, so as to ensure that a consistent approach is maintained for students in all areas of provision (paragraphs 38, 77 and 90)

- to consider further how the University might promote greater consistency, and the adoption of best practice, in the collection of student feedback across the range of provision for which it is responsible (paragraphs 101 and 102)

- to continue to monitor and enhance the effectiveness of studentcentral as a tool to aid learning and teaching (paragraphs 125 and 126)

- should the University seek to expand its international partnership activity, to consider ways to ensure that the institutional oversight of this activity be as effective as that which already exists for collaborative provision based in the UK (paragraph 172).

Section 1: Introduction and background

The institution and its mission

1   The University was granted university status in 1992, although it traces its history in adult education back to 1859. The University has six faculties, which are distributed over five campuses, three of which are in Brighton (Grand Parade, Moulsecoomb and Falmer), and one each in Eastbourne and Hastings. In December 2007, the University had 15,567 (15,258 full-time equivalent) undergraduate students, 3,052 postgraduate students on taught pathways and 343 research students.

2   The University's Corporate Plan states that the University of Brighton is committed to:

- 'delivering socially purposeful higher education that serves and strengthens society and underpins the economy; contributes critically to the public good; enriches those who participate; and equips our graduates to contribute effectively as citizens to their chosen professions and communities, locally, nationally and internationally

- developing a creative and energetic institution with a knowledge base of national and international quality, fully committed to mutual engagement with its local communities and economy alongside an international reputation for the quality and impact of its work

- finding creative and effective ways in which to strengthen the relationship between learning and teaching, disciplinary and professional practice, research, and economic and social engagement'.

The information base for the audit

3   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 access to hard copy of all documents referenced in the Briefing Paper and to the institution's intranet.

4   The Students' Union produced a student written submission that presented the students' views on the accuracy of information provided to them, the experience of students as learners and their role in quality management. The audit team is grateful to the students for the student written submission, which was a well-compiled and helpful document.

5   In addition, the audit team had access to:

- the report of the previous institutional audit (May 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 University's internal documents

- the notes of audit team meetings with staff and students

- QAA Review of postgraduate research degree programmes (2006).

Developments since the last audit

6   The QAA's last audit of the University in 2004 resulted in a judgement of broad confidence in the institution's current and likely future management of the quality of its academic programmes and the academic standards of its awards. The report identified eight areas of good practice and made a number of recommendations which have been considered and responded to by the University.

7   Having been advised to articulate how it monitors and evaluates the comparability of standards across its provision, the University implemented a number of changes which include introducing assessment mapping as part of the requirements for course design and approval; approving a common marking/grading scale at undergraduate level, which has been implemented at local level through schools and faculties and is communicated to students through course handbooks; establishing in 2005 a subcommittee for examination and assessment, which has subsequently had a strategic role in monitoring and enhancing the consistency and effectiveness of examination board practice.

8   The 2004 audit also advised the University to review and strengthen the conduct of its procedures for the validation of new programmes of study in partner colleges as a matter of priority, and to take further its existing arrangements for the support and academic development of its partner colleges. In its mid-cycle follow up to the 2004 audit, the University indicated that it had moved quickly to ensure that the validation of new programmes of study in partner colleges are signed off formally in a timely manner. Also, the University's procedures for the selection and management of partners were reviewed in 2006 taking into account the *Code of practice, Section 2: Collaborative provision and flexible and distributed learning (including e-learning)*, published by QAA. New procedures were put into place to support the delivery of programmes by partner organisations.

9   Additionally, the University was advised to develop further its work in progress on assessment policy and practice and proceed with its current initiatives in establishing, where this

is appropriate, greater consistency in its quality management arrangements with respect to internal moderation. All schools and faculties have now embedded the principles of the University's Assessment Policy, which include the requirements for moderation, into their own local assessment policies and practice. Faculties have also realigned policy and practice in the light of changes to the *Code of practice, Section 6: Assessment of students.* Schools continue to embed and refine their practice in response to National Student Survey results.

10   In response to a recommendation that it would be desirable for the University to consider at an institutional level the findings and strategic implications of all reports from professional, statutory and regulatory bodies, the University established in 2005 a professional, statutory and regulatory bodies' reports subcommittee, whose role is to have oversight of these reports and initiate appropriate action where necessary.

11   The final recommendation of the 2004 audit was that it would be desirable for the University to review its present regulations for the composition of its faculty and institutional validation panels. The University undertook a review of the regulations but decided that its arrangements were secure and that no changes were required to the regulations which permit deans to chair validations in their own faculties. This decision was taken on the basis that the arrangement struck the right balance between distance from the individual course proposals themselves, which originate from schools, and a knowledge of the discipline areas under discussion. Moreover, it was felt that the constitution of validation panels ensures externality through the inclusion of at least one external assessor from another institution plus a representative of the Academic Standards Committee, not from the faculty concerned. Finally the University felt that these arrangements had served them well for a considerable period of time. The audit team was of the view that this decision was reasonable and that the University had given this due consideration.

12   The audit team found that the University had generally taken effective and timely action in response to the recommendations made in the previous audit report, although the team considered that the balance between central policy and local flexibility with respect to assessment and feedback should continue to be monitored so as to ensure that a consistent experience is maintained for students in all areas of provision. This is discussed further in paragraphs 68 and 77 below.

13   In the period since the last audit, there have been two major National Health Service (NHS) reviews, 12 successful Ofsted inspections and a regular annual pattern of accreditation visits to provision across
the University.

14   Since 2004, the University has appointed a new Vice-Chancellor, a new Pro Vice-Chancellor (Research), two new deans and several new heads of schools. New roles have been created at University level with responsibility for equality and diversity, while at faculty level the role of quality director has been piloted and rolled out to several faculties.

15   A new corporate plan has been developed following a period of consultation and discussion with a wide range of interested parties that included students. The audit team heard how the approach taken was specifically designed to be open and wide ranging, seeking to build on the confidence and aspirations of staff. The process led to a high degree of ownership of the plan which, while reflecting the values of the institution, is nonetheless challenging. This new plan has been used to underpin a number of the University's strategies. The team considered the inclusive and consultative way in which the plan was developed to be a feature of good practice.

16   Other new or revised policies implemented since the last audit, with a particular bearing on the management of quality and standards, include the University's new learning and teaching strategy which articulates closely with the themes of the new corporate plan and the University's personal development planning policy.

17   The continued development of Brighton and Sussex Medical School has seen the incorporation of the Institute of Postgraduate Medicine, which was formerly the postgraduate medical school.

18   The University has continued to expand and strengthen its regional role and partnership activity. For example, the University has become the validating body for provision offered at Northbrook College. It has also developed Foundation Degrees to serve the local community, such as the FDA in Policing in partnership with Sussex Police that is offered at three sites including the University of Chichester, and it has developed further the University Centre Hastings.

19   The use of the University's managed learning environment, 'studentcentral', has become much more widespread since the last audit, with 80 to 85 per cent of students now using it to access course materials, resources and support information. Also, at the time of the 2008 audit, the University had recently extended the use of studentcentral to new students prior to enrolment, in an effort to manage better their transition from school or college.

20   Key elements of the framework for managing quality and standards have been further developed since the last audit in response to changing demands of the students, employers and the institution itself. Such developments include a move from HNDs to Foundation Degrees coupled with the approval of a new university framework for the development of Foundation Degrees; the merger of the Learning Resources Committee and the Learning and Teaching Committee to support better the implementation of the University's new learning and teaching strategy, and further devolution to faculties of quality assurance responsibilities in the area of course approval.

Institutional framework for managing academic standards and the quality of learning opportunities

21   The key principles underpinning the University's approach to managing academic standards and the quality of learning opportunities as stated in its Briefing Paper are:

● critical self-reflection

● collective ownership of, and distributed responsibility for, academic standards and quality

● external scrutiny and accountability

● prioritising students' learning, achievement and experience within the quality assurance framework

● the use of diverse and contextually appropriate learning and teaching approaches in the curricula.

22   The University states that its framework for managing academic standards and the quality of learning opportunities is designed to balance internal consistency across the institution with external consistency at subject level. External consistency is achieved through the appropriate use of external benchmarks and rigorous external examining arrangements, while internal consistency is achieved through a series of policies and procedures that comprise the University's quality assurance framework, but which are flexible enough to accommodate external requirements.

23   The University views the consideration and underpinning of academic standards and the quality of learning opportunities as fundamental to all aspects of its quality assurance framework, and it considers the relationship between quality assurance and enhancement as mutually re-enforcing. With respect to the latter, in meetings with the audit team, staff at the University explained that enhancements frequently emerge from quality assurance processes such as the University's annual Academic Health review, and cited the institution's recent decision to harmonise the module Pass mark for master's provision at 50 per cent as an example of this.

24   The University also seeks to strike the correct balance between institutional security and local ownership of quality and standards as a crucial aspect of its quality assurance framework and, in line with this, delegates considerable responsibility for both the management of quality and standards and for the operational implementation of selected policies and processes to faculties.

25   At a senior level, collective responsibility for the management of the University is held by the University's Senior Management Team, which consists of the Vice-Chancellor, the Deputy Vice-Chancellor, the Pro Vice-Chancellor (Academic Affairs), the Pro Vice-Chancellor (Business and Marketing), the Pro Vice-Chancellor (Research), the Director of Finance, and the University Registrar and Secretary.

26   In this task, the senior team is supported by a University Management Group, which in addition to the members of the Senior Management Team, includes the deans, the Head of Strategic Planning, the Director of Information Services and the Director of Personnel. At faculty level, deans are typically supported by their faculty management group, which includes heads of school, the Faculty Officer, the Quality Director, (if this role is not undertaken personally by the Dean) and other members of the faculty Senior Management Team.

27   There is a complementary relationship between the University's deliberative and academic structures at a senior level with key committees being chaired either by members of the Senior Management Team or deans. In meetings with the audit team, deans and heads of school evinced a clear understanding of both the University's quality assurance framework and of the principles underpinning it, thereby reflecting their active engagement with the framework and its processes.

28   The Academic Board, which is chaired by the Vice-Chancellor, is constitutionally responsible for the quality and academic standards of the University's awards and carries primary responsibility for all matters relating to research, scholarship, teaching and courses at the University. These responsibilities are primarily discharged through its two senior reporting subcommittees, the Academic Development Committee and the Academic Standards Committee. Beneath these lies a substructure of supporting subcommittees that have delegated responsibility and oversight for a range of specific activities.

29   The terms of reference, constitutions and interrelationships of the University's committee structures are very clearly articulated in its committee handbook, which also includes a clear description of the roles of chairs, secretaries and other committee support staff.

