

# Higher Education Review of Leeds Metropolitan University

April 2014

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## About this review

This is a report of a Higher Education Review conducted by the Quality Assurance Agency for Higher Education (QAA) at Leeds Metropolitan University. The review took place from 7 to 11 April 2014 and was conducted by a team of five reviewers, as follows:

- Professor Philip Cardew
- Professor Hilary Grainger
- Dr Douglas Halliday
- Professor Diane Meehan
- Mr Wesley Wells (student reviewer).

The main purpose of the review was to investigate the higher education provided by Leeds Metropolitan University and to make judgements as to whether or not its academic standards and quality meet UK expectations. These expectations are the statements in the [UK Quality Code for Higher Education](#) (Quality Code)<sup>1</sup> setting out what all UK higher education providers expect of themselves and of each other, and what the general public can therefore expect of them.

In Higher Education Review the QAA review team:

- makes judgements on
  - the setting and maintenance of the threshold academic standards of awards
  - the quality of student learning opportunities
  - the information provided about higher education provision
  - the enhancement of student learning opportunities
- provides a commentary on the selected theme
- makes recommendations
- identifies features of good practice
- affirms action that the provider is taking or plans to take.

A summary of the findings can be found in the section starting on page 2. [Explanations of the findings](#) are given in numbered paragraphs in the section starting on page 6.

In reviewing Leeds Metropolitan University the review team has also considered a theme selected for particular focus across higher education in England and Northern Ireland. The [themes](#) for the academic year 2013-14 are Student Involvement in Quality Assurance and Enhancement and Student Employability,<sup>2</sup> and the provider is required to select, in consultation with student representatives, one of these themes to be explored through the review process.

The QAA website gives more information [about QAA](#) and its mission.<sup>3</sup> A dedicated section explains the method for [Higher Education Review](#)<sup>4</sup> and has links to the review handbook and other informative documents. For an explanation of terms see the [glossary](#) at the end of this report.

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<sup>1</sup> The UK Quality Code for Higher Education is published at: [www.qaa.ac.uk/qualitycode](http://www.qaa.ac.uk/qualitycode).

<sup>2</sup> Higher Education Review themes: [www.qaa.ac.uk/Publications/InformationAndGuidance/Pages/higher-education-review-themes.aspx](http://www.qaa.ac.uk/Publications/InformationAndGuidance/Pages/higher-education-review-themes.aspx).

<sup>3</sup> QAA website: [www.qaa.ac.uk/aboutus](http://www.qaa.ac.uk/aboutus).

<sup>4</sup> Higher Education Review web pages: [www.qaa.ac.uk/InstitutionReports/types-of-review/higher-education-review](http://www.qaa.ac.uk/InstitutionReports/types-of-review/higher-education-review).

## Key findings

### QAA's judgements about Leeds Metropolitan University

The QAA review team formed the following judgements about the higher education provision at Leeds Metropolitan University.

- The setting and maintenance of the threshold academic standards of awards **meet** UK expectations.
- The quality of student learning opportunities **meets** UK expectations.
- The quality of the information produced about its provision **meets** UK expectations.
- The enhancement of student learning opportunities **meets** UK expectations.

### Good practice

The QAA review team identified the following features of **good practice** at Leeds Metropolitan University.

- The comprehensive and systematic engagement with collaborative partners through formal and informal mechanisms (Expectation B10).
- The embedding of employability within both curriculum design and approval, and the delivery of courses (Expectations B4 and B1).

### Recommendations

The QAA review team makes the following **recommendation** to Leeds Metropolitan University.

By September 2014:

- reflect upon the duration and scope of approval events with collaborative partner organisations to ensure it can be demonstrated that due consideration has been given to all areas of delivery (Expectation B10).

### Affirmation of action being taken

The QAA review team **affirms** the following actions that Leeds Metropolitan University is already taking to improve the educational provision offered to its students.

- The actions being taken to engage students as transformational agents of change and the commitment to strengthen this further (Expectation B5).
- The actions being taken to enhance the research environment (Expectation B11).

### Theme: Student Employability

The University's approach to employability is founded in its Strategic Plan and underpinning strategies including the Employability Strategy. Employability skills in the form of graduate attributes are integral to the design of courses and to their review. The University has established a wide range of placements, volunteering, business competitions and community projects which provide rich opportunities to further develop students' employability skills. Students are appreciative of employability-related initiatives embedded in their courses and extra-curricular opportunities.

Further explanation of the key findings can be found in the handbook available on the QAA web page explaining [Higher Education Review](#).

## About Leeds Metropolitan University

Leeds Metropolitan University (the University) can trace its origins back to Leeds Mechanics' Institute founded in 1824. In the early 1950s the Leeds Local Education Authority brought together four colleges covering the subject areas of Arts, Science, Technology, Commerce and Education. These subject elements remain the core of the University's current provision. From these, Leeds Polytechnic came into existence in 1970 and was enlarged in 1976 with the addition of the James Graham College and the City of Leeds and Carnegie College. In September 1992, Leeds Polytechnic was redesignated as a University, thus becoming Leeds Metropolitan University, with power to confer its own degrees and other awards.

The vision of the University is 'to be acknowledged for our commitment to student success, our innovation and enterprise, our global reach and strong local impact'. The University as a community aspires to be 'inspiring and creative, enterprising and purposeful, professional and respectful'. It expresses a commitment to preparing its students for their future careers through a focus on skills for employability.

In 2012-13 the University had over 29,000 students; this included 676 European Union students from outside the UK and 1,905 from beyond the European Union. There were 11,447 students at partner institutions in the UK and 1,470 studying with international partners. The University expresses a commitment to preparing its students for their future careers through a focus on skills for employability. At the time of the review the University had 2,900 staff organised in four faculties and 18 professional services.

The University has an extensive range of collaborations and partnerships both in the UK and overseas. The Taxonomy of Collaborative and Partner Provision categorises them as falling into two broad areas: 'Collaborative Provision involving delivery of university awards through Franchise, Validated and Joint Delivery; and Partnerships not involving delivery of university awards, such as Progression Agreements, Memoranda of Understanding, Articulation Agreements and Exchange and Study Abroad Agreements'. Since 2011, the University has reduced its number of UK-based partners from 24 to two, and developed a new franchise framework for some overseas partnerships.

The University has undergone significant transformation since its QAA Institutional Audit in 2009 and Audit of Collaborative Provision in 2011. Changes include: the appointment of a new Vice-Chancellor; the development and implementation of a new *Strategic Plan 2010-15: Quality, Relevance and Sustainability*, with a series of supporting strategies including the Research and Enterprise Strategy and the Learning and Teaching Strategy; revision of the Academic Board committee structure; restructuring the University's undergraduate and postgraduate portfolios; a move to a centralised Student Admissions Team; a reduction from six to four faculties and the introduction of schools within faculties; the formation of Quality Assurance Services to enable corporate coordination of quality assurance processes; the introduction of an Academic Role Framework; the establishment of a Centre for Learning and Teaching; the implementation of a Student Charter; and the development of a Collaborations and Partnership Strategy.

Through its Annual Planning process and the mid-term review of its *Strategic Plan 2010-15*, the University has identified a number of key challenges. These include 'external' challenges such as: the Higher Education Policy Framework; university funding; demand and competition in different student segments; rising student expectations and more informed student choice; changes to national higher education expectations; demographic changes and regional higher education participation trends; more focused research funding; and a

perceived strong regulation of the sector. 'Internally', the University is continuing to focus on improving student satisfaction, student success and employability rates. It is also seeking to carefully manage the implementation of its Collaboration and Partnerships Strategy.

The University reports that it has used the outcomes of its last two audits, both of which attracted judgements of limited confidence, to reflect on its approach to managing quality and standards and that 'follow up on, and sign-off of, recommendations and actions for these audits ... have contributed to our current practice'.

To address the 14 recommendations made in the 2009 Institutional Audit report, the University developed an action plan which was monitored by the Vice-Chancellor's Group (previously the Executive Group), the Corporate Management Team, Academic Board and the Board of Governors. QAA confirmed that actions from the Institutional Audit had been addressed to the satisfaction of the QAA Board in its sign-off of the action plan in June 2010, and that the University had made good progress since then. The University's response to specific recommendations relating to the regularity, externality and oversight of periodic review, and aspects of the University's academic regulations and associated procedures, are addressed more fully in the body of this report.

Following the 2011 Audit of Collaborative Provision, the University implemented an action plan, progress against which was monitored by Academic Board. In October 2012 QAA reported that the University had provided convincing evidence that all the recommendations raised in the Audit of Collaborative Provision report had been considered and appropriate actions had been agreed and implemented. The follow-up report judged the University to have approached each of the recommendations in a careful and thorough manner and also to have undertaken a number of broader strategic and operational changes, all of which would have a material impact on the management of quality assurance in relation to collaborative provision. The report made specific recommendations relating to arrangements for the management of the University's collaborative provision to ensure that Academic Board and its committees exercise full and effective oversight of all its collaborative programmes, and ensuring that approval and review panels consistently implement the University's requirements to secure the participation of members who are external to and independent of the University and its partners. The University's response to these are addressed more fully in the body of this report, particularly the section on managing higher education with others.

## Explanation of the findings about Leeds Metropolitan University

This section explains the review findings in more detail.

Terms that may be unfamiliar to some readers have been included in a [brief glossary](#) at the end of this report. A fuller [glossary of terms](#) is available on the QAA website, and formal definitions of certain terms may be found in the operational description and handbook for the [review method](#), also on the QAA website.

## 1 Judgement: Setting and maintenance of the threshold academic standards of awards

**Expectation (A1): Each qualification (including those awarded through arrangements with other delivery organisations or support providers) is allocated to the appropriate level in *The framework for higher education qualifications in England, Wales and Northern Ireland (FHEQ)*.**

**Quality Code, Chapter A1: The national level**

### Findings

1.1 In its self-evaluation document, the University states that its Academic Principles and Regulations define University awards and their standard. It further notes that each qualification (including those awarded through arrangements with other delivery organisations or support providers) is allocated to the appropriate level within the FHEQ, and is defined in terms of a minimum credit attainment threshold, consistent with the expectations of the *Higher education credit framework for England: guidance on academic credit arrangements in higher education in England*.

1.2 The review team tested this assertion through the scrutiny of: documentation supplied to inform processes of approval and review; examples of completed submissions and reports relating to these processes; external examiner reports and responses to those reports; and documentation specially produced to support the refocusing of the undergraduate and postgraduate curricula (the Undergraduate Curriculum Refocus and the Taught Postgraduate Review respectively), including documentation supplied to collaborative partners. This information was augmented by discussion of related issues with University staff during the review visit.

1.3 An overview of documentation supplied to the review team would support the assertion that the University uses the FHEQ within its approval, review and examination processes. Both the templates made available for undergraduate and postgraduate course approval include a specific requirement to not only state the terminal level of the award to be approved, but also identify the FHEQ levels of exit qualifications below the terminal award. Similarly, documentation supporting the refocusing of the curriculum includes specific reference and guidance on the relationship between the curriculum and the generic level descriptors of the FHEQ. This approach is further developed within advice prepared for collaborative partner organisations.

1.4 These guidance documents had obviously informed the examples of completed documentation supplied to the review team and further made their way through external examiner reports which included explicit reference to the level of modules in relation to FHEQ descriptors.

