

# **Sheffield Hallam University**

---

APRIL 2005

## Preface

The Quality Assurance Agency for Higher Education (QAA) exists to safeguard the public interest in sound standards of higher education (HE) qualifications and to encourage continuous improvement in the management of the quality of HE.

To do this QAA carries out reviews of individual HE institutions (universities and colleges of HE). In England and Northern Ireland this process is known as institutional audit. QAA operates similar but separate processes in Scotland and Wales.

## The purpose of institutional audit

The aims of institutional audit are to meet the public interest in knowing that universities and colleges are:

- providing HE, awards and qualifications of an acceptable quality and an appropriate academic standard, and
- exercising their legal powers to award degrees in a proper manner.

## Judgements

Institutional audit results in judgements about the institutions being reviewed. Judgements are made about:

- the confidence that can reasonably be placed in the soundness of the institution's present and likely future management of the quality of its programmes and the academic standards of its awards
- the reliance that can reasonably be placed on the accuracy, integrity, completeness and frankness of the information that the institution publishes, and about the quality of its programmes and the standards of its awards.

These judgements are expressed as either **broad confidence, limited confidence or no confidence** and are accompanied by examples of good practice and recommendations for improvement.

## Nationally agreed standards

Institutional audit uses a set of nationally agreed reference points, known as the 'Academic Infrastructure', to consider an institution's standards and quality. These are published by QAA and consist of:

- *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ), which include descriptions of different HE qualifications
- *The Code of practice for the assurance of academic quality and standards in higher education*
- subject benchmark statements, which describe the characteristics of degrees in different subjects
- guidelines for preparing programme specifications, which are descriptions of the what is on offer to students in individual programmes of study. They outline the intended knowledge, skills, understanding and attributes of a student completing that programme. They also give details of teaching and assessment methods and link the programme to the FHEQ.

## **The audit process**

Institutional audits are carried out by teams of academics who review the way in which institutions oversee their academic quality and standards. Because they are evaluating their equals, the process is called 'peer review'.

The main elements of institutional audit are:

- a preliminary visit by QAA to the institution nine months before the audit visit
- a self-evaluation document submitted by the institution four months before the audit visit
- a written submission by the student representative body, if they have chosen to do so, four months before the audit visit
- a detailed briefing visit to the institution by the audit team five weeks before the audit visit
- the audit visit, which lasts five days
- the publication of a report on the audit team's judgements and findings 20 weeks after the audit visit.

## **The evidence for the audit**

In order to obtain the evidence for its judgement, the audit team carries out a number of activities, including:

- reviewing the institution's own internal procedures and documents, such as regulations, policy statements, codes of practice, recruitment publications and minutes of relevant meetings, as well as the self-evaluation document itself
- reviewing the written submission from students
- asking questions of relevant staff
- talking to students about their experiences
- exploring how the institution uses the Academic Infrastructure.

The audit team also gathers evidence by focusing on examples of the institution's internal quality assurance processes at work using 'audit trails'. These trails may focus on a particular programme or programmes offered at that institution, when they are known as a 'discipline audit trail'. In addition, the audit team may focus on a particular theme that runs throughout the institution's management of its standards and quality. This is known as a 'thematic enquiry'.

From 2004, institutions will be required to publish information about the quality and standards of their programmes and awards in a format recommended in document 03/51, *Information on quality and standards in higher education: Final guidance*, published by the Higher Education Funding Council for England. The audit team reviews progress towards meeting this requirement.

ISBN 1 84482 343 1

© Quality Assurance Agency for Higher Education 2005

All QAA's publications are available on our website [www.qaa.ac.uk](http://www.qaa.ac.uk)

*Printed copies are available from:*

Linney Direct

Adamsway

Mansfield

NG18 4FN

Tel 01623 450788

Fax 01623 450629

Email [qaa@linneydirect.com](mailto:qaa@linneydirect.com)