30   The Academic Standards Committee, chaired by the Pro Vice-Chancellor of Academic Affairs, advises the Academic Board on the quality and standards of the University's academic provision, including research degrees and collaborative provision. This Committee oversees the appointment of external examiners through its subcommittee for external examiner nominations, the development and operation of the University's assessment policy and examination board practice through the Subcommittee for Examination and Assessment, the operation of partnership arrangements through the Academic Partnership Committee, and the operation of research arrangements through the Research Degrees Committee.

31   The Academic Standards Committee also has primary responsibility for the broad supervision of validation matters, periodic review and the University's annual academic health review process across the University. Other committees reporting to the Academic Standards Committee include the Learning and Teaching Committee, Students Services Committee, Research Ethics and Governance Committee, and the Research Degrees Committee.

32   The Academic Development Committee, chaired by the Deputy Vice-Chancellor, has executive responsibility for academic development and planning, including the approval of new course developments, new partnership arrangements, course closures and withdrawals, and the development of the University's research strategy. It also advises the Academic Board on corporate planning and resource allocation. Other committees reporting to the Academic

Development Committee include the Research Strategy Committee, Widening Participation and Diversity Committee, Estates Committee and the University's Information Strategy Committee.

33   The implementation of a consistent approach to quality and standards across the University is achieved through a series of policies and procedures that comprise the University's quality assurance framework, which includes its Common Academic Framework for the design and structure of awards; General Examination and Assessment Regulations for taught courses; assessment policy; arrangements for the recruitment and deployment of external examiners; arrangements for validation monitoring and approval of courses, and for the conduct of research degrees. Details of the Common Academic Framework and policies and procedures are all clearly articulated in a series of commendably user-friendly handbooks that are readily available to staff in hard copy and through 'staffcentral', the University's staff portal. The audit team found the clarity and accessibility of these handbooks to be a feature of good practice.

34   A core feature of the University's quality assurance framework is the delegation to faculties of the responsibility for undertaking the majority of course approvals. Course approvals for collaborative provision and for subject areas new to the University are the direct responsibility of the Academic Standards Committee. Faculties are also responsible for periodic review, for annual monitoring (the academic health process) and for the operation and chairing of examination boards. Additionally, faculties have some freedom to implement certain University policies (such as the University assessment policy) at local level, which includes defining their own committee structures over and above the University's standard requirements for a faculty academic board, course boards and school boards.

35   Faculty academic boards, chaired by deans, are the key mechanism through which these delegated responsibilities for quality and standards are formally discharged at local level. Although they are structurally subcommittees of the Academic Board, faculty academic boards refer quality matters through the Academic Standards Committee and refer course development issues through the Academic Development Committee.

36   While the management of quality and standards is significantly devolved to faculties, this devolution is situated in the broader context of the detailed institutional policies and procedures that comprise the University's quality assurance framework. The framework is designed to ensure consistency of practice internally with some in-built flexibility to meet external requirements. The use of external benchmarks and independent external examiners ensure comparability of standards externally. Also, the Academic Standards Committee and its subcommittees have institutional oversight of course approval activity, annual monitoring, periodic review and the operation of assessment boards.

37   In the view of the University, overall, these arrangements achieve an appropriate balance between institutional security and local ownership of quality and standards, and between discipline difference and adaptation. This institutional view was reflected by deans and heads of schools who confirmed in meetings with the audit team that they also felt that the University had got this balance right and that, as a result, there were high levels of commitment to the University's quality processes locally. The team found that this view was borne out by the rigour with which activities such as course approval, periodic review, and annual monitoring are carried out across the University.

38   On the basis of the wide range of evidence provided to it and its discussion with students and academic and administrative staff, the audit team formed the view that the framework in place in the University to secure both academic standards and the quality of the learning opportunities across the whole range of the its provision, including collaborative provision and research degrees, is both appropriate and effective. However, the team felt that the University should keep the flexibility afforded to faculties and schools under review, notably with respect to assessment, to ensure that local practice remains fit for purpose. Also see paragraphs, 68, 77, 101 and 102 below.

Section 2: Institutional management of academic standards

Approval, monitoring and review of award standards

39   The University sets the standards of its awards through the systems it has for the management of curricula and assessment processes. It monitors standards through its annual academic health process and reviews them through its periodic review process. In setting award standards, full use is made of the appropriate external reference points, which include the *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ), the *Code of practice,* subject benchmark statements and the requirements of professional, statutory and regulatory bodies.

40   To assist it in all these tasks, the University draws extensively on external expertise (see paragraph 64 below). The monitoring of standards also includes the collection and dissemination of student progression and achievement data produced to a standard format and shared across the institution. As the majority of these mechanisms is also concerned with the management of quality, those aspects most closely associated with the management of standards (namely, the use of external reference points in programme design, approval, monitoring and review; programme specifications; the assessment of students; external examining, and the use of relevant management information) are dealt with in this section. The remainder are considered under Section 3: Institutional management of learning opportunities.

External examiners

41   The University states that the role of external examiners is to ensure that academic standards are maintained, that University regulations are applied and that justice is done to students. Additionally, they are a key means by which the University ensures that its awards are comparable with national standards. The University requires that all assessments for a course are overseen by at least one area (subject) external examiner and that progression decisions on all courses are overseen by a course examiner. In single-tier boards these may be the same individual.

42   The criteria for identification and appointment of external examiners are laid out clearly in the General Examination and Assessment Regulations. A key requirement is the complete independence of external examiners from the University. The regulations in this respect are strict and rigorously applied. Potential examiners are identified at course level and nominees are scrutinised by the appropriate school board and faculty academic board before being passed to the Subcommittee for External Examiner Nominations for consideration. This subcommittee annually reviews the appointment, extensions of tenure and reallocations of external examiners made in the previous academic year, and monitors the University's overall external examiner profile.

43   The roles and responsibilities of external examiners are fully and very clearly articulated in both the University's external examiner handbook and in the General Examination and Assessment Regulations handbook. The external examiner handbook is sent to external examiners on appointment and is also accessible through the external examiners' website.

44   The briefing of external examiners is conducted at both school and university level. Staff confirmed to the audit team that local briefing is an important feature of the process given that the University's assessment regulations allow local variations to meet subject or professional, statutory and regulatory bodies' requirements, as approved at validation. In their annual reports, external examiners comment favourably on these processes.

45   The University additionally runs an annual workshop for both existing and new external examiners. The workshop is well established and well attended and, while in the past its focus was largely quality assurance, more recently the February 2008 workshop explored the contribution that external examiners can make to quality enhancement.

46   As part of its commitment to staff development in this area, the University also offers an annual workshop for its own staff interested in becoming external examiners. This has subsequently led to a significant proportion of the individuals who have attended the workshops becoming external examiners at other institutions. In the view of the audit team this contributes not only to staff development but to the broader aims of enhancement and is a feature of good practice.

47   External examiners report annually to the Vice-Chancellor on the quality and standards achieved in the provision for which they are responsible. Reports, submitted using the University's standard template, are read by the Vice-Chancellor, the Pro Vice-Chancellor of Academic Affairs, and the Senior Assistant Registrar (Academic Standards). External examiners' reports are then distributed to heads of schools and deans for consideration in annual monitoring, and for immediate action if necessary. Heads are responsible for ensuring that external examiners' reports are formally responded to and that any necessary action is taken. External examiners are asked to confirm that these processes have taken place in their annual reports. In a meeting with the audit team, deans and heads of schools confirmed that reports were responded to in consultation with the relevant individuals and that, on occasion, the University may highlight issues which have arisen in an external examiner report that require specific comment or immediate action. From the documentation made available to it, the team was able to verify that the University is responsive to issues raised by external examiners in their reports.

48   The University indicated that external examiners' reports have recently been made available to student representatives through course boards. Clear instructions have been issued to that effect.

49   Schools, faculties and the University maintain an annual overview of external examiners' comments through the annual academic health process. Through this process, which is well embedded in the University's culture and systems, issues can be identified and appropriate responses and actions formulated at school, faculty and university level. The members of staff who met the audit team indicated that comments from external examiners had directly given rise to the recent harmonisation of University regulations on the Pass mark for master's awards.

50   External examiners' reports are also reviewed as part of the University's periodic review process. The audit team's scrutiny of recent periodic reviews confirmed this to be the case, and the team was able to identify enhancements at course level generated through that process, particularly those relating to course structures and content.

51   At the end of each year, the Subcommittee for Examination and Assessment requires a report from each faculty on the operation of its examination boards and assessment processes, which includes external examiners' comments on these matters. This relatively new practice, instituted in response to the last audit, enables the University to monitor consistency of implementation of its regulations, share good practice, and address any issues of concern.

52   The University also has robust processes in place to ensure that external oversight of quality and standards for collaborative provision takes place. This includes requiring that all collaborative provision (other than joint awards, where special regulations apply - see paragraph 76) be governed by the provisions of the General Examination and Assessment Regulations to include the appointment and use of external examiners. For collaborative provision, where there is an identical course on-campus, the same external examiner is used to ensure comparability of standards. Additionally, all external examiners' reports relating to UK collaborative provision are scrutinised by the Academic Partnership Committee to identify common issues and to take necessary actions (see paragraph 168 below).

53   Arrangements for the appointment of external examiners for research degrees are articulated in the University's Code of Practice. Examiners are required to be independent of the University, appropriately experienced in examining research students and have appropriate subject expertise. All research examiners are required to be approved by the University Research Degrees Examination Subcommittee. Where internal University staff are being examined, two external examiners are required.

54   The audit team was able to conclude on the basis of the documentation provided to it, and the responses it received in its meetings with staff, that the systems and processes for the appointment and use of external examiners at the University are robust and appropriately implemented, and thereby make a significant contribution to the security of academic standards.

Academic Infrastructure and other external reference points

55   The University states that it has incorporated the Academic Infrastructure into its own policies and procedures which has helped to anchor institutional practices and harmonise them with sector-wide practice. New and revised sections of the *Code of practice* inform revisions to existing policy as the University considers appropriate. For example, recent reviews of school assessment policies were made in response to revisions to the *Code of practice, Section 6: Assessment of students.* The University's course approval and review handbook contains comprehensive guidance to University staff on the use of the Academic Infrastructure and other external reference points in course planning.