1.5 University staff whom the team met showed a clear understanding of the use of the FHEQ level descriptors within the University, and their relationship to progression and terminal qualification. In working with collaborative partners, the University contextualised UK expectations of level to align to in-country practices and understanding.

1.6 From the documentary evidence supplied, and meetings with University staff, the review team confirms the assertions made within the self-evaluation document and, consequently, that Expectation A1 is met and the risk low.

**Expectation: Met**

**Level of risk: Low**

**Expectation (A2): All higher education programmes of study take account of relevant subject and qualification benchmark statements.**

**Quality Code, Chapter A2: The subject and qualification level**

**Findings**

1.7 In its self-evaluation document, the University states that the Academic Principles and Regulations stipulate that all courses of study take account of relevant QAA subject benchmark statements in their course design and learning outcomes for scrutiny at academic approval and periodic review.

1.8 The self-evaluation document continues to reflect that:

Our educational principles set out in our [Academic Principles and Regulations] provide overarching expectations for the development of students' skills. We support this through graduate attributes embedded in the undergraduate curriculum, the Employability Strategy, subject benchmark statement references, PSRB requirements, the resources section of the skills for learning website and support from our Employability Hub.

1.9 The review team scrutinised a range of documentation supporting the processes of academic approval and periodic review, as well as examples of approval statements for individual courses and guidelines for external panel members. Additionally, the review team reflected upon documentation supplied to support the Undergraduate Curriculum Refocus and the Taught Postgraduate Review which provided further advice to University staff in the engagement between individual curricula and subject benchmark statements, including a specific requirement, within the Course Approval Template, to reflect subject benchmark statement(s) relevant to particular courses.

1.10 The review team reflected that the University's approach to engagement with subject benchmark statements was clear and unambiguous. Additionally, and particularly with regard to those courses enabling students to achieve professional accreditation, University staff were required to consider the relationship between the requirement of subject benchmark statements alongside those of professional, statutory and regulatory bodies (PSRBs). The review team further noted that the University has introduced a requirement for a specific confirmation from external panel members that a programme makes reference to, and evidences, appropriate subject benchmark statements.

1.11 The documentary evidence provided allowed the review team to satisfy itself that the University has met Expectation A2 and the risk is therefore low.

**Expectation: Met**

**Level of risk: Low**

**Expectation (A3): Higher education providers make available definitive information on the aims, intended learning outcomes and expected learner achievements for a programme of study.**

**Quality Code, Chapter A3: The programme level**

**Findings**

1.12 In its self-evaluation document, the University states that:

The [Academic Principles and Regulations] stipulate the provision of standards-related, course-level information for students. Programme (i.e. course) and module specifications are developed for new taught programmes as a subset of the required information produced through the curriculum design/course development process (we use standard templates for this purpose which, following approval, form the definitive course and module information). These are made available online to applicants and students. Course and module specifications are updated in light of any modifications made to courses and reconsidered as part of periodic review. They provide detailed information, at the course and module level, relating to aims, intended learning outcomes and expected learner achievements of each course.

1.13 The review team was supplied with a range of information in support of this statement, which included: guidance on University processes for approval, monitoring and review; standard templates for course approval and review; event reports; programme specifications; course handbooks; module guides; mapping exercises against the expectations of the Quality Code (particularly Expectation B10); and documentation specially prepared to support the refocusing of the undergraduate and postgraduate curricula.

1.14 These documents placed precise requirements upon course teams to develop and make explicit how they satisfy the requirements for establishing, approving and disseminating learning outcomes. This is reinforced through the curriculum and portfolio review documents for undergraduate and postgraduate frameworks and related templates. The team particularly noted the advice given to colleagues for the Undergraduate Curriculum Refocus which linked to specific guidance on such areas as the development of learning outcomes.

1.15 The programme design and approval process requires module specifications which are then made available online to applicants and students. The self-evaluation document further notes that the course handbook is the main medium for detailed information relating to aims, learning outcomes and expected learner achievements. During the course of the review, the team noted that the Centre for Learning and Teaching conducted an annual review of course handbooks which included monitoring of learning outcomes, aims and assessment.

1.16 The University's annual monitoring and review processes require reflection upon the 'curriculum, assessment, learning and teaching including currency of indicative content'. Annual monitoring additionally focuses upon minor modifications to curricula, including any modifications to assessment, aims and learning outcomes, which are reported to Faculty Academic Quality and Standards Committees.

1.17 The review team formed the view that the University had engaged with Expectation A3 and had ensured that aims and learning outcomes were scrutinised during approval processes, included both within annual and periodic review processes, and that information provided for students was clear and subject to further monitoring and review. Students met

during the visit reflected that they understood what was required of them and that the relationship between learning outcomes and assessment was clear. Therefore, the review team concludes that Expectation A3 is met and the risk is low.

**Expectation: Met**

**Level of risk: Low**

**Expectation (A4): Higher education providers have in place effective processes to approve and periodically review the validity and relevance of programmes.**

**Quality Code, Chapter A4: Approval and review**

**Findings**

1.18 The University's processes, requirements, associated responsibilities and timeframes for the approval and review of programmes including all new courses, new forms of delivery and courses delivered in collaboration with other organisations, including PSRBs, are outlined in its Academic Principles and Regulations and in the Quality Manual. The key sections are *Strategic Planning Approval*, *Academic Approval*, *Modifications*, *Monitoring and Management*, *Annual Review* and *Periodic Review*. The processes have been aligned with relevant sections of the Quality Code including *Chapter A4: Approval and review*, *Chapter B1: Programme design and approval*; *Chapter B8: Programme monitoring and review*; *Chapter B10: Managing higher education provision with others*; and *Chapter B11: Research degrees*. The review team noted that the various developments relating to approval and review had acted to address the recommendation arising from the 2009 Institutional Audit to revise procedures for the approval and amendment of courses and schemes to ensure that the integrity of awards is safeguarded.

1.19 Strategic Planning Approval proposals are considered by the Corporate Management Team and approved by the Vice-Chancellor. If successful, proposals are given permission to progress to academic approval which involves both internal and external peer review, and student involvement. Responsibility for the academic approval process is delegated to faculties but overseen by the Academic Quality and Standards Committee. There are no conditional approvals, only approval and non-approval. Final approval outcomes are reported to the Academic Quality and Standards Committee, which maintains an oversight of the outcomes and process, including with respect to consistency across faculties and the dissemination of good practice. Academic approval and periodic review for collaborative provision follow an event-based process, and require external academic advisers.

1.20 The Academic Principles and Regulations requirements for periodic review, which operates on a six-year cycle, also stipulate internal and external peer review and student involvement, for both on and off-campus provision.

1.21 All undergraduate on-campus courses have been required to adhere to the new Undergraduate Framework being phased in for level 4 from 2012-13. In instances of PSRB accreditation a formal exemption from a University regulation is required. Provision delivered with partners is being realigned with the requirements of the Framework during 2013-14.

1.22 Academic Board approved the new Postgraduate Framework in 2011 against which the Postgraduate Taught Review considered courses in 2012-13.

1.23 The Academic Principles and Regulations set out regulations governing minor and major modifications, the type of approval process required for each, and the level of appropriate oversight, responsibility for which resides with the faculties. External examiners are consulted in the case of major modifications and the Academic Quality and Standards Committee safeguards the integrity of overall awards through receipt of an overall report.

1.24 The review team tested the application of the processes and requirements by scrutinising: a range of Strategic Planning Approval proposals, including those relating to PSRBs; academic approvals, including for PSRBs; Course Approval Templates and Module Approval Templates (which in due course constitute the definitive course documentation);

periodic review reports for both on and off-campus provision; and minor and major modifications. The team also met with groups of staff and students.

1.25 The review team found a common and effective adherence to the required processes. The changes made to the quality assurance systems, introduced following the Institutional Audit of 2009, have resulted in consistency across faculties. Given the University's decision to withdraw from partnerships with a number of further education colleges, the introduction of summative health checks was considered by the review team to be an effective and proportionate alternative to periodic review for these relationships. The team also noted the value of the handbooks made available for the Undergraduate Curriculum Refocus and the Taught Postgraduate Review, and the Curriculum Refocus Handbook for Collaborative Partner Colleges in preparing staff for these changes.

1.26 The criteria for the appointment of external panel members for institutional recognition, approval, validation and periodic review events documents are clear and accessible.

1.27 The arrangements in place for the review of postgraduate research degrees are operated effectively and communicated clearly to research students, supervisors and examiners. Confirmation of award takes place through the consideration of a candidate submission by a review panel, including a viva voce discussion. The panel comprises the candidate's supervisory team, the Faculty Postgraduate Research Tutor and/or Faculty Director of Research and/or a senior member of staff active in research with experience of successful completions at the level of the award.

1.28 Staff confirmed the clarity and accessibility of, and their familiarity with, the regulations and associated processes and confirmed that they received appropriate staff development. Periodic review reports evidenced the participation of external panel members. The team welcomed the University's plans to encourage further student engagement in periodic review.

1.29 The review team regarded the University's intention to reflect on its current processes for approval and periodic review in the light of the publication of new sections of the Quality Code and the recent experience of the Undergraduate Curriculum Refocus as potential enhancement.

1.30 The review team concludes that the processes in place to approve and periodically review programmes are effective and enable the University to meet Expectation A4 so that the risk is low.

**Expectation: Met**

**Level of risk: Low**

**Expectation (A5): Higher education providers ensure independent and external participation in the management of threshold academic standards.**

**Quality Code, Chapter A5: Externality**

**Findings**

1.31 The University requires external involvement in two key areas of managing academic standards: through the work of external advisers in academic approval and periodic review and through the appointment of external examiners. The policy and procedures for ensuring independent and external participation in the management of threshold standards are articulated in the Academic Principles and Regulations and meet the Expectations of *Chapter A5: Externality*; *Chapter B7: External examining*; *Chapter B8: Programme monitoring and review*; *Chapter B10: Managing higher education provision with others*; and *Chapter B11: Research degrees* of the Quality Code. This applies to on and off-campus provision.

1.32 Relevant University guidance sets out the roles and criteria for, and terms of, appointments of external examiners, external advisers and industry representatives.

1.33 Faculty Academic Quality and Standards Committees and the University External Examiners Sub-Committee (UEESC) oversee the approval of all external examiner appointments to taught provision and ensure that all nominees are appropriately qualified and independent of the University. UEEESC deals with a large volume of detailed business and undertakes an annual policy review in the light of sector developments and experience of operation.

1.34 Research Degree Regulations make provision for the involvement of research degree external examiners. The Research Degrees Sub-Committee takes responsibility for the approval of all external examiner appointments for research degrees.

1.35 PSRBs are noted as representing a significant external influence on the quality and standards of University taught provision. The review team noted that the section of the Undergraduate Curriculum Refocus dealing with 'Engaging PSRBs in Approval' makes only limited reference to the involvement of PSRBs in curriculum design, setting assessment requirements and annual monitoring. However, staff met by the team demonstrated their knowledge of PSRB engagement with processes.

1.36 The review team tested the involvement of external advisers and external examiners by scrutinising a series of reports for academic approvals and periodic reviews, external examiner reports, Quality Assurance Services annual reports to both the Academic Quality and Standards Committee, and the Partnerships and Collaborations Sub-Committee, and met with groups of staff and students. The Academic Quality and Standards Committee considers all these reports. The team found consistent external participation in the management of threshold standards.