## **Contents**

<b>Summary</b>	<b>1</b>	Assurance of the quality of teaching delivered through distributed and distance methods	19
Introduction	1	Learning support resources	19
Outcome of the audit	1	Academic guidance, support and supervision	20
Features of good practice	1	Personal support and guidance	21
Recommendations for action	1		
Summary outcomes of discipline audit trails	2		
National reference points	2		
<b>Main report</b>	<b>4</b>		
<b>Section 1: Introduction: Sheffield Hallam University</b>	<b>4</b>	<b>Section 3: The audit investigations: discipline audit trails</b>	<b>22</b>
The institution and its mission	4	Discipline audit trails	22
Collaborative provision	5		
Background information	5		
The audit process	5		
Developments since the previous academic quality audit	6	<b>Section 4: The audit investigations: published information</b>	<b>30</b>
		The students' experience of published information and other information available to them	30
		Reliability, accuracy and completeness of published information	30
<b>Section 2: The audit investigations: institutional processes</b>	<b>6</b>	<b>Findings</b>	<b>34</b>
The institution's view as expressed in the SED	6	The effectiveness of institutional procedures for assuring the quality of programmes	34
The institution's framework for managing quality and standards	7	The effectiveness of institutional procedures for securing the standards of awards	36
The institution's intentions for the enhancement of quality and standards	9	The effectiveness of institutional procedures for supporting learning	36
Internal approval, monitoring and review processes	9	Outcomes of discipline audit trails	37
External participation in internal review processes	12	The use made by the institution of the Academic Infrastructure	38
External examiners and their reports	12		
External reference points	13	The utility of the SED as an illustration of the institution's capacity to reflect upon its own strengths and limitations, and to act on these to enhance quality and standards	39
Programme-level review and accreditation by external agencies	14	Commentary on the institution's intentions for the enhancement of quality and standards	39
Student representation at operational and institutional level	15	Reliability of information	39
Feedback from students, graduates and employers	15	Features of good practice	39
Progression and completion statistics	16	Recommendations for action	40
Assurance of the quality of teaching staff, appointment, appraisal and reward	17		
Assurance of the quality of teaching through staff support and development	18	<b>Appendix</b>	<b>41</b>
		Sheffield Hallam University's response to the audit report	41



## Summary

### Introduction

A team of auditors from the Quality Assurance Agency for Higher Education (QAA) visited Sheffield Hallam University (the University) from 11 April to 15 April to carry out an institutional audit. The purpose of the audit was to provide public information on the quality of the opportunities available to students and on the academic standards of awards.

To arrive at its conclusions the audit team spoke to members of staff throughout the institution, to current students, and read a wide range of documents relating to the way the University manages the academic aspects of its provision.

The words 'academic standards' are used to describe the level of achievement that a student has to reach to gain an academic award (for example, a degree). It should be at a similar level across the UK.

Academic quality is a way of describing how well the learning opportunities available to students help them to achieve their award. It is about making sure that appropriate teaching, support, assessment and learning opportunities are provided for them.

In institutional audit, both academic standards and academic quality are reviewed.

### Outcome of the audit

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

- broad confidence can be placed in the soundness of the University's current management of the quality of its programmes
- broad confidence can be placed in the University's institutional-level capacity to manage effectively the security of its awards.

### Features of good practice

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

- the well-planned and effective transition from school to faculty-based Quality and Standards Management and Enhancement systems and the clear and continuing engagement of staff in that process
- the University's arrangements for the validation and approval of new programmes of study and, in particular, the quality of the annual Validation Review
- the comprehensive nature of the University Quality and Standards Profile and the way in which it enables Academic Board to fulfil its remit to monitor quality and standards
- the receipt and consideration at institutional level of the reports of professional, statutory and regulatory bodies
- the University's use of its virtual learning environment, both as a pedagogical and communications medium, and the plans for its future development.

### Recommendations for action

It would be advisable for the University to:

- reassess how the staff appraisal and peer-supported review of Learning Teaching and Assessment systems might be more effectively used for the assurance of teaching quality in addition to the enhancement of teaching standards.

It would be desirable for the University to:

- review the relationship between ad hoc working groups and the established governance structure
- review the internal processes for responding to the reports of external examiners to avoid potential duplication and ensure timely responses
- consider the implementation of clear University guidelines for the timely feedback on assessed work to students
- keep under review University policy and practice in the consideration of extenuating circumstances and the granting of extensions to assessment deadlines to ensure consistent implementation at the local level.

## **Summary outcomes of discipline audit trails**

**Built environment; business and management; computing; history; mechanical engineering; sport**

The audit team also looked at the following specific areas of provision by undertaking discipline audit trails: built environment; business and management; computing; history; mechanical engineering; and sport, to find out how well the University's systems and procedures were working at the discipline level. The University provided the team with documents, including student work and, here too, the team spoke to staff and students. As well as supporting the overall confidence statements given above, the team considered that the standard of student achievement in the six discipline areas was appropriate to the title of the award and its place in *The framework for higher education qualifications in England, Wales and Northern Ireland*. The team considered that the quality of the learning opportunities available to students was suitable for programmes of study leading to the awards.