56   A separate set of guidance is provided to teams involved in the planning of Foundation Degrees which are offered collaboratively through a number of the University's Partner Colleges. This guidance is fully informed by the *Foundation Degree qualification benchmark.*

57   The requirements of the FHEQ are fully embedded into the University's Common Academic Framework. This Framework establishes the core characteristics of all of the University's awards in terms of both credit rating and level. It is a requirement of University validation and approval that all provision validated by the institution conform to the framework. Adherence to these requirements is routinely checked during individual validations by Registry staff. It was noted in the minutes of the University's 2007 validation workshop that two validation panels in the previous year had queried the extent to which the proposed provision did align with the FHEQ and had asked the planning teams to review the proposals appropriately.

58   Planning teams are required to show at validation that provision meets the requirements of the appropriate subject benchmark statement(s). Typically, planning documents evince this through the provision of grids. External assessors are required to confirm that any relevant subject specific external requirements have been met in the planning process. Planning teams are generally fully aware of benchmark statement updates through their own extensive professional networking with the relevant professional bodies. Scrutiny of the validation documentation provided to the audit team, together with discussions the team had in meetings with staff, confirmed that these processes operate as intended.

59   All provision offered in the University is required to have a programme specification completed to a set template of University requirements. Programme specifications detail learning outcomes at the highest level of the award, the curriculum by level, the teaching and learning strategy for the award and the assessment strategy for the award. They also provide relevant detail of any professional, statutory and regulatory bodies' exemptions and of any course-specific regulations. The team was able to view a range of specifications to confirm their utility as a concise description of how the learning outcomes associated with awards are achieved.

60   The audit team noted, however, that while programme specifications for all validated provision are updated as appropriate and are readily available to staff via staffcentral and to existing students via studentcentral, they are not readily available to prospective students through the University's external website. The view of University staff who met the team was that specifications are not particularly accessible documents and that the University prefers to publish more user-friendly course information on its external website for prospective students. Students met by the audit team confirmed that they had found the information the University had provided on its courses to be both informative and accurate. The team noted that the University intends to improve access to programme specifications for external audiences.

61   The University views its relationship with professional, statutory and regulatory bodies as fundamental to delivering its mission. All but two of the University's schools offer courses that carry professional, statutory and regulatory bodies' approval in the broadest sense. During 2006-07, 39 courses across 10 schools were subject to some level of scrutiny (validation, review or annual monitoring) from a professional, statutory or regulatory body. The University procedures on course approval and review provide clear guidance on engagement with these bodies.

62   The operation of the University's relationships with professional, statutory and regulatory bodies exemplifies the balance that it seeks to achieve between institutional and local management of academic standards. While relationships are primarily managed at school level with faculty supervision, the University is firm in its commitment to ensure that those relationships and the consequent judgements about the quality and standards of the courses concerned operate within the common quality assurance frameworks of the University, notably the Common Academic Framework and the General Examination and Assessment Regulations. For example, any exemptions from the University's standard assessment regulations made in order to meet the requirements of professional, statutory and regulatory bodies are carefully managed (see paragraph 75 below).

63   The University maintains careful institutional oversight of its relationships with professional, statutory and regulatory bodies through their reports subcommittee of the Academic Standards Committee which meets three times a year. On an annual rotational basis, it reviews in detail each faculty's engagement with professional, statutory and regulatory bodies activity. From its scrutiny of the minutes of the subcommittee and its annual workshop, the audit team concluded that the University's management of its engagement with professional, statutory and regulatory bodies had improved significantly since the previous audit.

64   The University makes full use of a range of external expert opinion in programme design, approval and review which contributes to the assurance of academic standards. This includes requiring external advisers for validation events and periodic review events, and external examiners for all awards delivered in the University's name. Documentation made available to the audit team enabled it to confirm that the arrangements for the appointment and deployment of external advisers and examiners are both effective and consistently applied.

65   The use of the Academic Infrastructure and other external reference points was judged by the audit team to be effective in setting and maintaining academic standards of the provision offered by the University, including both its collaborative provision and its research programmes.

Assessment policies and regulations

66   The University has a generic assessment policy, approved in 2004, which provides the reference point for the development of individual faculty or school-specific policies. The generic assessment policy covers all aspects of assessment practice which includes the purpose of assessment; guiding principles for summative assessment; assessment design; marking, grading and internal moderation; supporting students' learning (including volume of assessment and feedback arrangements); use of internal and external examiners; implementation and evaluation, and roles and responsibilities. The assessment policy is included in the General Examination and Assessment Regulations, which is available to staff through staffcentral, to students through studentcentral and to external examiners through the external examiners' website.

67   Faculty academic boards are responsible for ensuring that school-level assessment policies reflect the principles articulated in the University's assessment policy and that assessment is applied in a fair and consistent manner across the faculty. Since the last audit, the University has focused on encouraging faculties and schools to develop high quality assessment policies and to share good practice.

68   The audit team read a large number of these individual assessment policies and, as a result, was able to confirm that they met fully the requirements of the University's assessment

policy and were informed by the *Code of practice.* The team noted some variability in practice between schools and faculties, such as in the matter of target assessment turnaround times, which differ from school to school, and in the arrangements for scheduling of assessment, for which some schools produce detailed schedules to iron out student workloads, whereas others do not. From its meetings with staff and students, the team found that students were less positive about this variability than were staff. On balance, the team felt that the University could usefully further its progress in this area (see paragraph 77).

69   The audit team also noted that faculty academic boards have recently reviewed their assessment policies in the light of amendments made to the *Code of practice, Section 6,* and the team was able to see the resultant revised policies, a number of which evinced thorough engagement with the process.

70   The University requires that students receive details of how assessment is to be conducted on their courses via course and module handbooks. The audit team saw a range of course and module handbooks provided as part of the audit sampling trails. These handbooks do provide detailed information on deadlines for submission of work; penalties for late submission; hand-in arrangements; hand-back arrangements; broad details on assessment tasks, and the ways in which marks for tasks are combined to give overall module.

71   The broad constitution, remit and procedures for examination boards are articulated in the General Examination and Assessment Regulations. Faculties have delegated authority to approve annually on behalf of the Academic Board the precise constitution and membership of examination boards operating in their area. Detailed procedural guidance for the conduct of examination boards is provided in the General Examination and Assessment Regulations handbook. The audit team was able to confirm that the guidance provided in both documents is clear and comprehensive.

72   The University maintains clear institutional oversight of examination board practice through a range of mechanisms. Registry officers routinely attend examination boards. Also, the Subcommittee for Examination and Assessment considers all annual faculty examination board reports, which include comments from external examiners and board chairs on the conduct of the examination boards. The University organises a number of annual workshops for exam board chairs, examination board secretaries and officers in order to share issues and spread good practice.

73   The University states that it has strengthened and improved the consistency of its assessment arrangements and practices since the last audit. The audit team was able to identify a number of areas in which such improvements were evident. These include the introduction of a university-wide marking and grading scale; the more consistent use of data derived from the University's student record system at examination boards; the agreed introduction of a 50 per cent master's Pass mark across the University and the introduction of a common algorithm for the determination of Distinction at master's level; a more consistent approach to final-year referrals across the University, and the introduction of assessment mapping as part of course approval.

74   The General Examination and Assessment Regulations is supplemented by course-specific regulations approved at validation. Where the University's main regulations allow flexibility, course-specific regulations are included in the programme specification for a course and also must be made available to students through their course handbooks. The audit team asked students whom they met whether they were aware of these local regulations. The students concerned, who came from a range of different faculties, were able to state clearly the course specific regulations relevant to their particular awards. The team was also able to confirm through their reading of materials provided in the sampling trails that the necessary information was included in course handbooks as required by the University.

75   Exceptions to the University's core regulations (such as a variation to the University's module threshold Pass mark) may be requested at validation in order to meet the requirements of professional bodies. The University keeps a log of these exceptions through the Subcommittee for Examination and Assessment. The audit team was able to confirm through the sampling trails

that, where exceptions are proposed to validation panels, they are indeed agreed and signed off by the Chair of the Academic Board as required by the University's regulations. Recent revisions to the assessment regulations are listed in the index to the General Examination and Assessment Regulations. The process for the implementation of regulatory changes is also clearly articulated in these Regulations.

76   Collaborative provision is subject to the same regulatory framework as other provision in the University. Purpose-built regulations have been approved by the University for joint awards. Arrangements for the assessment of research students are clearly outlined in the University's Code of Practice for MPhil, PhD and Professional Doctorates.

77   The audit team was satisfied that the University's assessment policies and regulations are fit for purpose and that they appropriately secure the academic standards of the institution's provision to include that for research students and collaborative provision. They were of the view, however, that it would be desirable for the University to keep under review the balance between central policy and local flexibility with respect to assessment and feedback to students so as to ensure that a consistent approach is maintained for students in all areas of provision.

Management information - statistics

78   For some 16 years the University has produced an annual academic year review which provides the Academic Board with a detailed overview of the University's activities in teaching, research and income generation. The data provide statistics on student applications and admissions, student numbers, student profiles, and progression and achievement.

79   The University uses its student record data to consider profiles of progression and achievement. Largely through the efforts of the University's Academic Health Data Working Group, significant progress has been made since the last audit in establishing core student data sets which can be used to meet internal and external needs. These data have been made available for the University's Academic Health process and, as part of that process, are reviewed at school, faculty and institutional level. In meetings with the audit team, staff indicated that this had been a particularly useful development.

80   Additionally, the University routinely reviews information on undergraduate student appeals, student complaints and academic conduct cases, as part of its annual monitoring process. The audit team noted, however, that postgraduate research student appeals are not formally reviewed in this way and, although cases are few and far between, would encourage that this might usefully be done on a more formal basis in future.

81   The Strategic Planning Unit undertakes analysis and development work in core areas for the University and, since the last audit, has created additional posts to undertake further data analysis. Student retention is reviewed regularly. The unit has also recently taken forward one of the recommendations of the University's Academic Health Data Working Group, which is that particular attention should be paid to issues relating to equality and diversity.

82   Destination data, which are made available on the University's website, are reviewed by the University Careers Centre. The outcomes of the National Student Survey are systematically used across the institution to enhance student learning opportunities in a variety of ways. For example, the Centre for Learning and Teaching carried out research to identify the common characteristics of the University's courses that were reflected well in the National Student Survey.

83   The audit team formed the view that the University has made considerable progress in using management information to assure itself of both the maintenance and the comparability of standards across the institution, and would encourage it to continue with its plans to strengthen further its capability and practice in this area, as detailed in the recommendations of the Academic Health Data Working Group in spring 2007.