1.37 The involvement of independent and external participation in confirming threshold standards at course approval and periodic review allowed the review team to confirm that the University is effectively meeting Expectation A5 and the risk is, accordingly, low.

**Expectation: Met**  
**Level of risk: Low**

**Expectation (A6): Higher education providers ensure the assessment of students is robust, valid and reliable and that the award of qualifications and credit are based on the achievement of the intended learning outcomes.**

**Quality Code, Chapter A6: Assessment of achievement of learning outcomes**

**Findings**

1.38 The University's approach to the design, approval, monitoring and review of assessment strategies is outlined in the Academic Principles and Regulations (including the requirements for any variation that might be sought relating to PSRBs) and meet the expectations of *Chapter A6: Assessment of achievement of learning outcomes* and *Chapter B6: Assessment of students and accreditation of prior learning* of the Quality Code.

1.39 The Academic Principles and Regulations include sections on achievements of academic credits and benchmark definitions in terms of credits and levels of study, and articulates specific regulations governing student progression and the conferment of awards.

1.40 The Research Awards Regulations set out the requirements for the assessment of research degrees.

1.41 External academic advisers comment on the appropriateness of assessment strategies as an aspect of their involvement in academic approval and periodic review.

1.42 Policies and regulations relating to Recognition of Prior Learning (RPL, formerly APEL) are defined in the Academic Principles and Regulations. They require that a minimum of 60 credits must be studied at the University. Recognition is made of achieved 'specific' credit which can count towards the 'general' credit required for the purposes of admission. The University indicates that it is currently reviewing ways in which to promote consistency across faculties in the use of prior credit for admission to, or progression within, a course.

1.43 Academic approval requires that academic staff set out an appropriate course-level assessment and the team noted scrutiny of its effectiveness through annual monitoring and periodic review. The team were informed that the University is reviewing regulations and procedures governing assessment in light of new sections of the Quality Code. Progression and Award regulations were revised in 2012-13 and the impact of those changes is being assessed in relevant committees.

1.44 The review team tested the principles and operation of assessments by examining a range of evidence including the documentation for the Undergraduate Curriculum Refocus and the Taught Postgraduate Review, academic approval and periodic review reports, student handbooks, course handbooks and external examiner reports.

1.45 In meetings, both undergraduate and postgraduate students attested to the overall appropriateness and clarity of assessment. Some dissatisfaction had been recorded in the student submission regarding group work and the clarity of the grading system but these issues were not apparent when the team met with students.

1.46 The team established that external examiners approve examinations, coursework and other assessments and that following the Institutional Audit report of 2009 this has been coordinated centrally by the Quality Assurance Services. External examiners are sent samples of assessed work and confirm through annual reports that assessment strategies remain appropriate. In instances where this is not the case, recommendations from the external examiners are responded to with an action plan.

1.47 The University indicates that it will be reviewing the 'relevant regulations and procedures governing assessment in the light of the revised *Part A: Setting and maintaining academic standards* of the Quality Code and our experience of operation'. The team established that the assessment policy is reviewed annually.

1.48 The team noted the ways in which the University was building on its focus on assessment this had been identified as an area of good practice in the Institutional Audit of 2009. The team concludes that Expectation A6 is met and the risk is low.

**Expectation:** Met

**Level of risk:** Low

## **Setting and maintenance of the threshold academic standards of awards: Summary of findings**

1.49 In reaching its judgement about threshold academic standards, the review team matched its findings against the criteria specified in Annex two of the published handbook. All of the Expectations for this judgement area were met and the associated levels of risk were low. The team identified no recommendations or affirmations for this judgement area, nor any examples of good practice. The review team therefore concludes that the setting and maintenance of the threshold academic standards of awards **meet** UK expectations.

## 2 Judgement: Quality of student learning opportunities

**Expectation (B1): Higher education providers have effective processes for the design and approval of programmes.**

**Quality Code, Chapter B1: Programme design and approval**

### Findings

2.1 The University's approach to the design and approval of new programmes is set out in the Academic Principles and Regulations. The procedures apply to all taught programmes, including those delivered with collaborative partners. The current design and approval process for undergraduate programmes was introduced in 2011-12 following the Undergraduate Curriculum Refocus which resulted in a new Undergraduate Framework underpinned by six principles. These principles set out a consistent approach to learning outcomes, volume of assessment and accumulation of credit across all undergraduate modules. All new undergraduate programmes must have embedded within them a set of graduate attributes: to be enterprising; to be digitally literate; and to have a global outlook. New programme proposals must also state explicitly how employability is to be addressed throughout the curriculum. A new approval process for postgraduate taught programmes was introduced in 2012-13 to facilitate the Postgraduate Curriculum Review which developed a consistent credit framework to apply to all postgraduate taught programmes. Programme approval was an area where the University had received an advisable recommendation in the 2009 Institutional Audit. The team noted that this recommendation had been addressed through the procedures described here. The procedures also meet the Expectation of *Chapter B1: Programme design and approval*.

2.2 The team reviewed the operation of the procedures, examined documentation from programme approval events and discussed the operation of the procedures with staff and students. All new courses are first submitted for Strategic Planning Approval which includes discussion by the University's Corporate Management Team and a review of the proposals by the University's central services before progressing to the next stage. This enables the University to assure itself that all new courses meet a perceived demand and that they are consistent with the overall strategy and academic mission of the University. Strategic approval is granted by the Vice-Chancellor. The review team saw a range of documents confirming the operation of this process and saw evidence of Strategic Planning Approval being used to manage the University's portfolio of programmes.

2.3 Following Strategic Planning Approval a course team develops a full proposal which is reviewed by a development group including academic staff, staff from central services and external representatives. Training is provided for staff on development groups. The programme approval process is developmental in nature, giving course teams the opportunity to refine their proposals in light of comments received from the development group. A standard Course Approval Template is used which requires due consideration be given to all appropriate external reference points. The team saw evidence of comments provided by members of the development group being used by the course team to refine proposals. In particular, the team noted detailed comments from the Centre for Learning and Teaching on current scholarship in the pedagogy of the relevant discipline. The process also includes opportunities for student input. The review team noted that employability was a prominent feature in documentation for programme approval. Documentation for the approval of master's programmes was equally thorough.

2.4 Approval for collaborative programmes takes a risk-based approach with additional steps to ensure an appropriate level of due diligence in approving the partner. The team saw evidence that partner approvals include a visit for meetings with staff and students and

consideration of the partner's resources. Separate processes operate where the collaboration is a franchised programme. Further details are provided under Expectation B10.

2.5 Final course approval is given by an Approval Group which includes the Deputy Vice-Chancellor (Student Experience) and a member of the Quality Assurance Services. Approvals are reported to the Academic Quality and Standards Committee which maintains institutional oversight of the outcomes and effectiveness of the process.

2.6 Overall, the team concludes that the procedures for the development and approval of new programmes meet Expectation B1. The developmental approach to programme approval is effective in supporting course teams and results in new courses which can effectively draw on a range of expertise from across the University. The team concludes that this area is low risk as appropriate processes are in place for undergraduate, postgraduate and collaborative taught programmes. Furthermore, the team noted the embedding of employability within curriculum design and approval, as explained in Expectation B4, as a feature of good practice.

**Expectation:** Met

**Level of risk:** Low

**Expectation (B2): Policies and procedures used to admit students are clear, fair, explicit and consistently applied.**

**Quality Code, Chapter B2: Admissions**

**Findings**

2.7 The University introduced an updated Admissions Policy in August 2013 following approval by Academic Board. The operation of the Admissions Policy is supported by a centralised Student Admissions Team, established in 2011. Information on the process for applicants is made available on the University's web pages. This is supplemented by policies for mature students and students with disabilities.

2.8 The Academic Principles and Regulations require all courses to publish their entry requirements which are made available on the relevant course web pages. Admissions criteria are agreed as part of the course approval process. Information on the admissions appeals process is also made available to applicants from the web pages. Offers are made by Student Admissions for EU students and by the International Office for non-EU students. Offers for research students are handled by the Research Office as described under Expectation B11. Feedback is provided to applicants on unsuccessful applications. Any changes to courses after an offer has been made are communicated to students using a standard process. These procedures meet Expectation B2.

2.9 The team discussed the operation of the admissions procedures with students who confirmed that their experience of the admissions process had been positive. Students who had transferred to the University from partner organisations found their experience was less straightforward but nevertheless one which enabled them to successfully begin their studies at the University. The team also considered admissions arrangements for collaborative partners. Discussions with students at three partners confirmed that the process had worked effectively. The team noted that agreements with partners set out clear roles and responsibilities for admissions and saw evidence of these working in operation.

2.10 Admission of postgraduate research students is managed by the Research Office. The Academic Principles and Regulations enumerate the relevant processes. Faculties are responsible for deciding, through the Faculty Director of Research and the head of the relevant school, if appropriate expertise and resources are available to support the research student. If the faculty wishes to accept the student, the offer is communicated by the Research Office. The team saw appropriate guidance documents for the consideration of applications.

2.11 The Deputy Vice-Chancellor (Strategic Development) has responsibility for admissions. The Corporate Management Team maintains oversight of entry requirements for all programmes. Staff with whom the review team met confirmed a mandatory requirement for admissions training, with attendance being monitored by the University. Staff also reported an improved response time to applicants following the introduction of the central Student Admissions Team. The review team saw evidence of annual reporting on admissions statistics and the Admissions Policy to Academic Board.

2.12 The team concludes that the procedures for admissions meet Expectation B2. The University has clear, accessible policies and information for applicants to all programmes which are operated consistently. The team thus considers this area to be low risk.

**Expectation: Met**

**Level of risk: Low**

**Expectation (B3): Higher education providers, working with their staff, students and other stakeholders, articulate and systematically review and enhance the provision of learning opportunities and teaching practices, so that every student is enabled to develop as an independent learner, study their chosen subject(s) in depth, and enhance their capacity for analytical, critical and creative thinking.**

**Quality Code, Chapter B3: Learning and teaching**

**Findings**

2.13 In the self-evaluation document the University states that Section A1 of the Academic Principles and Regulations

sets out the academic principles and educational aims which underpin our assurance of learning and teaching. The principles of good course design, appropriately designed course learning, teaching and assessment strategies and effective student support are the basis for effective learning and teaching, which are set out in guidance provided for course teams.

2.14 The review team tested the University's approach to learning and teaching through scrutiny of relevant strategies and implementation plans and analysis of quality assurance documents such as external examiners' reports, annual review reports and those documents relating to the Undergraduate Curriculum Refocus and Taught Postgraduate Review. The evidence provided by the institution was supplemented by discussions the team had with members of staff in meetings.

2.15 The Learning and Teaching Strategy and the associated implementation plan articulate the approach to enhancing provision for students. The Learning, Teaching and Enhancement Committee monitors the Strategy and provides student representatives with an opportunity to contribute. Academic staff revealed a clear understanding of the Strategy and its aims.

2.16 The University uses management information in quality assurance procedures, including annual monitoring and periodic review, to reflect on the quality of learning and teaching including with respect to the performance of students with protected characteristics. The team heard that the University is intending to enhance this analysis.

2.17 Learning and teaching is informed by reflection, professional practice and research in faculty reports and via consideration of module reports in periodic reviews. There is an institutional commitment to increasing the number of staff with Higher Education Academy fellowship status.