## **National reference points**

To provide further evidence to support its findings the audit team also investigated the use made by the University of the Academic Infrastructure which QAA has developed on behalf of the whole of UK higher education. The Academic Infrastructure is a set of nationally agreed reference points to define both good practice and academic standards. The University has embedded these developments in a timely and generally comprehensive way into its management of quality and standards.

From the end of 2005, QAA's audit teams will comment on the reliability of the information about academic quality and standards that institutions will be required to publish, which is listed in the Higher Education Funding Council for England's document 03/15, *Information on quality and standards in higher education: Final guidance*. The University is alert to the requirements and the audit team found that it was taking steps to fulfil its responsibilities in this regard.

## **Main report**

## Main report

1 An institutional audit of Sheffield Hallam University (the University) was undertaken during the week commencing 11 April 2005. The purpose of the audit was to provide public information on the quality of the University's programmes of study and on the discharge of its responsibility for its awards.

2 The audit was carried out using a process developed by the Quality Assurance Agency for Higher Education (QAA) in partnership with the Higher Education Funding Council for England (HEFCE), the Standing Conference of Principals (SCOP) and Universities UK (UUK), and has been endorsed by the Department for Education and Skills. For institutions in England, it replaces the previous processes of continuation audit, undertaken by QAA at the request of UUK and SCOP, and universal subject review, undertaken by QAA on behalf of HEFCE, as part of the latter's statutory responsibility for assessing the quality of education that it funds.

3 The audit checked the effectiveness of the University's procedures for establishing and maintaining the standards of its academic awards; for reviewing and enhancing the quality of the programmes of study leading to those awards; and for publishing reliable information. As part of the audit process, according to protocols agreed with HEFCE, SCOP and UUK, the audit included consideration of an example of institutional processes at work at the level of the programme, through discipline audit trails (DATs), with examples of those processes operating at the level of the institution as a whole.

## Section 1: Introduction: Sheffield Hallam University

### The institution and its mission

4 The academic foundations of the University can be traced back to Sheffield School of Design in 1843 and includes the merger of three Sheffield colleges, Technology, Commerce and Art & Design in 1969 to form Sheffield Polytechnic. Further mergers with three teacher training colleges followed in the

1970s with a change of name to Sheffield City Polytechnic. The Polytechnic became Sheffield Hallam University in 1992 with full degree-awarding powers.

5 Since 1992 the number of campuses has reduced from five to three: City, Collegiate Crescent and Psalter Lane. The estate strategy is driven by the academic agenda and it is planned to consolidate the University estate onto the City and Collegiate Crescent sites in the coming years. Approximately 70 per cent of the estate has been replaced or refurbished since 1992.

6 In 2004-05, the University offered about 800 courses to 29,055 students, of whom 72.8 per cent are undergraduates, 25.6 per cent are taught postgraduate and 1.6 per cent postgraduate research students; 51 per cent are female, 49 per cent male and 22 per cent study part-time. The student profile is predominantly UK based, including 92 per cent of its full-time undergraduates. The University has 4,305 members of staff.

7 Features of the academic provision at the University include a strong local identity, with 50.3 per cent of UK students having a Sheffield postcode; inclusivity, with 24.4 per cent of its undergraduate population from lower socio-economic groups; 36.3 per cent mature students; 5.7 per cent students with a disability; and an ethnically diverse student population. Also, there is national recognition as a Centre of Excellence in Teaching and Learning (CETL) in three separate areas: Embedding, Enhancing and Integrating Employability; Promoting Learner Autonomy; and Inter-professional E-learning in Health and Social Care.

8 The University is in the process of a major academic restructuring from 10 schools (Business and Finance, Computing and Management Sciences, Cultural Studies, Education, Engineering, Environment and Development, Health and Social Care, Science and Mathematics, Social Science and Law, Sport and Leisure Management) to four faculties: Arts, Computing, Engineering and Sciences; Development and Society; Health and Wellbeing; Organisation and Management. The relevant executive dean is overseeing the transition from

schools to faculties with input from the Corporate Plan Implementation Programme team.

9 Overall coordination and management of the administrative services and physical infrastructure of the University is provided through 11 support departments: Communication and Information Technology (IT) Services; Enterprise Centre; Facilities Directorate; Finance Directorate; Human Resources; Learning Centre; Marketing; Planning Support; Registry; Student Services Centre; and the University Secretariat.