84   The audit found that the University's management of academic standards is robust and operating as intended. The consistent application of the University's regulations and policies and associated guidance reflect 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

85   The University has identified the ability of students to succeed in their learning as a fundamental principle underlying the design and delivery of courses. Three key ways are identified by which the University seeks to achieve this: first, the appointment of appropriately qualified academic staff; secondly, through the course development process; and thirdly, through the provision of appropriate learning resources.

Academic Infrastructure and other external reference points

86   The University regards itself as part of a national, and increasingly international academic community that shares mutual understandings of academic quality. It has sought to embed the Academic Infrastructure within its policies and procedures. For example, the Common Academic Framework incorporates, as key reference points, the FHEQ and aligns with the *Standards and Guidelines for Quality Assurance in the European Higher Education Area.* Similarly, the Course Approval and Review Handbook takes the Academic Infrastructure as a point of reference. Wherever appropriate, policy developments are informed by the *Code of practice.* Examples include the development of the periodic review process (Section 7) and the modification of the external examiner report form (Section 4). The *Code of practice, Section 6* has also informed discussions of assessment at institutional level, with the intention of influencing local practices within the schools.

87   The University has a high level of involvement with professional, statutory and regulatory bodies which are regarded as important points of external reference that feature in approval as well as annual monitoring and periodic review processes. The University's engagement with, and accountability to, professional, statutory and regulatory bodies that specify standards and competencies (such as the Training and Development Agency for Schools), have an influence on the provision of appropriate learning opportunities for the students concerned.

88   The University has extensive links with professions, practitioners and business, together with close engagement with the regional, social and economic context. Many courses employ practitioners as visiting lecturers, while knowledge transfer partnerships provide staff with the opportunity to work with local companies. Also, several schools have industrial advisory boards.

89   Further external reference points are derived from the University's involvement in a variety of externally funded teaching and learning projects, including the Higher Education Academy/ Joint Information Systems Committee e-Learning benchmarking and Pathfinder projects, and three centres for excellence in teaching and learning.

90   The audit team found evidence that the University makes wide and appropriate use of a range of external reference points as well as the Academic Infrastructure. There is evidence that the development of institutional policies relating to the management of learning opportunities is informed, in particular, by relevant sections of the *Code of practice,* while individual programmes are, where applicable, responsive to the requirements of, and feedback from, professional, statutory and regulatory bodies. The team did, however, find some evidence that the relatively high level of autonomy given to schools to determine the precise implementation of centrally agreed policies informed by external reference points could lead to some inconsistency in

practice between schools in some areas. This has been identified by the institution as a possible issue in relation to assessment and feedback to students. The team would encourage the University to pursue its intention to address this issue and to review the degree of flexibility offered to schools in relation to assessment and feedback. For further comment see paragraphs 68, 77, 101 and 102.

Approval, monitoring and review of programmes

91   The University's approval, monitoring and review processes are described in two principal documents: the Course Approval and Review Handbook, and the Academic Health Handbook. The University has in place comprehensive arrangements for the approval of new courses. Before a new course proposal can receive approval from the Academic Development Committee to proceed to validation, it must first be approved at school and faculty levels. This Committee has the authority delegated from the Academic Board to determine the title of the proposed new course and to determine whether the proposal is sufficiently robust and has sufficient support to proceed to validation. Validation takes place either at faculty or university level, determined by the Academic Development Committee with reference to a set of criteria. Under normal circumstances validations are faculty-level events, but courses will proceed to university-level validation if they involve collaboration with new partners or significant internal collaboration, or if they involve a new subject area, mode of delivery or a new award of the University. The validation process, whether at university of faculty level, is intended to ensure that programmes are designed in accordance with the Common Academic Framework; aims and objectives are clear and in line with national standards; curricula, teaching, learning and assessment methods will enable students to achieve awards; student support arrangements are in place; sufficient resources and appropriate quality assurance arrangements are in place; and that relevant professional, statutory and regulatory bodies' requirements have been taken into account. Validation panels have external members who act as independent subject experts. The audit team found evidence of the rigorous use of external expertise in the validation process.

92   Clear and appropriate procedures are also in place for making changes to validated courses. Changes to modules, including the development of new modules for inclusion within a validated programme, are the responsibility of Faculty Academic Boards. More substantial changes, for example, changes to course title or closure of a programme, require the approval of the Academic Development Committee.

93   The University has in place a periodic review process, under which courses are normally reviewed at no more than five-yearly intervals. These events do not re-approve courses, since initial approval is indefinite, subject to successful annual monitoring. Periodic review has two principal aims: to provide a formal enhancement opportunity, and to engage with best practice nationally (including engagement with the Academic Infrastructure) and ensure continuing appropriateness in the light of University policies and procedures. The periodic review panel includes external subject experts who are not external examiners of the University. Outcomes of periodic review are normally expressed as a set of recommendations or action plans which focus on the enhancement of courses. Supervision of the process and the resulting action plans is maintained by the Academic Standards Committee.

94   The University's annual monitoring scheme, the academic health process, is one of the key processes by which the quality of student learning opportunities is maintained. Reports, which are produced at module, course and school levels, include data on recruitment, retention and progression, achievement, student evaluation, student recruitment, external examiner reports and any issues relating to professional, statutory and regulatory bodies. School reports are considered by relevant faculty academic boards, which are required to submit detailed minutes of their deliberations to the Academic Standards Committee for consideration during the annual academic health special meeting held in late December each year. Six weeks after this meeting, an annual academic health enhancement meeting takes place, with the aim of reflecting on one thematic area emerging from the annual process. As noted above (in paragraph 63), a subcommittee of the

Academic Standards Committee, the subcommittee for professional, statutory and regulatory bodies' reports, maintains institutional oversight of these reports and related activity.

95   The Academic Partnership Committee, which maintains supervision of all partnership activity, also reviews each partner college programme on an annual basis. This process occurs in parallel with the annual Academic Health process. Reports are considered at school level, reported to the Faculty Academic Board and then considered alongside school reports and Faculty Academic Board minutes at the annual academic health special meeting. In parallel, the Academic Partnership Committee reviews the reports in order to identify common issues across the institution's partnership activity. In addition to course reports on provision delivered in partner institutions, this Committee requires each partner institution to produce an annual institutional report, which gives an overview of each institution's partnership provision. Both course reports from partner institutions and institutional reports follow common formats determined by this Committee for comparability.

96   The audit team found evidence that the University's systems for validation, monitoring and review are robust and effective. The annual monitoring process is effective in ensuring that issues are identified and addressed at appropriate levels, while maintaining a suitable intensity of institutional oversight through the annual Academic Health special meeting of the Academic Standards Committee. The process is also effective in monitoring activity in UK-based partner institutions. Similarly, the team found evidence of effective and thorough validation and periodic review processes with an appropriate degree of externality.

Management information - feedback from students

97   The University's annual academic health process requires that student feedback be taken into account as part of the annual monitoring cycle. In this way institutional oversight is maintained over the collection of student feedback. Annual monitoring reports at each level (module, course, school and faculty) contain a commentary on student evaluation and feedback and, where appropriate, actions to be taken are identified. Annual and periodic surveys of student opinion are undertaken by Information Services and Student Services. Data from these surveys are also available for incorporation into schools' annual academic health reports. An annual student finance survey is also undertaken, and its results considered by the Academic Board.

98   Feedback from students studying in partner colleges is managed through the annual academic health process. Where collaborative activity is managed through academic schools, student feedback is reflected in school annual academic health reports. In the case of Plumpton College, where a single report from the institution functions as the equivalent of a school annual health report, commentary on student feedback at course level is incorporated into that report in the same way as for school reports. In the case of Northbrook, the equivalent of a Faculty academic board report (from the Higher Education Review Board) is submitted to the Academic Standards Committee and, as with faculty academic board reports, includes a summary of issues raised through student feedback. Also see paragraph 166 below.

99   Research students are surveyed annually. The results of this survey are considered by the Research Degrees Committee which annually reports to the Academic Standards Committee key issues arising from the feedback and, where appropriate, responses to these issues.

100   The annual monitoring process also entails comment on the results of the National Student Survey. Results are considered at school level in the compilation of the annual academic health report. Centrally, the results are analysed through the work of the Academic Standards Committee which seeks comments from schools on significant issues and monitors actions taken in response.

101   The audit team noted that although the University requires comment on student feedback as an integral part of its annual monitoring process, it is not prescriptive about the mechanisms that individual courses adopt in order to generate student feedback. The University has actively considered this issue, and a student feedback working group has endorsed the continuation of

a 'flexible and integrated approach'. The team noted that these variations made it difficult to make direct comparisons of data collected in different parts of the institution and to analyse student feedback around common themes.

102   The audit team found that student feedback makes an effective contribution to the management of the quality of learning opportunities. However, the team would encourage the University to consider further how it might promote greater consistency and the adoption of best practice in the generation of student feedback across the range of provision for which it is responsible.

Role of students in quality assurance

103   The University's Briefing Paper made clear the importance the University attaches to student participation in quality assurance and identified the processes for achieving this as committee representation, involvement in validation and review meetings, and student evaluations. The audit team confirmed that students are widely represented across the committee system. There is student representation on the Academic Partnership Committee, the Northbrook College Review Board and Brighton and Sussex Medical School Academic Board. There are four student seats on the Student Services Committee and three on the Estates Committee. Postgraduate and research students are equally well represented on the Research Degrees Committee and Research Ethics and Governance Committee. Student representation does not, however, extend to either the Information Strategy Committee or the Information Systems Implementation Steering Group, which the University might reconsider, given its planned increase in reliance on studentcentral. The high level of student representation throughout the committee system fully bears out the University's claim that student participation is essential. As noted later in this Annex (paragraphs 140 and 141) students have recently been given responsibility for setting the agenda of the independently chaired Student Affairs Committee of the governing body.

104   The audit team also noted the generally high level of student involvement in the University's deliberative and consultative processes. Students' Union officers participate in the Academic Health Enhancement Day, contributed to the review of the Student Complaints Procedure and meet regularly with the Vice-Chancellor and other senior managers, as noted below in paragraph 140. The student written submission prepared for this audit was received by the Academic Board and the issues it raised were identified for consideration by schools and faculties. Student concerns are reflected in the report of the annual academic health meeting and a recent enhancement theme was 'Listening to the student'. Student views are sought as part of the periodic review process and students are represented on course consultative committees.

105   Most students that the audit team met were generally positive about the channels of communications available to them. However, the student written submission distinguished between the quite positive experience of participation at institutional level and a less satisfactory situation at course level, where students report that the student representative system does not always operate effectively. This was confirmed in meetings the team held with student representatives. Through their meetings and analysis of documentation, the team was reassured that the University recognises the difficulties in securing student representation at course level and recognises that this is a wider problem in the sector. The recent enhancement theme, 'Listening to the student' was one example of the measures being taken to improve the position.