2.18 The e-Learning Strategy sets out the University's commitment to develop the virtual learning environment (VLE) and has an implementation plan which is supported by technical and academic support departments. While students reported mixed experiences of the VLE, the team was reassured to learn that e-learning requirements are addressed in the development of new programmes and in faculty quality reports.

2.19 The Student Charter sets out essential learning and teaching entitlements although students met by the team were unaware of its existence. The team heard that the University was currently reviewing the Charter in partnership with the Students' Union. University and partner students are, however, able to access information about learning opportunities and support in course handbooks and relevant University web pages.

2.20 From documentation and meetings with staff and students at the University and partners, the review team was able to confirm that the University has procedures in place to systematically review and enhance the provision of learning opportunities and teaching practices. Therefore, the team concludes that Expectation B3 is met and the associated level of risk is low.

**Expectation: Met**

**Level of risk: Low**

**Expectation (B4): Higher education providers have in place, monitor and evaluate arrangements and resources which enable students to develop their academic, personal and professional potential.**

**Quality Code, Chapter B4: Enabling student development and achievement**

**Findings**

2.21 The University's self-evaluation document states that:

Our educational principles set out in our [Academic Principles and Regulations] provide overarching expectations for the development of students' skills. We support this through graduate attributes embedded in the undergraduate curriculum, the Employability Strategy..., subject benchmark statement references, PSRB requirements, the resources section of the skills for learning website and support from our Employability Hub.

2.22 Strategic oversight of support for students is enabled through discussion of the Learning and Teaching Strategy implementation plan in relevant faculty and institutional committees. Faculty reports, Annual Quality reports (faculty and institutional), annual course monitoring reports and Faculty Board committee minutes, as well as documentation for the Undergraduate Curriculum Refocus, illustrate ways in which resource needs for courses are monitored and acted upon.

2.23 While the review team found that students' awareness of, and access to, personal tutors varied, it also noted that the University publishes a handbook and provides training for personal tutors, who continue with the same students for the entirety of their degree. Students in meetings also commented on the positive relationship with staff and their ready access to a range of support mechanisms including relevant pages of the website (which the team heard was readily accessible for students with disabilities), faculty newsletters and course handbooks.

2.24 The Student Liaison Officer role was identified as a feature of good practice in the 2009 Institutional Audit and the team was told how the University has developed the role by, for example, providing extended training and expanding their responsibilities to include desk-work in the Student Hub to ensure that their insights are being shared with other staff. The faculty-based Student Liaison Officers also attend faculty committees and act as a link between students, professional services and academic staff.

2.25 As an aspect of the Undergraduate Curriculum Refocus and within the standard course approval process, the University has sought to embed graduate attributes in every course as a means of promoting employability. The Employability Strategy encapsulates University aims in this area and progress against these is overseen by the Employability Sub-Group. Monitoring and periodic review allows progress at course level to be evaluated. Students met by the team were positive about the University's approach to both embedding employability in their courses and providing employment opportunities, and singling out the 'Skills for Learning' website in particular. In the light of the University's systematic approach, the team concludes that the embedding of employability within both curriculum design and approval, and the delivery of courses, is **good practice**.

2.26 The University has in place various processes to meet staff training and development needs at each phase of their career. Academic members of staff have an annual Personal Development Review, undertake peer observation of teaching as observer and observed, and are expected to attend institutional staff conferences. Training needs are also responded to via the monthly training programmes delivered by the Centre for Learning and Teaching and the People Development Team, and an online training platform.

2.27 Consideration of documentation and meetings with staff and students enabled the review team to conclude that the University is meeting Expectation B4 by monitoring and evaluating its approach to, and resources for, helping students to develop their potential. This was particularly evident in the University's approach to employability.

**Expectation:** Met

**Level of risk:** Low

**Expectation (B5): Higher education providers take deliberate steps to engage all students, individually and collectively, as partners in the assurance and enhancement of their educational experience.**

**Quality Code, Chapter B5: Student engagement**

**Findings**

2.28 In the self-evaluation document the University points to various ways in which students are able to become involved in quality assurance processes. These include approval and review of courses and annual monitoring. The review team confirmed a number of opportunities for students to engage in University procedures as evidence. These included attendance at course-based focus groups, invitation to periodic review panels, responding to national and institutional surveys and as student representatives on course and institutional committees. All student representatives are invited to training provided by the Students' Union. Staff explained how they support student representatives in their faculty; for example, by briefing them for meetings. The University sets out a commitment to improved training for student representatives in the Student Engagement Strategy.

2.29 The University also uses module evaluations, the personal tutor system and action planning in response to course annual monitoring and the National Student Survey (NSS) to enable students to contribute as informed participants to discussions regarding their educational experience.

2.30 Some of the students met by the review team had limited experience of engagement with University processes and this echoed some comments in the student submission that were critical of the extent to which representatives were able to engage in University processes. However, students could point to evidence of prompt responses to feedback in the form of suggested amendments to courses. They also reported that the University fosters an environment in which informal channels of feedback operate effectively. This informal relationship between students and the University was echoed in meetings with students from partner institutions, who also said that they felt like Leeds Metropolitan students. The Students' Union has a strong working relationship with the University Corporate Management Team. The team also heard about a number of joint initiatives including a University and Students' Union approach to hosting the teaching awards.

2.31 In various contexts, including an annual review of effectiveness of committees, Academic Quality and Standards Committee minutes, an audit of alignment against *Chapter B5: Student engagement* of the Quality Code, and faculty consideration of student representation, the University had identified scope to improve its engagement with students, particularly as agents of change. This has resulted in the University beginning to develop a Student Engagement Strategy designed to further develop the University's approach to student engagement in quality assurance. The team heard that a review of student participation in key committees had taken place and there had been discussions between the Students' Union, the Centre for Learning and Teaching and faculties, but the University was still developing a clear set of objectives with progress expected over the course of 2014-15. In the light of this evidence, the review team **affirms** the actions being taken to engage students as transformational agents of change and the commitment to strengthen this further.

2.32 Having considered the opportunities available to students to participate in quality assurance processes and the steps being taken by the University to engage students as agents of change, the review team concludes that the University meets Expectation B5 and the risk is low.

**Expectation: Met**  
**Level of risk: Low**

**Expectation (B6): Higher education providers ensure that students have appropriate opportunities to show they have achieved the intended learning outcomes for the award of a qualification or credit.**

**Quality Code, Chapter B6: Assessment of students and accreditation of prior learning**

**Findings**

2.33 The University's Academic Principles and Regulations specify the requirements for the assessment of learning and all assessments must be compliant with those regulations. There is a University-wide degree classification scheme for undergraduate degrees which uses a consistent credit framework defined by volume and level of study. Similarly, there is a framework for progression. All awards are located within the FHEQ and each programme has defined aims and learning outcomes developed during the approval process. Forms of assessment fall into one of nine categories. The Academic Principles and Regulations also set out a process for RPL. The 2009 Institutional Audit concluded that there was a need to revise the University's academic regulations with respect to assessment to ensure greater clarity and make the regulations accessible to staff and students. The review team concluded that the revised assessment framework met the requirements of this recommendation.

2.34 Programme approval requires each programme to develop a programme-level assessment strategy taking a holistic view of all assessments used throughout a course. The Undergraduate Curriculum Refocus exercise limited summative assessments per module to two, and also emphasised a greater role for formative assessment and feedback to support learning. External academic advisers comment on the assessment regime as part of programme approval. Students are made aware of assessments in course handbooks. Assessment strategies are also considered during annual monitoring and review. Submission deadlines for assessed work are set by staff and publicised in module handbooks and guides. Penalties for late work are based on a standard tariff specified in the Academic Principles and Regulations.

2.35 The Academic Principles and Regulations also specify the conduct of examinations; the relevant Dean of Faculty is responsible for setting papers involving internal scrutiny and external examiners. Faculty staff are responsible for exam administration and timetables. Candidates are given a set of regulations for written examinations. There are specified procedures for plagiarism, cheating and unfair practice and for assessment of disabled students and students with learning difficulties. Requirements of external examiners with respect to assessment and the arrangements for Boards of Examiners are also fully described.

2.36 The assessment scheme, as defined in the Academic Principles and Regulations, sets out the requirements for the provision of feedback and marks to students. Feedback on assessed coursework should normally be provided within four weeks. There are procedures for extenuating circumstances and mitigation which are based on a policy of 'fit to sit/submit'. Student conduct in assessment is also set out in the Academic Principles and Regulations including procedures to investigate unfair exam practice. An online system communicates results of Boards of Examiners to students seven days after the relevant exam board.

2.37 The review team met with undergraduate and postgraduate students on taught courses and they confirmed broad satisfaction with their experiences of assessment. They reported that course handbooks gave accessible and clear information about assessments including the requirements for achieving specific grades in their assessments. The team heard that students were aware of the University's policy of providing feedback on assessments within a four-week timeframe and that usually this deadline was met.

Some students also mentioned University initiatives to improve the timeliness of feedback. The student submission highlighted timely feedback as an area that needed improvement. However, it also described a range of initiatives to improve this issue including the 'Feedback Card', a project developed in partnership by the Students' Union and the Centre for Learning and Teaching, and the 'Golden Robe Awards', run by the Students' Union, which includes an award for academics who provide students with excellent feedback.

2.38 The team reviewed a range of documentation which evidenced the satisfactory operation of assessments across the University. Revisions to assessments are made in response to feedback from external examiners. Staff in meetings confirmed that mandatory training is required for chairs and secretaries of Boards of Examiners and committees. Furthermore, staff have access to guidance and training on various facets of assessment.

2.39 The review team explored documentation on the operation of assessment at partner institutions and noted recommendations on ways to enhance assessments resulting from an internal quality enhancement audit conducted by the Collaborations and Partnerships Group from Quality Assurance Services. All delivery and assessments at off-campus locations are conducted in English. Assessments are designed to meet the requirements of PSRBs. The assessment of research degree programmes is considered under Expectation B11.

2.40 The review team found evidence of the ways in which the University reviews its approach to assessment. The Learning, Teaching and Enhancement Committee maintains an institutional overview of the effectiveness of assessment in supporting learning. The operation of Boards of Examiners was monitored in 2012-13 and 2013-14 through an internal audit process. The University reviewed the operation of its approach to Mitigating Circumstances and introduced the 'fit to sit' policy. As a result of a review of unfair practice in 2012-13, a cross-institutional Academic Integrity Group was established supported by an Academic Integrity Lead and Coordinator in each faculty. The University is also reviewing its policies, including with respect to RPL, in light of the introduction of *Chapter B6: Assessment of students and accreditation of prior learning* of the Quality Code.

2.41 From the documentary evidence supplied, and meetings with students and staff, the review team confirms that the University is meeting Expectation B6 and the risk is low.

**Expectation: Met**

**Level of risk: Low**

**Expectation (B7): Higher education providers make scrupulous use of external examiners.**

**Quality Code, Chapter B7: External examining**

**Findings**

2.42 University regulations for the use of external examiners are set out in the Academic Principles and Regulations. Relevant webpages provide information for external examiners including links to relevant forms and guidance. An external examiners' handbook, which sets out the roles and responsibilities of examiners, is also made available to all appointees. The role of external examiners is overseen by the UEEC, a sub-committee of the Academic Quality and Standards Committee.

2.43 All new examiners are encouraged to attend an induction session held twice per year. The induction session covers responsibilities, processes, meeting with course teams and reporting requirements. There is an option to meet course team members following the induction session. Induction materials are made available via external examiner webpages for those unable to attend.

2.44 External examiners must confirm standards, ensure fairness and equity, and maintain and enhance the quality of the programmes for which they are responsible. They are also consulted about changes to programmes, and must approve examination papers. The external examiners have the right to moderate marks awarded by internal examiners and conduct a viva voce exam with any student when deemed necessary. External examiners can raise any matter of concern directly with the Vice-Chancellor.

2.45 Faculties identify a need for external examiners through academic programme approval or the annual monitoring process. There is an option to appoint subject advisers to supplement the work of examiners normally where the delivery involves other languages. Mentors can be appointed to support new examiners in their first year as an external examiner. External examiners for programmes offered off-campus are usually the same as for on-campus provision. The Collaboration and Partnership Strategy requires that, in future, only awards where the University has on-campus expertise will be validated and that will ensure the same external examiner is used across consonant courses delivered at partners and by the University.

2.46 Nominations for external examiners are made by faculties and considered by the relevant Faculty Academic Quality and Standards Committee for approval. There is further scrutiny of the appointment of examiners by UEEC which gives final approval under delegated authority from Academic Board.

2.47 External examiners are required to produce an annual written report on the programme using a provided template that includes a section on development and support of external examiners. Reports are received and acknowledged by the Quality Assurance Services before being sent to faculties and course leaders for a response. If concerns are raised by external examiners about standards, facilities, resources or student performance, reports are escalated to the relevant faculty Dean and the Deputy Vice-Chancellor (Student Experience) with a requirement that action plans be produced within 30 days by the programme leader. Annual monitoring and review also consider external examiner reports.

2.48 External examiner reports are made available to student course representatives through course annual review meetings and via publication on the Student Hub webpages available to all students.

2.49 The Quality Assurance Services produce an annual overview report of external examiner reports for the Academic Quality and Standards Committee to consider. UEEESC also undertakes an annual review of its conduct and efficiency, and a policy review in light of sector developments.

2.50 Collaborative courses follow the same procedures as for on-campus provision but with reports from external examiners being considered by the Partnerships and Collaborations Sub-Committee in the first instance.

2.51 The team reviewed the information provided for external examiners by the University and found it to be clear, accessible and comprehensive. The team saw evidence of the appointing process for external examiners working effectively with appropriate committees requesting further information when necessary. Staff who met with the team confirmed that checks for conflicts of interest were undertaken in faculties. The team was provided with evidence of responses to external examiner reports and noted that in cases where particular concerns had been raised, the documented process, whereby the Deputy Vice-Chancellor (Student Experience) was informed with a written response produced within 30 days by the programme leader, was followed.

2.52 The team saw examples of mentoring working to effectively support new external examiners. Mentors produce a short report at the end of their appointment. In some cases mentors also provided feedback on a draft external examiner report. There is no requirement for faculties to respond to mentoring reports.

2.53 The team reviewed the annual report on external examining for 2012-13 produced for Academic Board. This report plus its appendices assures Academic Board that standards are being upheld and that the external examiner system is working effectively. It also presents evidence of tracking of faculty responses to external examiner reports by the Quality Assurance Services. The team noted a significant improvement in the quality of this annual report compared with previous years' reports. An equivalent report on collaborative programmes is produced for the Partnerships and Collaborations Sub-Committee by the Principal Collaborations Officer.

2.54 Academic Board requires that all committees annually consider their effectiveness and evidence how well they have met the term of their Standing Orders. The review team considered the Effectiveness Review Report on UEEESC for 2012-13 and noted that UEEESC is making an effective contribution to the University's management of quality and standards.

2.55 The role of external examiners in moderation was examined across all faculties and was observed to work consistently and in line with the University's procedures.

2.56 Student faculty representatives who met with the team confirmed that they were fully aware of external examiner reports and that they had been involved in discussions of reports at Faculty Boards. Other students were less aware of external examiner reports, but the team formed the view that the University had made appropriate efforts to disseminate reports to the wider student body by making them available on the Quality Assurance Services webpages and requiring faculty committees to discuss reports with student representatives.

2.57 The team considered a small number of situations where external examiners had reported issues about the academic standards of courses. In every case an appropriate action plan was produced within the required timescale to the satisfaction of the external examiner and consistent with the University's procedures. The team considered that this provided evidence of an effective approach to maintaining the academic standards of the degrees awarded by the University.

2.58 The review team considered that the University had a comprehensive set of regulations and procedures governing its use of external examiners. Furthermore, the team saw a wide range of evidence that these procedures were working effectively and consistently across the institution. Accordingly, the team developed the view that the University is making scrupulous use of external examiners and is meeting Expectation B7. In view of this evidence, the team considers the area to be low risk.

**Expectation:** Met

**Level of risk:** Low

**Expectation (B8): Higher education providers have effective procedures in place to routinely monitor and periodically review programmes.**

**Quality Code, Chapter B8: Programme monitoring and review**

**Findings**

2.59 The University's expectations for the review of programmes are set out in the Academic Principles and Regulations. The faculty Dean is responsible for all courses and is an ex-officio member of course monitoring and review meetings. The specification for annual monitoring requires that the Dean or Associate Dean ensure all programmes conduct an annual review with three main components which are: student focus groups; two development and enhancement meetings, generally conducted during the year; and an annual review meeting. The course leader is responsible for coordinating this for each course. All students on a course are invited to attend the focus group meeting; only student academic representatives attend the other meetings. The outcomes of this activity are captured in an annual report submitted for approval to Faculty Boards which, in turn, feeds into a Faculty Annual Quality Report submitted to the Quality Assurance Services. The Quality Assurance Services produce a composite for the Academic Quality and Standards Committee and Academic Board. Further detail on the processes is provided in the Annual Monitoring and Review Handbook which specifies the format for the review and the information to be considered. Statistical information is provided through a central Management Information Hub.

2.60 The requirements for periodic review are also specified in the Academic Principles and Regulations. An annual schedule for periodic review is drawn up by faculties and reported through the Quality Assurance Services to the Academic Quality and Standards Committee which receives progress updates and review reports throughout the year. A development group is assigned to each periodic review and includes students and external representatives. Documentation provided to the development group is similar to that used for course approval and includes recent annual review reports. The development group is charged with confirming that academic standards of the course continue to align with the requirements of the FHEQ, and also identifies and reports on strengths and weaknesses within the provision. Course re-approval can be withheld if standards are not met. The conduct of periodic reviews by the University was the subject of essential recommendations in both the 2009 Institutional Audit, for on-campus provision, and the 2011 Audit of Collaborative Provision. The review team noted regular review of courses was an area where the University had undertaken considerable development.

2.61 Arrangements for the annual monitoring and periodic review of collaborative provision are analogous to those for on-campus provision. Annual reports are scrutinised by faculties to identify themes and this then feeds into a University report which is discussed at the Partnerships and Collaborations Sub-Committee before being reported to the Academic Quality and Standards Committee and Academic Board. Periodic review for collaborative provision includes attendance at the partner by a University team which includes external reviewers.

2.62 The review team considered a range of annual monitoring documentation from each faculty covering undergraduate and postgraduate taught programmes. The team noted the introduction of a new template for annual monitoring in 2012-13 which resulted in reports with an improved structure. The team saw evidence of annual monitoring action plans being produced and then followed up. The team also considered faculty overview reports, noting a comprehensive summary of issues across the faculty and a consideration of resulting actions. University staff and students demonstrated a clear understanding of the institutional approach to annual monitoring. Staff also confirmed that the Quality Assurance Services provides training for those involved in annual monitoring and periodic reviews.

2.63 The team also considered annual monitoring and periodic review documentation for off-campus provision and saw evidence of effective operation including a critical appraisal document, and minutes of enhancement and development meetings. The team was provided with example data sets on the management of collaborative provision, including student numbers, profiles and performance, and concluded these were comprehensive and informative.

2.64 The team saw evidence of annual monitoring reports being considered by the relevant faculty Associate Dean and this then feeding into a composite faculty overview report which identifies common themes. This is considered by Faculty Board and approved before being forwarded to the Quality Assurance Services to compile the University-level report considered by the Academic Quality and Standards Committee, Learning, Teaching and Enhancement Committee and Academic Board. The team also saw evidence of approved changes and modifications emerging from annual monitoring being implemented by faculties. Quality Assurance Services is responsible for ensuring online module and course details are subsequently updated.

2.65 The team noted improvements in the process made for the 2013-14 annual monitoring round with new templates being introduced to promote consistency across faculties including with respect to the use of data in the annual monitoring process.

2.66 Following the introduction of the revised undergraduate and postgraduate frameworks, resulting from the Undergraduate Curriculum Refocus and the Taught Postgraduate Review, the University is reviewing its approach to periodic review. The new regime will be underpinned by the values and approach adopted by the Undergraduate Curriculum Refocus with an emphasis on building a strategic portfolio of programmes, focusing on key elements of the curriculum and developing the student experience. The University is taking a risk-based approach to identify those courses that will undergo a periodic review earlier in the new six-year cycle as it is phased in.

2.67 The review team concludes that the procedures for annual monitoring and periodic review meet Expectation B8. The University has clear policies and procedures which are operated consistently. The University is introducing a revised periodic review process to build on the work of the Undergraduate Curriculum Refocus. The team thus considered this area to be low risk.

**Expectation:** Met  
**Level of risk:** Low

**Expectation (B9): Higher education providers have fair, effective and timely procedures for handling students' complaints and academic appeals.**

**Quality Code, Chapter B9: Complaints and appeals**

**Findings**

2.68 The University's regulations and procedures relating to academic appeals are set out in the Academic Principles and Regulations available on its website. Research award regulations cover research degree appeals and make reference to the Academic Principles and Regulations. The University's Student Complaints Procedure and its Admissions Complaints Procedure are both available on its website. Governance and Legal Affairs now manage both the complaints and appeals processes.

2.69 The University introduced a revised Complaints Procedure in 2010. It also conducted a review of its academic appeals procedures during 2012-13 and made a number of changes for implementation in 2013-14, including a published service standard on deadlines for handling requests for appeal hearings (see below).

2.70 Complaints and appeals processes are made known to students through their course handbooks which also signpost students to additional information available on the Student Hub. Further support and guidance in relation to complaints and appeals is available from the Students' Union Advice Service.

2.71 Collaborative partners are responsible for dealing with student complaints in accordance with their own procedures. Students based at a partner institution are able to contact the University should the Complaints Procedure instigated by the partner have been exhausted and they wish to refer a complaint of an academic nature to the University. Responsibilities for dealing with complaints and academic appeals in the case of collaborative partners are set out in Collaboration Agreements. Academic appeals are dealt with in the same way as for on-campus students under the terms of the Academic Principles and Regulations.

2.72 Annual overview reports of appeals and complaints are presented to the Academic Quality and Standards Committee, including those arising from provision delivered off-campus with other organisations. The Research Office's annual report includes information about appeals from postgraduate research students. The reports demonstrated an appropriate use of statistical information including trend data. The complaints report is to become biannual.