106   The audit team formed the view that the University is a responsive institution and has an extensive framework for student participation in its quality assurance processes, which makes a positive contribution to the management of the quality of learning opportunities. The University is aware of areas where student representation might be improved and is taking steps to address this.

Links between research or scholarly activity and learning opportunities

107   The briefing document stated that the University aims to 'foster, manage and support' the relationship between research and the curriculum. Policies to enable a 'research informed and enhanced curriculum' are set out in the Learning and Teaching Strategy and are supported through a range of staff development opportunities offered by the Centre for Learning and Teaching. The briefing document listed a number of examples of the links between curriculum development and staff research interests and identified the periodic review process as a point at which course teams consider recent research. The audit team was able to confirm that this took place. The University is involved in three Centres for Excellence in Teaching and Learning, and hosts the Higher Education Academy Subject Centre in Art and Design.

108   The staffing strategy provided for the audit made explicit links with the Research Strategy by setting expectations that all academic staff should undertake research or professional scholarly activity.

109   The report on Annual Monitoring and Evaluation of Staff Development received by the Staff Development Group provides commentary on research and scholarly activities in the schools. For example, the School of Language, Literature and Communication runs 'scholarly sandwiches' lunchtime gatherings for presenting research and development activity. The School of Service Management reported on the progress of academic staff registered on doctoral and master's awards. Overall, the evaluation report confirms the extent of staff involvement in research and scholarly activity linked to their academic areas of expertise. In meetings with staff, the audit team was given examples of curriculum development linked to staff research interests.

110   The audit team noted that monitoring of research performance is to be undertaken through the annual Staff Development Review. In meetings, the University confirmed that the Staff Development Review Scheme has not been revised since 1999 and that the review due in 2007 had been delayed.

111   The audit confirmed the arrangements the University has in place to maintain the links between research and scholarly activity and the curriculum. Students whom the audit team met spoke positively of the ways in which research informs teaching and readily gave examples from their own experience. However, given the important function the Staff Development Review Scheme has in relation to planning and monitoring academic staff research and scholarly activity, the University will wish to be confident that the Scheme is operating as intended (see paragraphs 148 and 152).

Other modes of study

112   The University currently makes significant use of e-learning in its part-time courses and in courses involving placements, but does not have any plans to increase the number of courses taught exclusively by e-learning or distance learning. The University currently has only one programme, the MA Tourism and Leisure Management, that is delivered fully electronically and this is delivered in collaboration with a European partner.

113   The institution has taken the view that e-learning is a valuable adjunct to the range of pedagogic techniques available to support the delivery of its programmes, but is not a qualitatively different approach requiring its own strategy and associated policies. Instead it has sought to integrate e-learning into its general Learning and Teaching Strategy and, where appropriate, consider e-learning alongside other pedagogic techniques. Consequently, in this manner, it is anticipated that the role of e-learning across the University's provision will increase further over the life of the current corporate plan.

114   It was clear to the audit team that the oversight of the quality of learning opportunities afforded by other modes of studies is appropriately maintained through the institution's annual monitoring process.

Resources for learning

115   The 2004 audit report concluded that the University's measures to monitor and manage learning support services were effective and enabled it to provide suitable learning opportunities for its students. The arrangements in place for resource management in 2008 are, with some adjustments, broadly the same as those in place in 2004 and reflect a well-established, responsive system. The context for resource allocation also remains largely the same as in 2004, with faculties, schools and departments distributed across five campuses. Financial arrangements for Brighton and Sussex Medical School are discrete and are not considered here.

116   The Briefing Paper described the University's resource allocation arrangements as comprising a 'dual mechanism for the provision and planning of learning resources to students'. Information Services provides baseline learning resources on each campus with schools and faculties responsible for local subject-based resources, including laboratories and specialist learning facilities.

117   The Academic Development Committee and the Academic Standards Committee have responsibility for maintaining the quality of, and coordinating, learning resources through the Estates and Information Strategy committees. In 2006, Academic Board was asked to approve the principle that responsibility for oversight of learning resources in future would be met by Learning and Teaching Committee, Information Strategy Committee and the Management Group and since then, the Learning and Teaching Committee has had a strategic remit to monitor the learning environment.

118   To date, resources have been allocated to schools and departments annually through a structured budget process using a well-established Resource Allocation Model. A new Resource Allocation Model is being introduced for the 2008-09 academic year. This is a development of the previous model that is intended to ensure that academic department budgets are informed by good information on the financial effects of teaching activity; there is greater predictability of allocations to academic departments; and that there is improved information on central costs and their relationship to activity levels. Although the impact of the University's adoption of the new Resource Allocation Model will be a matter for future evaluation, it was evident to the audit team that the University is diligently reflecting on and refining its budget and resource allocation processes. In doing so, it has carefully considered the evidence of internal feedback, the external policy and funding environments and its strategic objectives.

119   Information Services, which was formed in 2000 by the merger of Learning Resources (Library and Media) and the Computer Centre, provides the baseline learning resources for each of the University's campuses and their associated faculties and schools. The Information Services Strategy 2007-12 is a comprehensive document. Its 16 aims and associated objectives are directly linked to the six Corporate Plan aims for the curriculum, research, social and economic engagement, the staff and student experience, the physical environment, and governance and management. Priority objectives include the simplification of procedures and systems for students using the department's services, a review of all student-facing services to improve the student experience, and improving studentcentral.

120   To understand better the relationships between the processes of resource allocation and management, and the relationship between schools and central departments in these processes the audit team considered a paper comprising extracts from school Academic Health reports considered by the Academic Standards Committee at its meeting of 14 December 2006. This Committee noted significant problems with the estate raised in reports, and which had implications for the quality of learning and teaching. Subsequently the Estate and Facilities Management Department provided a detailed response to the issues.

121   The audit team also noted that the annual Academic Health reports contain positive comments on accommodation and facilities. Notably, the Eastbourne Campus is reported as an 'excellent base for students and staff', Business School students are 'well provided for' and the

quality of learning resources is reported as 'highly regarded by staff and students across all programmes'; the refurbished laboratories in the School of the Environment are 'excellent'. Students met by the team confirmed that they are broadly satisfied with the quality of learning opportunities available to them.

122   The University's Estate Strategy recognises that growth in student numbers and increase in research activity have 'placed a great strain on an existing estate that has not seen any significant increase in net space'. The Estate Strategy identifies significant investment in the University's buildings, including new build and refurbishment across its five campuses. A new academic building at the Falmer Campus will open in 2009, followed by a new library at Grand Parade and a new science building for Pharmacy and Biomolecular Sciences, both in 2010.

123   For the future, the University is strengthening links between estate planning and the faculties and departments. The intention is to establish plans for each faculty and department in order to inform resource decisions and thereby strengthen the decision-making process to inform resource management. The University believes there is 'a need for a conversation between different parts of the institution as it works out its priorities for the next period, and how to resource these'. Discussions the audit team held with staff confirmed that the development of local strategic plans marked a shift to a more strategic process for resource management and planning across the University's sites.

124   The University is increasingly providing student access to learning resources through studentcentral. At the time of the 2004 audit the University's target for use of studentcentral was 50 per cent of students, and the report concluded that the development and implementation of studentcentral was making a noteworthy contribution to student learning opportunities. Programme-level staff were positive about the benefits of studentcentral. The Centre for Learning and Teaching provides staff development for those staff who wish to learn about how to use studentcentral effectively. A learning technologies adviser is based on each site.

125   Notwithstanding this positive endorsement of studentcentral, students related mixed experiences to the audit team. While one student described studentcentral as a 'lifeline', others reported problems of access and ease of navigation. The Information Services Strategy 2007-12 and the Learning and Teaching Strategy 2007-2010 set explicit objectives to strengthen the use and performance of studentcentral.

126   The University has well-established resource allocation procedures, keeps these under review and actively monitors the relationship between resource provision and teaching, research and learning. Investment is being made in the estate and the learning and teaching infrastructure, informed by a comprehensive strategy. The University is introducing a new planning framework for local resource planning and management on each of its campuses, and a new resource allocation model is being introduced in 2008-09 that takes account of changes in higher education funding and which is designed to support the University's achievement of its Strategic Plan objectives. The audit team is confident that the University's arrangements for the provision, allocation and management of learning resources are effective in maintaining the quality of students' learning opportunities. However, the team felt it was desirable that the University continue to monitor and enhance the effectiveness of studentcentral as a tool to aid learning and teaching.

Admissions policy

127   The Briefing Paper noted that the University's admissions policy was being reviewed at the time of the audit to take account of the *Code of practice, Section 10: Admissions to higher education,* a revised version of which was published in 2006. The audit team noted that the University's policy was last revised in 2004 and had been due for revision in 2006, as stated in the 2004 policy document. At its meeting in March 2007, the Academic Standards Committee received a paper which provided an overview of external developments that a revised policy

would need to consider, such as age discrimination, as well as the *Code of practice*. The paper proposed greater investment in staff development in line with the recommendations of the Schwartz report.

128   Subsequently, the Academic Standards Committee considered a revised undergraduate admissions policy which, in turn, was discussed by the Academic Board at its meeting in February 2008. The policy had been appropriately updated to take account of changes in legislation and the *Code of practice.* However, the Academic Board required further amendments and at the time of the audit, the new policy had not been approved.

129   The Recruitment and Admissions Office in Registry provides central oversight of admissions, while schools are responsible for the local management of the admissions process through admissions tutors. A Recruitment and Admissions Forum meets three times a year. Course-specific admissions criteria are agreed at validation. Access agreements are kept under review at the Widening Participation and Diversity Committee.

130   The University has well-established policies and procedures for admissions that reflect careful consideration of the *Code of practice, Section 6.* It is evident the University keeps its policies under review, although it might reflect on how it might make necessary changes more briskly than appears to be the current practice.

Student support

131   The 2004 audit report expressed broad confidence in the University's provision of academic guidance, support and supervision and endorsed the University's intention to keep provision under review. Encouragement was given to take a more strategic approach to the future direction of the personal support services it provides for students. The Briefing Paper for the 2008 audit characterised the University's support for its diverse student population as one of partnership between the academic schools, the Centre for Learning and Teaching, the Students' Union and groups such as the Widening Participation Implementation Group. The University judges its student support, both academic and personal, to be well managed and well directed, enabling its students to achieve their potential.