2.73 The review team tested the operation of the complaints and appeals procedures by talking to students and their representatives, and scrutinising the guidance given to staff and students by reading the minutes and papers of the committees receiving annual reports on complaints and appeals, namely the Academic Quality and Standards Committee and the Research and Enterprise Committee, both of which report to Academic Board.

2.74 The student submission raised concerns about the length of time it takes the University to progress through the academic appeals procedures and the lack of a specified timescale for doing so and the length, language and accessibility of the information the University makes available to students regarding complaints. Notwithstanding these comments, students both on-campus and those studying with partners were aware of the procedures and where to access them.

2.75 The concerns about delays in handling both complaints and appeals are reflected in the reports discussed by the Academic Quality and Standards Committee. The annual report on complaints for 2012-13 reported that the average length of time for dealing with formal

complaints exceeded the stated timeframe of 20 days by six days (but this had reduced from 40 days the previous year). The annual report on appeals for 2012-13 also showed that the average time to deal with academic appeals in 2012-13 was 45 days, reduced from 50 days in 2011-12. The University's review of the academic appeals procedures recommended a commitment of 20 days for handling academic appeals. The team explored with the University how it expects to meet the new timescale for academic appeals and heard that a number of mechanisms had been put in place including online submission, having more trained adjudicators and a commitment to their availability over, for example, the summer period, and that more staff are now involved in the process. The University confirmed that in the main they were meeting the new target.

2.76 Notwithstanding the concerns about timescales which are being addressed, other evidence shows that the University deals with complaints and appeals effectively. The team concludes, therefore, that Expectation B9 is met, and that the level of risk is low.

**Expectation:** Met

**Level of risk:** Low

**Expectation (B10): Degree-awarding bodies take ultimate responsibility for academic standards and the quality of learning opportunities, irrespective of where these are delivered or who provides them. Arrangements for delivering learning opportunities with organisations other than the degree-awarding body are implemented securely and managed effectively.**

**Quality Code, Chapter B10: Managing higher education provision with others**

2.77 The University's action plan following the 2011 QAA Audit of Collaborative Provision was signed off by QAA in 2012. The University has made a number of changes in terms of structures and processes since then, including revision of its committee structure, clarification of student and staff entitlements in the context of collaborative partners, and revised guidance to reflect updated policy and processes. At the time of the review the University was in the process of withdrawing from a collaborative partnership at a campus in India and had made arrangements for the remaining students to complete their awards at its campuses in Leeds.

2.78 The University's approach to collaborative provision is set out in its *Strategy for the delivery of taught undergraduate programmes in collaboration and partnership - 2011-2016* (the Collaboration and Partnership Strategy). Its Taxonomy of Collaborative and Partnership Provision sets out two broad categories of partner: first, Collaborative Provision through Franchise, Validated and Joint Delivery; and second, partnerships not involving delivery of University awards such as Progression Agreements, Memoranda of Understanding, Articulation Agreements and Exchange and Study Abroad Agreements.

2.79 The University publishes its Register of Partnerships and Collaborative Provision on its website. The University takes responsibility for the standards and quality of all awards made in its name. The responsibilities of the University and its partners are set out in Collaboration Agreements which the review team found comprehensive and which were understood fully by the University's partners.

2.80 Appropriate arrangements are in place for institutional oversight of collaborative activity through the Partnerships and Collaborations Sub-Committee reporting to the Academic Quality and Standards Committee. The review team were able to confirm from reading minutes of the Partnerships and Collaborations Sub-Committee and the Academic Quality and Standards Committee that the Partnerships and Collaborations Sub-Committee is discharging its responsibilities thoroughly and effectively, with evidence of upward reporting and oversight. Matters relating to the management of quality and standards of collaborative provision within faculties are considered at Faculty Academic Quality and Standards Committees and the minutes reviewed by the team showed an appropriate level of consideration and reporting. Quality Enhancement Audits are in place to consider how faculties are managing partnerships and result in action plans which are monitored by the Partnerships and Collaborations Sub-Committee. Partnership Boards were introduced in 2012-13 to further enhance the University's oversight of its collaborations; convened once a year, they are attended by senior managers of both the University and the partner and are valued by the partner institutions.

2.81 Procedures for development, approval and review of new collaborative partnerships and associated programmes are set out in the Academic Principles and Regulations, the Quality Manual (Section E) and additional comprehensive documentation and guidance available on the University's website. The key processes are *Due Diligence, Strategic Planning Approval, Institutional Recognition and Review, Academic Approval, Validation, Mutual Review, Operational Approval, Annual Monitoring and Review, and Periodic Review*. The University has mapped its policies and procedures against the Quality Code and has identified several areas for further development, most of these being minor changes with the most significant being the development of a framework for joint and dual awards. The team

were able to confirm that currently the University offers no provision of this type. Other than in this aspect, the University's regulations and additional procedural guidance meet Expectation B10.

2.82 The review team tested the operation of the policies and procedures governing the University's management of provision with others by talking to staff and students both within the University and those from partnerships, and reading procedures and related guidance, minutes from the Academic Quality and Standards Committee, Partnerships and Collaborations Sub-Committee, Faculty Academic Quality and Standards Committees, and documentation and reports relating to the approval and review of a number of partnerships in both the UK and overseas.

2.83 The University's implementation of its Collaboration and Partnership Strategy has involved a review of its partnerships with further education colleges, with a focus on regional partnerships and the development of foundation degrees that facilitate progression to the main campus. As a result, its UK-based partners have reduced from 24 to two. The review team considered documentation relating to the withdrawal process and found that the University has in place appropriate and thorough exit arrangements for all its partnerships, monitored through the Partnerships and Collaborations Sub-Committee, and has managed the process diligently. The team considered that the introduction of 'summative health checks' for partners withdrawing from provision in lieu of full periodic reviews demonstrated a thorough but proportionate approach and reflects the University's comprehensive and systematic approach to engagement with its partners.

2.84 The University has also revised its approach to overseas partnerships and where appropriate is developing franchised provision with partners in key countries underpinned by a franchise framework and staff development activity. To allow early reflection on the effectiveness of collaborations involving franchised provision, the University has introduced the process of mutual review involving a visit to the partner. Reports of mutual reviews demonstrated coverage of a wide range of issues and processes such as admissions, student induction, student representation, observation of teaching, annual monitoring and review, and assessment. The team was of the view that this was a further example of the University's comprehensive and systematic engagement with its partners. Partners were very supportive of the process which provides an additional opportunity for both the partner and the University to meet and raise issues, and for the University to undertake continuing staff development with the partner.

2.85 Approval of collaborative partnerships and programmes follows a risk-based approach. Documentation reviewed by the team relating to development, approval and review of partnerships showed that an appropriate level of due diligence is undertaken prior to approval of the partner and this is signed off by the Corporate Management Team. This initial check also allows the Corporate Management Team to reject a partner which is not in line with the University's strategic aims. Approval of the partner takes place through Institutional Recognition involving a panel visit; recognition remains in place for a maximum of five years and is then followed up through Institutional Review. In the case of delivery of University programmes off-campus using 'flying faculty', the process of Operational Approval ascertains whether the proposed location for delivery is appropriate and a panel event visit takes place. Minutes of Faculty Boards and the Partnerships and Collaborations Sub-Committee demonstrated reporting of the outcomes of Institutional Approval and Review and Operational Approval and appropriate follow-up and monitoring of conditions and recommendations.

2.86 A new collaborative course proposal follows the same Strategic Planning Approval process as for on-campus provision. The review team read a number of documents confirming the operation of this process. If the partner designs the curriculum, the course is subject to academic approval as for on-campus provision, but through an event-based

process at the partner. The University undertakes the process of validation to assure itself that a course can be managed and delivered by a partner institution. The validation process incorporates the approval of partner staff who are then held in a staff register. Staff appointed after validation must be approved through the relevant Faculty Academic Quality and Standards Committee and partners confirmed their awareness of the process.

2.87 Annual monitoring and review for collaborative provision is analogous to the review of on-campus provision. The available evidence showed that reports are scrutinised through Faculty Academic Quality and Standards Committees and Faculty Boards who identify themes to feed into the University Collaborative Provision Report presented to the Partnerships and Collaborations Sub-Committee. Periodic review of collaborative provision is undertaken through an event-based process at the partner institution. An appropriate range of management information is used in monitoring collaborative provision as demonstrated by the sample data sets provided to the team.

2.88 Reports from approval and review events demonstrated appropriate externality and noted discussions with staff and students and consideration of a range of issues including market demand and resources including staffing, delivery, assessment, student support and engagement. The 2011 Audit of Collaborative Provision report criticised the University for the amount of time that was dedicated to some elements of off-campus approval and review events. The team were told by the University that in all cases institutional recognition and review processes were separated from programme approval and validation events and that these would not occur on the same day. From the evidence available, the team were able to confirm that there was a separation of the processes but noted a recent example of institutional recognition of a new partner which took place in the morning and into the early afternoon, followed immediately by the validation of two programmes later in the same afternoon, with only 45 minutes scheduled for consideration of a programme at postgraduate level. A second day was used to consider a number of other programmes. The review team therefore **recommends** that by September 2014, the University should reflect upon the duration and scope of approval events with collaborative partner organisations to ensure it can be demonstrated that due consideration has been given to all areas of delivery.

2.89 Additional oversight and support for partners is provided through the roles of the Collaborative Delivery Coordinators for validated and joint delivery provision and through Link Tutors for franchised partnerships. Role holders are supported by comprehensive handbooks and time is allocated for them to undertake the roles through the University's deployment process. Partners commented on the usefulness of having key points of contact and on the regular and effective communication with the University, both through formal and informal mechanisms, a number of which have been discussed in this section. The team considers the comprehensive and systematic engagement with collaborative partners through formal and informal mechanisms to be **good practice**.

2.90 Students in collaborative partnerships receive course handbooks approved by the University and prepared by partners using a standard template. Students confirmed the usefulness of these handbooks and were clear about how to access information relating to plagiarism, complaints and appeals. They confirmed that they were clear about assessment criteria, were well supported and that adequate resources were in place. Students were also aware of representation and feedback processes.

2.91 Monitoring of information relating to collaborative provision is undertaken by the Quality Assurance Services. Partners were clear about their responsibilities for the production of marketing materials and the process of submission to the University for approval and the team saw documentary evidence of comprehensive checking of, and requests to, partners for changes to the information submitted.

2.92 The team were able to clarify that the University produces award certificates. Diploma supplements are also issued by the University and these refer to the location of study.

2.93 Notwithstanding the concerns about time allocated to some elements of the University's approval and review processes, the available evidence confirmed that the University's mechanisms for managing its collaborations are generally effective and secure. The team concludes, therefore, that Expectation B10 is met, but there is a moderate risk.

**Expectation:** Met

**Level of risk:** Moderate

**Expectation (B11): Research degrees are awarded in a research environment that provides secure academic standards for doing research and learning about research approaches, methods, procedures and protocols. This environment offers students quality of opportunities and the support they need to achieve successful academic, personal and professional outcomes from their research degrees.**

**Quality Code, Chapter B11: Research degrees**

**Findings**

2.94 The University Research Office's annual report for 2012-13 stated that the University had around 543 students studying for postgraduate research degrees; this figure comprised 159 full-time students and 384 part-time students and includes students studying both on-campus and off-campus. The team noted that the self-evaluation document says that the University has around 650 postgraduate research students while minutes of the Research and Enterprise Committee, January 2014 suggest the total is 685.

2.95 The University's *Strategic Plan 2010-15* sets out its ambition to increase the number of postgraduate students (both taught and research) and to develop further its research activity and culture. These aims are supported by the Research and Enterprise Strategy, implemented in 2011.

2.96 The Research and Enterprise Committee, a standing committee of Academic Board, chaired by the Deputy Vice-Chancellor Research and Enterprise oversees research, enterprise and scholarly activity and the provision of research degrees and includes staff and student representation. Faculty Research and Enterprise Committees, reporting to the University Research and Enterprise Committee, are responsible for general issues relating to research and enterprise in the faculty.

2.97 There are two subcommittees of the Research and Enterprise Committee; the Research Ethics Sub-Committee manages policy on research ethics and coordinates faculty research ethics committees, and the Research Degrees Sub-Committee has delegated authority for the oversight, monitoring and approval of matters relating to research degrees programmes and outcomes including approval of external examiners. The review team can confirm that arrangements for oversight of research degrees have been strengthened in response to recommendations made by the 2009 Institutional Audit team and that the Research Degrees Sub-Committee is discharging its responsibilities in relation to postgraduate research matters in a consistent manner.

2.98 The University Research Office supports staff and students in relation to research matters and has responsibility for research student processes and procedures. The University Research Office's remit includes provision of generic skills training for postgraduate research students. The University Research Office provides an Annual Research Report to the Faculty and University Research and Enterprise Committees. Faculties produce annual reports which include action plans. The Annual Research Report for 2012-13 demonstrates that the University is using appropriate internal and external data in monitoring its provision.

2.99 The Regulations for Research Awards are set out in the Academic Principles and Regulations, supplemented by the Research Award Delivery Framework. Additional procedural guidance is provided through the Quality Manual for Research Degree Programmes and students are issued with a Research Candidates Handbook. Regulations and associated guidance are subject to regular review and Academic Board has final approval of any changes. These documents detail procedures for the selection and admission of students, composition and appointment of supervisory teams, progress and

review procedures, assessment arrangements, and student complaints and appeals. Guidance on ethics, intellectual property rights, research misconduct and plagiarism is provided to students through the Academic Principles and Regulations. The University has mapped its procedures for the management of research degrees against *Chapter B11: Research degrees* of the Quality Code and as a result has instigated some changes to its guidance and handbooks. Notwithstanding this ongoing activity, the University's regulations and additional procedural guidance meet Expectation B11.

2.100 Students, staff and external examiners have access to the regulations and handbooks via the University's webpage for research degree programmes. Students are made aware of the available information and regulations at the compulsory two-day induction programme which all students, including those studying on and off-campus, confirmed they had attended.

2.101 The review team tested the operation of the research degree policies and procedures in a number of ways. The team talked to research supervisors and a sample of research students studying both on and off-campus, including part-time, full-time, international students and students who were contributing to undergraduate teaching or were graduate teaching assistants. They also read procedures, related guidance, handbooks and minutes of and reports to the University Research and Enterprise Committee, the Faculty Research and Enterprise Committees and the Research Degrees Sub-Committee.

2.102 The majority of postgraduate research students who spoke to the review team had met their prospective supervisors at the point of application which they had found helpful. Supervisory teams consist of a Director of Studies and at least one other supervisor. All students studying off-campus have a University-based Director of Studies. The University sets no absolute limit on the number of students that can be supervised by a member of staff; this is managed through its workload allocation process. The Research Degrees Sub-Committee monitors the appointment of supervisory teams annually. New supervisors undergo compulsory training. Students commented very positively on their interactions with supervisors and were clear about requirements for minimum contact with supervisors. The review team found that supervisory arrangements were effective. In contrast, not all students were clear about the role of the Faculty Postgraduate Research Tutors who are meant to provide an independent point of contact for research students. However, students indicated that they all had independent points of contact if the need should arise.

2.103 Students' progress is checked formally through Confirmation of Registration (normally within four months for full-time and six months for part-time students) and through Annual Progression Review meetings which are monitored through the Research Degrees Sub-Committee. Students confirmed their understanding of the arrangements for progression, review and examination including the opportunities available to undertake a mock viva. They were also positive about the generic skills training provided by the University Research Office and the additional opportunities afforded to them through their faculties to attend internal and external events and conferences, including the University's annual research conference.

2.104 Students who teach may do so as graduate teaching assistants who are required to undertake 300 hours of teaching and related duties per academic year. Training and ongoing support for graduate teaching assistants is provided. Other research students may also have the opportunity to engage in teaching and must undertake the University's compulsory two-day course run by the Centre for Learning and Teaching. Students highlighted a lack of consistency of opportunity for research students to take up teaching related activities and this was also reflected in feedback through Research Candidate Forum meetings. The University has stated its commitment to ensuring equality of opportunity in relation to teaching opportunities in its recently implemented Standard Entitlements for Research Degree Candidates (see below).

2.105 Research student feedback is gathered through representation on key committees as well as through Faculty and University Research Candidate Forums. The University Research Office annual report includes a summary of feedback received from students and academic staff. Recent issues raised by students include some students reporting a sense of isolation and lack of research community, a lack of dedicated postgraduate space (which the University has since addressed), confusion around who to contact when administrative and resource issues arise, and lack of engagement with student forums. A number of these issues were also echoed by students who met with the review team who indicated that further development of the research environment would be desirable. The University confirmed that it engages with the Postgraduate Research Experience Survey (PRES) but the majority of students who met the team were unaware of PRES and there was only limited evidence of its use within the University. While evidence shows that the University is collecting, reporting and responding to feedback from postgraduate research students as it grows its research environment and student numbers, it may benefit from using the feedback from PRES in the same way it uses feedback from NSS and its internal student survey.

2.106 The University has recently implemented a standard entitlement to resources for its research students outlined in the University's Agreement on Standard Entitlements for Research Degree Candidates. Implementation is the responsibility of faculties. Students who met the team acknowledged receipt of the statement but their experiences of its implementation varied. For example, some students had experienced considerable difficulty with the hot-desking system and other students with the quality of and access to the equipment provided such as laptops.

2.107 The University has stated its strategic aim to strengthen its research culture and environment and has taken a number of steps to achieve this including the establishment of research institutes and centres (three out of five institutes had been established at the time of the review), investment in resources and through its staffing and staff development approaches. The team heard in meetings with staff that there had been a positive change in the research culture and environment, but it was clear from meetings with and feedback from students that there is still some work to be done to achieve this consistently across the University. The team **affirms** the actions being taken to enhance the research environment.

2.108 The team concludes that Expectation B11 is met and that the risk is low.

**Expectation:** Met

**Level of risk:** Low

## **Quality of student learning opportunities: Summary of findings**

2.109 In reaching a judgement about the quality of student learning opportunities, the review team considered a significant range of University documentation and met with students and staff from both the University and a selection of its collaborative partners.

2.110 Of the 11 Expectations in this area, all are met. In one area - relating to Expectation B10 - the team made a recommendation regarding the duration and scope of approval events with collaborative partner organisations. While the team felt that this gave rise to a moderate risk, it nevertheless concludes that the Expectation is met. It also drew attention to a feature of good practice in this area, relating to the University's comprehensive and systematic engagement with collaborative partners through formal and informal mechanisms. It also affirmed actions being taken by the University with regard to engaging students as transformational agents of change (Expectation B5) and enhancing the research environment (Expectation B11). In both cases, the review team concludes that the relevant Expectation is nonetheless met and there is a low risk.

2.111 The review team found that the University had considered the formal requirements of these chapters of the Quality Code, and had ensured that it was possible to demonstrate its compliance with broad Expectations and its engagement with the Indicators informing those Expectations. The review team concludes that the quality of student learning opportunities **meets** UK expectations.

### 3 Judgement: Quality of the information produced about its provision

**Expectation (C): UK higher education providers produce information for their intended audiences about the higher education they offer that is fit for purpose, accessible and trustworthy.**

**Quality Code, Part C: Information about higher education provision**

#### Findings

3.1 The University's self-evaluation document indicates that all matters relating to the accuracy, integrity and completeness of published information fall under the auspices of the Information Governance Sub-Group. The Information Governance Sub-Group is responsible for, among other things, 'oversight of assurance matters related to data and information held, processed or published by the University - this includes our legal obligations under Data Protection and Freedom of Information legislation'. The Student Hub website provides information for prospective students. Hardcopy prospectuses are distributed by standard means and require institutional-level sign-off.

3.2 The review team noted that the University had complied with the requirements iterated by the Higher Education Funding Council for England (HEFCE) with respect to the Wider Information Set and provided the necessary information to students and other stakeholders with regard to data protection, data access and freedom of information.

3.3 The University has published a Student Charter, which was prepared in consultation with the Students' Union and includes reference to student expectations with regard to such matters as the return of feedback on assessment. The expectations iterated within the Student Charter are further referenced within course and module documentation, with specific note of these expectations. As noted in Expectation A3, the Centre for Learning and Teaching conducts an ongoing review of course and module information, reflecting upon, among other matters, the currency of information made available to students.

3.4 External examiner reports are published on the University's VLE, and some care has been taken to ensure that students are made aware of their publication. While it was apparent to the review team that not all students had engaged with the information provided, those with representation responsibilities, and members of the relevant committees, reflected upon their availability.

3.5 There is specific guidance prepared by the University for the management of published information with collaborative partners, in the form of a guidance note - 'Guidance N: Published Information for Collaborative Provision'. This includes a flow chart relating to the approval process for published information. The approval processes for collaborative provision make clear the responsibilities for the approval of published information, and the review team was provided with examples of reports on approval, which included careful consideration of these responsibilities as well as examples of approval memoranda relating to published information. The team were, additionally, provided with examples of reports from annual monitoring processes (including individual Collaborative Delivery Coordinator reports) which included specific reflection upon, and approval of, published information within collaborative partners. Furthermore, staff from collaborative partner organisations met during the review were able to clearly iterate the University's expectations and regulations relating to the approval mechanisms for published information on courses leading to an award of the University.

3.6 Award certificates provided to students reflect the award title while diploma supplement information provides details on the award curriculum and learning outcomes, as well as information on the location of study for collaborative provision. Requirements for certificates are outlined in the regulations for taught awards, 'Academic Principles and Regulations Section A4: Taught Awards of the University'.

3.7 The review team concludes that the University has a clear understanding of the expectations placed upon it with respect to publishing information to prospective, current and former students, and has clearly engaged with collaborative partners to ensure their common understanding as to their duties in this respect. Processes for approval and assurance are sound, iterated within regulatory and process manuals, and require the appropriate level of approval from those with sufficient authority to exercise judgement in this respect.

**Expectation:** Met

**Level of risk:** Low

## **Quality of the information produced about its provision: Summary of findings**

3.8 In reaching a judgement on the accuracy, integrity and completeness of published information, the review team scrutinised a range of documentation (both published in hard copy and via electronic media) made available to prospective, current and former students and other stakeholders. The review team also explicitly considered the requirement of the Wider Information Set, and publication of external examiner reports, as well as reflecting upon the implementation of a Student Charter by the University. While attention was given to compliance with statutory requirements as they relate to data protection, the provision and security of personal information and the expectation of the Freedom of Information Act, these fell outside the direct scrutiny of the review.