132   Support systems include information provided in handbooks, studentcentral, personal tutoring, and specialist support provided by Student Services. Student Services makes extensive use of studentcentral to provide information to students. Telephone and web-based help services are available to students accepted for a place at the University who are given access to a dedicated area of studentcentral. Joining students receive comprehensive information packs at induction in addition to being able to access support through studentcentral.

133   Supervision of academic and specialist support is the responsibility of the Learning and Teaching Committee and Student Services Committee respectively. Information Services provides computing, library, and media services in support of learning, teaching, research and administration and provide full information to students about services. Personal support and guidance to students in partner colleges are discussed by the the Academic Partnership Committee. There are specialist support services for students with disabilities. The support framework is informed by appropriate policies, such as the Mental Health policy.

134   The Review of postgraduate research degree programmes 2006 found all arrangements for the support of research students to be satisfactory. The University's view is that its operational and regulatory framework for supporting research students is well established. All arrangements are set out in the University's Code of Practice for MPhil, PhD and Professional Doctorates. Annual monitoring procedures for research students are set out in the Research Student Handbook. Annual monitoring reports are considered by the Research Degrees Committee. An overview of issues raised in the annual monitoring of research students is also provided to the Academic Standards Committee for information. Recent developments in research student support arrangements include the establishment of annual Progression Review Panels in 2006. A review of

research degree processes and structures is due to be undertaken in 2008-09. Research students whom the audit team met spoke positively about the quality of the support they received from both supervisors and the University more generally.

135   Academic schools and departments are responsible for ensuring there are effective arrangements for personal tutoring within the University's policy framework. The Centre for Learning and Teaching publishes a guide to personal tutoring for staff that explains student and staff entitlements and gives advice on the purpose and conduct of personal tutoring, including the particular needs of students with disabilities. This is updated regularly and the most recent version is available on the Centre for Learning and Teaching's web pages.

136   The student written submission was generally positive about the impact the personal tutoring policy has had on provision of student support but suggested there was some variation in the effectiveness of student support delivered at school level. However, it also reported that two-thirds of students were able to contact their personal tutor at a time appropriate to their needs. Asked to comment on these views, academic and support staff whom the audit team met described a network of support at school, faculty and institutional level through central support services that students have available to them. Their view is that students access these according to need and preference. Students the team met confirmed that this reflected the pattern of their own contacts with staff.

137   Research and taught postgraduate students were also positive about the academic and general support they received from supervisors and academic staff, although some frustration was expressed with studentcentral. Some postgraduate students would welcome an extension of self-service facilities and late opening in libraries but students were positive about the quality of academic teaching and support and their overall experience of the University's postgraduate environment. Research students had received training before taking on teaching responsibilities but were not aware that they had undergone teaching observation. International students spoke of the excellent support they received from the International Office and their home schools.

138   There is a wide range of resources available to staff through the Centre for Learning and Teaching covering most aspects of learning, teaching and student support, including a dedicated section on teaching students with disabilities compiled jointly with Student Services. Arrangements for personal development planning are set out in a comprehensive and accessible guide with directions to documentation on the Centre for Learning and Teaching's website. All students are encouraged to undertake personal development planning. Career planning agreements are used by course teams to ensure that programmes provide sufficient opportunities for career planning. These agreements do not normally form part of the documentation made available to students. Indeed, the audit team did not meet any students who knew what a career planning agreement was. From reading the materials available to students, it was clear to the team that the University has invested in developing and making available to students carefully constructed resources to support both career planning and personal development planning. However, among the sample of students met by the audit team, personal development planning was only being undertaken by students following a programme where this is a professional, statutory and regulatory bodies' requirement.

139   A student support and guidance tutor role was piloted in the School of Applied Social Science in 2003 as part of a student retention intervention. Having proved successful, the role had become established in seven schools at the time of the audit. The University intends that all remaining schools will have a student support and guidance tutor during 2008-09.

140   The channels of communication between senior staff and student representatives appeared to the audit team to be strong. The Vice-Chancellor ensures he sets aside time for regular contact with officers of the Students' Union, in addition to the regular contact between other members of the senior management team and Union officers. Students whom the team met clearly appreciated this. Student Affairs Committee is a committee of the Board of Governors

intended to 'advise the Board on the nature and quality of the student experience and on the policies and services required to sustain and enhance it'. The Committee is chaired by a member of the Board. The team learnt that student representation on this Committee has recently been increased and that student members now set the agenda of meetings.

141   These developments contributed to the audit team's conclusion that the University's arrangements for student support are appropriate and effective, and that they contribute positively to the quality of learning opportunities. The team found the University to be an open and responsive institution and concluded that the high degree of responsibility, which includes agenda setting, delegated to students by the Student Affairs Committee of the Board of Governors was a feature of good practice.

Staff support (including staff development)

142   Staff support is provided by faculties, schools and central departments. Central departments that provide internal development activities include the Personnel Department, which houses the Staff Development and Diversity Unit, the Centre for Learning and Teaching, and Information Services.

143   Supervision of policy, staff development plans and activities for the University as a whole is maintained by a staff development group. The membership of the staff development group, which is chaired by a dean of faculty, includes the Deputy Vice-Chancellor, Pro Vice-Chancellor (Academic Affairs) and the Director of Personnel. Arrangements for staff support are set out in two key documents, the staffing strategy and the learning and teaching strategy.

144   The University's staff development provision includes an induction programme for new staff, a staff development and review scheme a management development programme and an innovative annual conference for administrative staff. Staff development workshops are offered each year by central departments and details of these are published in the Staff Development Brochure available through staffcentral. The University's Centre for Learning and Teaching offers a postgraduate certificate in learning and teaching, which is accredited by the Higher Education Academy. There are also programmes accredited by the Higher Education Academy for part-time hourly staff. The staffing strategy states that all new teaching staff without relevant teaching qualifications are expected to take one of these programmes. Teaching excellence awards are offered. Staff development is subject to annual monitoring and evaluation.

145   A reciprocal agreement between the University's partners, including the University of Sussex, gives fee waivers for staff studying on programmes offered by any one of the partners. In each year since 2004-05, between 30 and 45 staff from partner institutions have studied for awards at the University. Brighton and Sussex Medical School is currently drawing a number of staff development activities into a programme and is discussing with both universities preferred options for the accreditation of teaching staff.

146   At the time of the audit, the University was in the second year of implementation of the National Framework Agreement. As part of the process of developing procedures to reflect the Agreement, key elements of the University's staff development frameworks are under review.

147   The main findings of a consultation exercise on staff development were presented to the staff development group as part of the exercise to develop the new staffing strategy. Responses to the consultation exercise balanced support for the encouragement the University gives to staff development with a significant level of dissatisfaction with staff support and development arrangements among some staff groups. Issues included perceptions of unequal access to development opportunities between academic and support staff, managers unprepared for devolved staff responsibilities and concerns about the observation of the requirements of the staff development and review scheme. Overall, feedback indicated the need to improve arrangements for staff development, support, induction and career development, particularly among administrative staff. The staff development group noted this feedback and that a review of the

staff development infrastructure was required to ensure that staff development is supported at both a local and central level. Further consultation on these matters was proposed before the review is concluded and the findings implemented.

148   The audit team also observed that the Staff Development and Review Scheme had not been revised since 1999. Feedback through to the University that staff development reviews have not always been undertaken has not resulted in an acceleration in the review of the scheme. Deans and heads of school whom the team met were clear in their view that the staff development and review scheme needed to be updated.

149   The Staff Handbook, an important source of information to staff, contained sections dated as early 1994 and was inaccurate in some matters. Also, there are inconsistencies between the full handbook and the short version 'Signpost - A Staff Handbook Summary'. The handbook only refers staff for 'general information/advice on staff development issues' either to the Personnel Department or the University's full or part-time prospectus for course information.

150   It is understood that, since 2005, negotiation and implementation of the National Framework Agreement have been a priority for the University. As the National Framework Agreement has largely been concluded, the University is now in a position to revise all handbooks and ensure they are current. The Personnel Department's web pages do provide up-to-date information about staff development events and courses. A brochure, available both online and in hard copy, is produced each term and covers the sessions offered by central departments.

151   The audit team saw examples of well-conceived and successful staff development activities. Since it was piloted in 2005, approximately 90 staff have taken a Management Development Programme covering topics such as Resource and Financial Management, Health and Safety and Employment Law. The Staff Development Conference (previously the Annual Conference for Administrative Staff) in 2007 was attended by over 100 staff and received positive evaluation. Since 2008 the event has been opened up to a wider staff mix and is an example of good practice (see paragraphs 161 and 162).

152   Aim 4 of the corporate plan for 2007-2012 commits the University to developing and implementing a new staffing strategy in order to strengthen staff development. The University makes a substantial investment in staff development and the Staff Development Group maintains oversight of the extent and effectiveness of provision. The audit confirmed that the University has in place extensive arrangements for staff support and development. The Staff Development and Review Scheme is a key means by which staff development is planned and monitored for individual members of staff. The Scheme has not been reviewed since 1999, although the University has been aware of the need to do this. Therefore, the University is advised to ensure that it promptly reviews its Staff Development and Review Scheme in line with any changes to be introduced as a result of its planned review of staff development.

153   The audit team found that the University's systems for the management of learning opportunities were broad in scope, fit for purpose and 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. The University maintains links between research, scholarly activity and the curriculum. Well-established resource allocation procedures are effective, as are the University's arrangements for student support. Students are well provided with resources for learning, and there are extensive arrangements for staff development and support. 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

Management information - quality enhancement

154　The University's Briefing Paper described enhancement as the outcome of the interrelationship between local and subject-based activities and institutional strategies and objectives. From reading the Briefing Paper, and through meetings with staff, the audit team understood this approach to be one of engaging and focusing the University's dual arms of decision-making and delivery on the student experience. This approach aligns the enhancement aspects of the University's underpinning strategies to Corporate Plan priorities and focuses the work of the key committees. The Learning and Teaching Strategy and quality assurance processes are each seen as playing an important role in spreading good practice and promoting innovation. For the University, the success of such an approach is not best captured in a plan but instead is reflected in 'fostering a culture and an ethos of creativity, innovation and the play of ideas'.

155　This account reflected recent discussion at the Academic Standards Committee of how the academic health process might be developed as an element of the University's emerging model of enhancement. In addition to the established Academic Health Day, at which academic health reports are scrutinised, an academic health enhancement day was held in January 2008. The theme of the workshop was 'quality enhancement', and its aim was to develop the University's approach and inform the institutional audit Briefing Paper. The meeting concluded that it was important to 'challenge the notion of quality enhancement as solely deliberate steps at institutional level' as too restrictive and stressed the diversity of practices within the University that contributed to an expanded, multidimensional account of enhancement.