3.9 The review team found that the University had considered the formal requirements of this aspect of the Quality Code, and had ensured that it was possible to demonstrate its compliance with the broad Expectation and its engagement with the Indicators informing that Expectation. The University has provided stakeholders with appropriate levels of information and ensured that it is accurate, with approval mechanisms for published information both internally and with collaborative partner organisations.

3.10 The quality of the information produced about its provision **meets** UK expectations.

## 4 Judgement: Enhancement of student learning opportunities

**Expectation (Enhancement): Deliberate steps are being taken at provider level to improve the quality of students' learning opportunities.**

### Findings

4.1 As evidence of its strategic approach to enhancement, the University points to its *Strategic Plan 2010-15*, and the consequent strategic planning process, noting the participation of students in relevant groups and committees. Underpinning the *Strategic Plan* are a number of strategies and other key documents outlining the University's approach to enhancing learning opportunities. These include the Developing Excellent Academic Practice implementation plan, the e-Learning Strategy implementation plan and the Employability Strategy. The Learning and Teaching Strategy, aimed at enhancing learning opportunities, was cited by the Centre for Learning and Teaching and other staff as the overarching strategy that governs the approach to enhancement. Progress against its implementation plan is regularly considered at the local level by faculty committees and centrally by the Academic Quality and Standards Committee; Learning, Teaching and Enhancement Committee; and Research and Enterprise Committee, all of which report to Academic Board.

4.2 As an example of its approach to the enhancement of learning opportunities, the University identified the Undergraduate Curriculum Refocus and the Taught Postgraduate Review, stating that they allowed for a refreshing of the portfolio and the embedding of graduate attributes in all courses. The review team confirmed that the changes were systematic and oriented to the enhancement of all taught provision.

4.3 The self-evaluation document also mentions the revised approach to personal tutoring as an example of the University's approach to enhancement. Students reported varying experiences of the scheme but confirmed that support and resources were generally available.

4.4 To enhance the quality of students' learning opportunities and support, the University took 'a strategic decision' to be assessed against the national criteria for Customer Service Excellence. As part of the process of review, the University introduced its Student Charter to set out its commitments and expectations in support of various customer groups. It also developed a system for recording and reporting compliments, comments and complaints and other forms of student feedback. In June 2013, the University achieved the Customer Service Excellence Standard. The Customer Service Excellence Standard requires continuous improvement, and to assist in this the University has established a Continuous Improvement Unit.

4.5 Enhancement activities are embedded within routine quality assurance processes including Strategic Planning Approval, academic approval, annual monitoring, periodic review, and discussion of national surveys within committees. The University uses external examiner feedback as part of a systematic identification of enhancement opportunities. Enhancement audits are also undertaken in aspects of the University's management of collaborative provision. The Academic Quality and Standards Committee oversees these quality processes, while Academic Board maintains institutional oversight through its consideration of Annual Quality reports. The Learning, Teaching and Enhancement Committee is responsible for developing, implementing and reviewing a range of academic strategies and promoting good practice.

4.6 The Centre for Learning and Teaching is responsible for a number of initiatives designed to share good practice including a variety of internal conferences, creating guides, staff development and working with underperforming programmes to improve NSS results. The Centre is also responsible for supporting wider academic policy and practice such as developing the personal tutor framework and providing guidance for the Undergraduate Curriculum Refocus exercise. The Student Experience Group also has responsibility for identifying and sharing good practice and contributing to wider academic processes. The University is working with the Students' Union towards improving student engagement in its committees.

4.7 The team concludes that the University is taking deliberate steps to improve the quality of students' learning opportunities and therefore meets the Expectation with the associated level of risk being low.

**Expectation: Met**

**Level of risk: Low**

## **Enhancement of student learning opportunities: Summary of findings**

4.8 In reaching its judgement, the review team matched its findings against the criteria specified in Annex two of the published handbook. The review team was able to conclude that the University takes deliberate steps to improve the quality of student learning opportunities. This is evidenced by: the University's overall *Strategic Plan* and its underpinning strategies; strategic development such as the Undergraduate Curriculum Refocus and the Taught Postgraduate Review; the committee structure's focus on enhancement; and the identification, support and dissemination of good practice through quality assurance procedures.

4.9 Therefore, the team concludes that the enhancement of student learning opportunities **meets** UK expectations.

## 5 Commentary on the Theme: Student Employability

### Findings

5.1 Employability is prominent as one of the main themes in the University's *Strategic Plan 2010-15*. This is supported by a separate Employability Strategy. Each faculty has an Associate Dean responsible for implementing the Employability Strategy.

5.2 Employability skills are integral to the design of courses; all new courses are required to address the University's graduate attributes, developed for the Undergraduate Curriculum Refocus. Guidelines are provided to support those developing new courses to achieve this.

5.3 The University has established a wide range of placements, volunteering, business competitions and community projects which provide rich opportunities to further develop students' employability skills. Faculties are responsible for managing the range of placements available to students on different courses. These opportunities are promoted by fairs, brochures and handbooks. The University launched a new Employability Hub, offering temporary work opportunities and internships, in September 2013. The University also makes effective use of alumni in highlighting employment opportunities provided for graduates. Employers have a broad range of opportunities to work with the University through support for placements, PSRB accreditation and advising on new programme approvals. The review team noted links with Festival Republic and London 2012 as specific examples of an innovative approach to employability.

5.4 The University continuously monitors Destination of Leavers from Higher Education data through programme monitoring and review processes and has an aim to exceed the employability benchmark set by HEFCE.

5.5 Meetings with undergraduate and postgraduate students confirmed their experience of employability-related initiatives both in the curriculum and as extra-curricular activity, both of which they felt were extensive and beneficial.

5.6 The review team considered that employability was well embedded across the University, starting with the strategy and following on to faculties for local implementation. The team concludes that this broad range of activity, underpinned by the University's strategy and approach to programme development and approval, makes a positive contribution to students' learning experiences.

## Glossary

This glossary is a quick-reference guide to terms in this report that may be unfamiliar to some readers. Definitions of key operational terms are also given on pages 27 to 29 of the [Higher Education Review handbook](#).

If you require formal definitions of other terms please refer to the section on assuring standards and quality: [www.qaa.ac.uk/assuringstandardsandquality](http://www.qaa.ac.uk/assuringstandardsandquality).

User-friendly explanations of a wide range of terms can be found in the longer **Glossary** on the QAA website: [www.qaa.ac.uk/aboutus/glossary](http://www.qaa.ac.uk/aboutus/glossary).

### **Academic standards**

The standards set by **degree-awarding bodies** for their courses (programmes and modules) and expected for their awards. See also **threshold academic standard**.

### **Award**

A qualification, or academic credit, conferred in formal recognition that a student has achieved the intended **learning outcomes** and passed the assessments required to meet the academic standards set for a **programme** or unit of study.

### **Blended learning**

Learning delivered by a number of different methods, usually including face-to-face and e-learning (see **technology enhanced or enabled learning**).

### **Credit(s)**

A means of quantifying and recognising learning, used by most institutions that provide higher education **programmes of study**, expressed as numbers of credits at a specific level.

### **Degree-awarding body**

A UK higher education provider (typically a university) with the power to award degrees, conferred by Royal Charter, or under Section 76 of the Further and Higher Education Act 1992, or under Section 48 of the Further and Higher Education (Scotland) Act 1992, or by Papal Bull, or, since 1999, granted by the Privy Council on advice from QAA (in response to applications for taught degree awarding powers, research degree awarding powers or university title).

### **Distance learning**

A course of study that does not involve face-to-face contact between students and tutors but instead uses technology such as the internet, intranets, broadcast media, CD-ROM and video, or traditional methods of correspondence - learning 'at a distance'. See also **blended learning**.

### **Dual award or double award**

The granting of separate awards (and certificates) for the same **programme** by two **degree-awarding bodies** who have jointly delivered the programme of study leading to them. See also **multiple award**.

### **e-learning**

See technology enhanced or enabled learning.

### **Enhancement**

The process by which higher education providers systematically improve the quality of provision and the ways in which students' learning is supported. It is used as a technical term in our review processes.

### **Expectations**

Statements in the **Quality Code** that set out what all UK higher education providers expect of themselves and each other, and what the general public can therefore expect of them.

### **Flexible and distributed learning**

A programme or module that does not require the student to attend classes or events at particular times and locations. See also **distance learning**.

### **Framework**

A published formal structure. See also **framework for higher education qualifications**.

### **Framework for higher education qualifications**

A published formal structure that identifies a hierarchy of national qualification levels and describes the general achievement expected of holders of the main qualification types at each level, thus assisting higher education providers in maintaining academic standards. QAA publishes the following frameworks: *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ) and *The framework for qualifications of higher education institutions in Scotland* (FHEQIS).

### **Good practice**

A process or way of working that, in the view of a QAA review team, makes a particularly positive contribution to a higher education provider's management of academic standards and the quality of its educational provision. It is used as a technical term in QAA's audit and review processes.

### **Learning opportunities**

The provision made for students' learning, including planned study, teaching, assessment, academic and personal support, and resources (such as libraries and information systems, laboratories or studios).

### **Learning outcomes**

What a learner is expected to know, understand and/or be able to demonstrate after completing a process of learning.

### **Multiple awards**

An arrangement where three or more **degree-awarding bodies** together provide a single jointly delivered **programme** (or programmes) leading to a separate **award** (and separate certification) of each awarding body. The arrangement is the same as for **dual/double awards**, but with three or more awarding bodies being involved.

### **Operational definition**

A formal definition of a term, establishing exactly what QAA means when using it in reviews and reports.

### **Programme (of study)**

An approved course of study that provides a coherent learning experience and normally leads to a qualification.

**Programme specifications**

Published statements about the intended **learning outcomes** of programmes of study, containing information about teaching and learning methods, support and assessment methods, and how individual units relate to levels of achievement.

**Public information**

Information that is freely available to the public (sometimes referred to as being 'in the public domain').

**Quality Code**

Short term for the UK Quality Code for Higher Education, which is the UK-wide set of **reference points** for higher education providers (agreed through consultation with the higher education community, and published by QAA), which states the **Expectations** that all providers are required to meet.

**Reference points**

Statements and other publications that establish criteria against which performance can be measured.

**Subject benchmark statement**

A published statement that sets out what knowledge, understanding, abilities and skills are expected of those graduating in each of the main subject areas (mostly applying to bachelor's degrees), and explains what gives that particular discipline its coherence and identity.

**Technology enhanced or enabled learning (or e-learning)**

Learning that is delivered or supported through the use of technology.

**Threshold academic standard**

The minimum acceptable level of achievement that a student has to demonstrate to be eligible for an academic **award**. Threshold academic standards are set out in the national **frameworks** and **subject benchmark statements**.

**Virtual learning environment (VLE)**

An intranet or password-only interactive website (also referred to as a platform or user interface) giving access to **learning opportunities** electronically. These might include such resources as course handbooks, information and reading lists; blogs, message boards and forums; recorded lectures; and/or facilities for online seminars (webinars).

**Widening participation**

Increasing the involvement in higher education of people from a wider range of backgrounds.

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© The Quality Assurance Agency for Higher Education 2014  
Southgate House, Southgate Street, Gloucester GL1 1UB

Tel: 01452 557 000  
Email: [enquiries@qaa.ac.uk](mailto:enquiries@qaa.ac.uk)  
Website: [www.qaa.ac.uk](http://www.qaa.ac.uk)

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