Good practice

156　Both the record of the Academic Health Enhancement Day and meetings with staff confirmed that the academic health process is regarded as a key institutional level process for enhancement. Other staff the audit team met referred to 'multi-layered actions' resulting from the academic health process, which was described as a sequence of interlocking feedback circles at course, school, faculty and institutional levels. Noting this intention to develop the academic health process, the team encourages the University to consider ways this might be achieved without increasing the number of meetings or requirements for the production of reports.

157　Based on its understanding gained from reading documents made available by the University and through their meetings with staff, the audit team noted the following examples of the University's stated approach to enhancement.

158　As noted above (paragraph 119), the 16 aims and associated objectives of the Information Services Strategy 2007-2012 are directly linked to the six Corporate Plan aims for the curricula, research, social and economic engagement, the staff and student experience, the physical environment, and governance and management.

Staff development and reward

159　The first conference for administrative staff was held in 2002 and since that date has been gradually broadened in scope to become the annual staff development conference. From 2008, it will be open to all staff up to grade 6 and will therefore include a wider cross-section of staff than in previous years;105 staff attended the 2007 conference and feedback indicated it was regarded as highly successful. Two stated objectives of the conference are recognition of the contribution and achievements of administrative staff and building understanding of how the University works. A thorough evaluation report is considered by the Staff Development Group. The conference serves the additional purpose of bringing together staff who might work on different campuses. The audit team judged the conference to be a well-established and effective mechanism for enhancement.

160   The activities of the Centre for Learning and Teaching span both institutional level initiatives and support for staff, individually and collectively, to enhance learning and teaching practice. High-quality materials are available on the Centre's web pages.

161   Senior staff who met the audit team expressed the view that one starting point for enhancement is the University's estate. The University manages an estate distributed over five campuses, each with its own particular student population and infrastructure needs. The estate strategy underpins corporate plan objectives for the University's development, informed by an open and evaluative account of the contribution a fit for purpose estate makes to the University's achievement of its educational aims.

162   It was evident to the audit team that the University is engaging with the enhancement agenda carefully, with due regard for institutional cultures and existing organisational frameworks. The University is encouraged to continue to reflect on its approach to enhancement so that it achieves the appropriate balance between, on the one hand, stimulating activity, and on the other, maintaining forward momentum towards its corporate plan priorities. The team found that the annual staff development conference for administrative and support staff contributes to an inclusive approach to staff development and is a feature of good practice.

Section 5: Collaborative arrangements

163   The University operates a number of different types of collaborative arrangements with institutions in the UK and abroad. The arrangements in place for the development, approval, monitoring and management of partnerships in the UK are described in the Partnership Handbook. Broadly, the University has sought to ensure that the quality assurance arrangements for the development and delivery of its programmes in partner institutions articulate as closely as possible with its established quality assurance framework. In addition, institutional oversight of UK-based partnership activity is undertaken by the Academic Partnership Committee.

164   The first model of collaborative provision, which is the typical model adopted in collaboration with further education colleges, locates responsibility for each programme within a school of the University. For each programme, the school appoints a link tutor (or course leader where the programme is delivered in more than one college) who becomes the key contact for college staff engaged in delivering that programme. In the same way as for programmes delivered within the University, an annual health monitoring report is produced for each course and is considered at school and faculty level in the normal way.

165   A variant of this process has been developed for Plumpton College which delivers programmes in land-based subjects. There is little overlap between these subjects and those taught within the University's schools. The 'Plumpton Board of Studies' has been established to function in a manner equivalent to school boards with respect to quality assurance. The Board includes staff from the College and staff from cognate areas across the University. It reports to the Faculty Academic Board of the Faculty of Science and Engineering.

166   A further model exists in relation to the University's validation arrangement with Northbrook College. Northbrook is directly funded by HEFCE to deliver higher education courses, and its higher education provision is validated by the University. The Northbrook Higher Education Review Board, which has members from both Northbrook College and the University, functions in the same way as a faculty within the University's quality assurance system. In this way, the Northbrook Higher Education Review Board provides college-level quality assurance of programmes, by receiving course monitoring reports, external examiners' reports and course development proposals in much the same way as Faculty Academic Boards. Annual reports from the Northbrook Higher Education Review Board are considered by the Academic Partnership Committee as part of the annual health monitoring process in the same way as faculty reports from the University's faculties.

167   The Academic Partnership Committee is also responsible for the Partner College Review process which reviews, at an institutional level, the quality of franchised provision and the quality of the operation of the partnership. This is a key mechanism for quality enhancement in collaborative provision, above and beyond that which arises from the monitoring and review process of all University programmes. A new version of the Partner College Review process was also approved by the University in 2006-07 to take account of the experience of participants in Partner College Review to date, and to provide support for colleges as they prepare for Integrated quality and enhancement review. In October 2007, the University held its first partnership conference, the theme of which was sharing good practice. Each further education partner college now has a higher education forum which meets at least once each term to discuss emerging issues and share good practice.

168   Given that there are significant variations in the University's formal responsibilities for each of its major partnerships, the audit team's view is that the Academic Partnership Committee is strategically positioned to take an overview of all the University's collaborative arrangements in the UK. By doing so it is able to identify cross-cutting issues that might otherwise be seen in isolation and therefore can provide a focus for enhancement of partnership working across the different models of collaboration. The audit team concluded that the role played by the Academic Partnership Committee in maintaining oversight of UK-based partnerships for the purposes of quality assurance and enhancement is an example of good practice.

169   The University has, for some time, offered a number of joint awards with the University of Sussex. A Joint Planning Group exists, which includes senior staff from both institutions, and is responsible for a range of joint activities between the two institutions, including research and joint courses. The two Universities currently offer three joint postgraduate awards and one undergraduate award in addition to the awards of the joint Medical School (see paragraphs 174 to 176).

170   Joint awards between the two Universities are governed by bespoke programme and assessment regulations which are agreed by both Universities. Management of students and administration of the programmes, including responsibility for annual monitoring, is undertaken by one of the two Universities (known as the 'primary administering university') on an alternating basis for each programme. Outcomes of monitoring and review, including the National Student Survey, are shared with the partner institution and thus both Universities are able to confirm the academic standards and quality of learning opportunities pertaining to these programmes. External examiner appointments for such programmes are made jointly between the two Universities and both institutions receive and process their reports according to their respective procedures. A course leader (or co-course leader, depending upon which higher education institution is the primary administering university) is appointed by the appropriate school of each university, and is responsible for overseeing, with their counterpart in the other higher education institution, the day-to-day management of the programme.

171   A limited number of programmes is delivered in collaboration with overseas partners. In the majority of cases, staff from the University travel overseas to deliver a proportion of a programme which is also delivered at the University, and at the same time monitor the operation of the programme at the partner institution. The University has arrangements in place for the approval of such partnerships, and annual monitoring and review is conducted via the home school through the review and annual health monitoring processes. However, there is no central oversight of these partnerships as there is for UK-based ones through the Academic Partnership Committee.

172   The audit team found evidence of effective management and institutional oversight of UK-based partnership activity. The University has sought to embed quality assurance arrangements for the delivery of its programmes in partner colleges at appropriate levels within its core quality assurance and enhancement infrastructure, taking account of the scale and type of provision concerned. The Academic Partnership Committee plays an effective role in maintaining institutional oversight of the range of UK partnership activity and identifying cross-institutional issues relating to collaborative provision. The Partner College Review Process

has also proved effective in achieving a number of quality enhancements in collaborative provision. The University recognises that any future growth in international partnership activity is likely to require a review of mechanisms for maintaining institutional oversight of this type of provision. The team concluded that, should the University seek to expand its international partnership activity, that it would be desirable for it to consider ways to ensure that the institutional oversight of this activity be as effective as that which already exists for collaborative provision based in the UK.

Brighton and Sussex Medical School

173   Brighton and Sussex Medical School was established in 2003 as a collaborative arrangement between the University and the University of Sussex. The Universities determined that, given the size and scale of the venture, the existing arrangements for joint awards of the two Universities would not be appropriate, and, accordingly, a bespoke set of policies, administrative procedures and operational protocols governing academic standards, quality assurance and enhancement, administration and finance was agreed. The University of Sussex is responsible for administering the employment of staff and the finances held in common, and the University of Brighton is responsible for student administration.

174   The Joint Approval and Review Board is the primary body responsible for the academic standards and the quality of the student learning experience at the medical school. The Board is accountable both to the Senate of the University of Sussex and the Academic Board of the University of Brighton and ensures that the academic standards of the awards of the medical school and the associated policies and procedures, and oversight of learning opportunities are consistent with those of both parent institutions. Significant cross-membership of the Board and its subcommittees with the parallel committees in each parent institution is designed further to ensure joint ownership of the programmes. Complaints and appeals are administered by the University of Brighton with joint representation on panels. The Medical School has extensive involvement with external reference points, in particular the General Medical Council and local NHS organisations. The provision offered by the Medical School is fully compliant with the requirements of the Council.

175   The Terms of Reference and the functioning of the Joint Approval and Review Board ensure that the processes and procedures governing the operation of the Medical School articulate effectively with those of both parent institutions, and that the division of responsibility between the Universities is clear. Minutes and documentation from the Joint Approval and Review Board demonstrate effective stewardship of academic standards and the quality of learning opportunities in the Medical School. Meetings with staff of the Medical School and review of relevant documentation indicated to the audit team that students and staff derived considerable benefit from the range of learning opportunities afforded to staff and students of both institutions through the joint arrangement. The team found that the University was vigilant in meeting its responsibilities for the joint provision of Brighton Sussex Medical School and that the management of academic standards and the quality of learning opportunities was secure.

Section 6: Institutional arrangements for postgraduate research students

176   The QAA Review of postgraduate research degree programmes carried out in 2006 was generally positive in its assessment of the management of postgraduate research students.

177   The University strongly supports the view that research training should be concentrated in areas where there exists a strong research culture and a critical mass of active researchers. Postgraduate research students at the University are located within 13 research student divisions, which include between 10 and 80 students. The research student divisions are aligned with areas of critical research mass either within a school or across a number of schools. Smaller research student

divisions are encouraged to work collaboratively with larger divisions. Each research student division has a research student division leader, who is responsible for managing the Division and for overseeing the academic well-being, progress and pastoral support of all research students in their division. Each student has a thesis panel which normally remains with them for the duration of their studies. Research student divisions each have their own dedicated administrative support through a research student division administrator, with responsibility for local record-keeping, convening meetings of thesis panels, monitoring key deadlines and acting as a key source of advice and guidance on the regulations and process. Central administration is undertaken by the Research Support Team located in the Registry. A range of facilities is available for research students. Each student is provided with a desk, workspace and access to appropriate laboratory or studio space.

178   The University has a well-developed research strategy which seeks both to support the research centres and to provide continuing support for developing research areas within the academic portfolio. The overall responsibility for maintaining the quality of the research support environment in the institution on behalf of the Academic Board resides with the Academic Development Committee. This Committee plays a key role in coordinating research resources with estates and information management policies through its supervision of its subcommittees, notably those for research strategy, learning resources, estates and information strategy. The research strategy subcommittee take a broad view across the institution of the whole research environment of the University. Each faculty also has its own faculty research strategy committee, which reports to both the faculty academic board and the research strategy subcommittee. To ensure the maintenance of the necessary research quality, culture and environment, the individual faculty research strategy committees and the research strategy subcommittee monitor research across the institution on an annual basis, considering the activity of the staff and the level/standard of outputs produced in each research centre.

179   The University has a well-established regulatory and operational framework within which its postgraduate students are supported. The Regulations for MPhil, PhD and Professional Doctorates outline the framework for all research degrees and the processes for managing the degrees are outlined in the University's Code of Practice handbook.

180   The processes for the selection, admission and induction of research degree candidates are detailed in the University's Code of Practice. The responsibility for the selection of students lies with a provisional thesis panel, consisting of the research student division leader, the head of school and one or two potential supervisors. A standard induction framework covering research training, facilities, health and safety and ethics is used by all research student division leaders. This can be tailored to meet an individual student's needs. An induction checklist signed by the student is used to confirm that a full induction has been carried out. Division handbooks and local support issues are dealt with during the induction process.

181   Supervision is carried out through supervisory teams which include two or three supervisors who normally have experience of supervising at least two successful candidates between them. At least one member of a student's supervisory team must be on the approved register upon admission of the student, and all members must be on the register within the student's first year. Research student division leaders monitor this process. The criteria for supervisors being included on the register include compulsory attendance at supervisory training workshops and for them to be research active. Staff are registered for a five-year period and are then required to attend a refresher workshop to maintain their position on the register. The audit team found that the maintenance of a register of staff eligible to supervise PhD students, together with training for those wishing to gain eligibility to be a feature of good practice.

182   Supervisors are normally expected to have no more than six research students for whom they are lead supervisor, a restriction that is regularly monitored by the Research Degrees Committee. The roles and responsibilities of supervisors are clearly articulated in the University's Code of Practice. Postgraduate research students spoke positively to the audit team about their experience, including the quality of their supervision.

183   The University's framework designed to support research students' development as researchers includes key stages at which academic progress is monitored and approved. A system of annual progress panels has been enhanced and developed into annual progression review panels, which ensure that students can only continue if they are making satisfactory progress. The first formal progress review stage for postgraduate research degree students is the approval of the thesis outline, which takes place within nine months of admission for full-time students and within a year for part-time students. The panel considers the suitability of the supervisory team, the training needs of the students and ethical considerations relating to the research. An annual review of students' progress is considered by the non-supervisory members of the panel. The frequency of meetings between student and supervisor is mutually reviewed and agreed at the annual review stage. Minutes of supervisory meetings are recorded by the supervisor and student and are kept in the student's file. The research student division leaders are required to produce an annual monitoring report which includes student data, an analysis of student feedback and other reflections on the operation of the research student divisions. These reports are considered at faculty level and then by the Research Degrees Committee which takes an overview of institutional issues at its annual monitoring meeting. University-wide completion rates, withdrawal rates and supervisory workloads are collated and considered at this meeting.

184   Responsibility for assessing the training needs of the students lies with the supervisors and is reviewed at the formal progress monitoring stages. Research student skills training is predominantly provided through the University Research Training Framework. The Framework provides the opportunity for students to achieve either a Certificate or Diploma in Research Methodology through the selection of level-M modules specifically suited to the student's research field and personal career aspirations. The modules are available free to all registered research students. The University Research Training Framework also builds on the individual research experience by employing assignments which either relate to aspects of their own research project or require an element of reflection on the relevance of a subject to their own research. The University Research Training Framework is supported at research student division level by local seminars and support for conference attendance. A recent innovation has been the introduction of the Personal Development Record folder which enables students to link individual goals and achievements to learning and development needs. Where possible, research students are given opportunities to teach on undergraduate or master's modules, after having completed a short Teaching in Higher Education course. As noted above in paragraph 137, research students told the audit team that they valued the training and the opportunities to teach but had not been observed in this role. The University may wish to consider more formal methods of supervision of observation of their teaching to ensure the maintenance of quality.

185   Students and supervisors provide feedback through the annual review process. Students are requested to complete an online satisfaction survey which allows the University to monitor the quality of its provision across the research student divisions. The results of this survey form an important part of the annual monitoring report. Research student division leaders play a key role in representing the views of staff and students from their divisions on the Research Degrees Committee. External examiners are requested to comment on University processes in addition to an assessment of the thesis. These reports are considered by the Research Degrees Committee.

186   Policies concerning examinations are to be found in the Regulations and the processes for their operation are outlined in the Universitiy's Code of practice. Examination arrangements and the conferment of degrees are the responsibility of the Research Degrees Examination Subcommittee, reporting to the Research Degrees Committee. Postgraduate students are assessed on the basis of the quality of their research theses and on their performance in a viva voce. The Research Degrees Committee approves the appointment of external examiners on the recommendation of the Thesis Panel (also see paragraph 53 above). The University has recently introduced the compulsory presence of an independent chair at each viva examination in order to ensure an equitable and efficient process.

187   The research student division structure at the University allows for a high level of individual student representation. Students have access to staff independent of their supervisory teams. The research student division leader, as manager of the division, is a primary point of contact for research students. All students are also formally seen annually for the annual progress review. Provision has been made for research students to be represented on local committees and school boards, where they are an integral part of the decision-making process. There is also a research student representative on the University Research Training Framework Programme Board. The Research Degrees Committee includes representation from full and part-time students for the non-confidential part of its agenda.

188   Students are entitled to representation when subject to disciplinary procedures or when attending an appeal hearing. The University has a clearly described four-stage complaints procedure ranging from Stage 1 (informal discussion at school level); Stage 2 (written complaint); Stage 3 (Student Complaints Panel); Stage 4 (meeting chaired by independent member appointed by the Board of Governors). In the case of unsatisfactory resolution, the complaint can be referred to the Office of the Independent Adjudicator. The appeals processes of the University are described in the Regulations. An appeals process for students who are withdrawn under the Progression Review Panel process has recently been introduced. Students who are not approved for the transfer to PhD have the opportunity to request a review of this decision. The University currently has no measures in place to monitor the number and nature of postgraduate research student appeals, but is considering ways in which to do so (see paragraph 80).

189   The evidence considered by the audit team led it to conclude that the arrangements for postgraduate research students, including those for support, supervision and assessment, were rigorous and effective and met the expectations of the *Code of practice, Section 1: Postgraduate research programmes.*

Section 7: Published information

190   The University is committed to providing accurate, relevant and timely information to its stakeholders. The scope of the information the University produces is broad, and includes information about learning opportunities, corporate planning and quality and standards. A comprehensive information strategy provides a broad framework of principles within which information is published by multiple providers and which clearly locates responsibility for the accuracy, currency and appropriateness of published information with the organisational unit that provides it. The Information Strategy Committee assumes overall responsibility for the management and review of the strategy.

191   The marketing and communication strategy recognises the diversity of the University's target audience and ensures a consistent approach in delivering key messages about the institution. Faculties, schools and partner institutions are involved in publishing information about courses, and the Marketing and Communications Department provides specialist advice on approach and the presentation of information, as well as managing the information made available (in conjunction with Registry). The University has recently developed a process for the production of UCAS entry profiles, which will be managed by Marketing and Communications, in liaison with academic staff. Processes for the management of published information through partner colleges are detailed in memoranda of agreement and monitored through the Academic Partnership Committee.

192   The University has made significant progress in using the web as a key vehicle for the provision of information and has adopted a three-tier approach. Firstly, the University website provides information primarily of interest to members of the public, prospective students and alumni. Secondly, staffcentral provides University-wide information of interest to current staff and staff in external organisations working in close partnership with the University and, finally, studentcentral is the main site of web-based information for current students.

193   The admissions policy commits the University to providing clear and accurate information about its courses and the key means by which it makes this information available are through the prospectuses and the website. These draw on information held in a central courses database, which is jointly managed by the Registry and Marketing and Communications. The database holds definitive information about approved award titles, durations and modes of study. Procedures for the validation of new courses include the completion of a pro forma dealing with the publication of information relating to the programme, such as curriculum content and career opportunities. Faculties and schools have their own web pages and some also produce course-level brochures. Dedicated marketing officers are assigned to faculties and partner colleges to ensure consistency of approach. The view expressed by the student written submission that the Students' Union 'has no reason to believe, nor state, that the University publishes inaccurate information about itself' was confirmed by students met by the audit team.

194   On entry to the University, all students (including those of partner colleges) are provided with the University Student Handbook, which articulates the formal relationship between the student and the institution and includes details of the procedures for appeals and complaints, extensions to deadlines, mitigating circumstances and the disciplinary regulations. Course handbooks contain course-specific regulations and, throughout their course, students receive additional information relating to curriculum and assessment matters. Institutional expectations relating to assessment information are set out in the General Examination and Assessment Regulations and reinforced by the Assessment Policy. Students confirmed to the audit team through the student written submission and meetings that they find programme and module handbooks useful.

195   Studentcentral provides web-based material to support student learning and to provide University-wide information. Course and module leaders hold responsibility for any course and module-related information, while institutional information is generated by the relevant support department. The development of studentcentral is overseen by the Learning and Teaching Committee and takes place operationally through Information Services and the Centre for Learning and Teaching, working closely with staff from schools, faculties and central departments. Some students found the structure of studentcentral to be challenging and some information difficult to access. However, on finding the information, it was generally found to be accurate and useful (see paragraphs 125 and 126 above).

196   The University has engaged with the Unistats website in recent years and has published a range of Teaching Quality Information material in accordance with national policy. External examiners' reports are discussed at course boards at which student representatives are present. Summary information on the outcomes of quality processes is available via the publication of minutes of the Academic Board, the Academic Standards Committee and the Academic Development Committee on staffcentral. Information Services is responsible for policy with respect to the *Freedom of Information Act* and monitors the University's website and intranet to ensure compliance.

197   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.