10 The University's mission is:

'to set the standard for a modern, progressive University with a leading role in the 21st century by enabling our students and staff to meet the challenges and opportunities of tomorrow's world through educational excellence and enterprise, and encouraging creativity and continuous quality improvement'.

## **Collaborative provision**

11 In view of the size and complexity of the University's collaborative provision, there will be a separate future audit and, therefore, it does not form part of the present institutional audit.

## **Background information**

12 The published information available to the audit team included:

- the report of a quality audit by QAA undertaken in November 2000
- QAA subject review reports since November 2000
- QAA reports on three developmental engagements.

13 The University provided QAA with:

- an institutional self-evaluation document (SED)
- a discipline self-evaluation document (DSED) for each of the six areas selected for DATs
- various policy and strategy documents
- student statistics and first destination data

- full access to the University's intranet which contained all policies, procedures and regulations for the management and enhancement of quality and standards.

14 During the audit visit further documentation was provided, including minutes of committee meetings, data from academic monitoring and review, continuing access to the intranet and reports from professional and statutory bodies.

## **The audit process**

15 A preliminary meeting was held at the University in July 2004. Matters discussed included the University's pattern of internal review and the distribution of students across programmes. Following the preliminary meeting QAA confirmed that six DATs would be conducted during the audit visit. The final selection of DATs was built environment; business and management; computing; history; mechanical engineering; and sport. QAA received the institutional SED in November 2004 and the DSEDs in January 2005.

16 A briefing visit was conducted at the University on 7 to 9 February 2005. The purpose of the briefing visit was to help the audit team to explore with the Vice-Chancellor, senior members of staff and student representatives, matters relating to the management of quality and standards raised by the SED and other documentation provided for the team. At the end of the briefing visit a programme of meetings was submitted to the University in preparation for the audit visit.

17 At the preliminary visit for the audit, the students of the University were invited, through their Students' Union (SU), to submit a separate document expressing views on the student experience at the University, and identifying any matters of concern or commendation with respect to the quality of the student experience and the standards of awards. In November 2004, a statement was submitted to QAA by the SU on behalf of the University's students. The team is grateful to the students for preparing this statement to support the audit.

18 The audit took place from 11 to 15 April 2005. During the audit visit the audit team met with staff and students both at institutional level and in relation to the selected DAT areas. The team is grateful to all those who made themselves available to discuss the University's quality management and academic standards arrangements.

19 The audit team was Dr W Boyd; Dr S Bulman; Professor A Cobb; Dr P Easy; Mrs V Fox; Mr P Hicks; Professor P Periton, auditors, and Ms H Placito (audit secretary). The audit was coordinated for QAA by Dr J Ellis, Assistant Director, Reviews Group.

### **Developments since the previous academic quality audit**

20 The University was last audited by QAA in November 2000. The findings of the report supported broad confidence in the University's current and future management of the quality of its educational provision and the academic standards of its awards, and in its discharge of its duties to students and other stakeholders in a competent and responsible manner. Three areas of good practice worthy of commendation were identified.

21 The report identified two advisable points for further consideration: making a careful explicit assessment of the extent and pace of change which the University could comfortably sustain; and reflecting further on its proposals to devolve responsibility for research degree management, given variations in practice and experience within the schools. The University was also asked to proceed with its plans to review the provision of personal academic support for students; continue to give active consideration to the ways in which it secures consistency of communications with the student body, and student involvement in quality assurance and enhancement.

22 The University has taken actions in response to the report. While it is again in a period of significant structural change, it has created a senior post of Director of Communications and Public Affairs to engage staff in the implementation of change. Other

key actions have included the introduction of a semi-devolved model of research degrees management; a framework for personal academic support for students; an annual research degree monitoring exercise to establish the views of research students; measures to increase the effectiveness of the membership of Academic Board; monitoring the support provided for international students; a regular programme of staff training on Human Resources (HR) policies and procedures; and establishing closer working relationships with the student body in all aspects of the process of quality assurance and enhancement.

23 The audit team formed the view that the University has responded to issues raised in previous audit in a broadly appropriate manner. The effectiveness of the actions taken is further discussed in subsequent sections of this report.

## **Section 2: The audit investigations: institutional processes**

### **The institution's view as expressed in the SED**

24 In the SED, the University stated that its Quality and Standards Management and Enhancement (QSME) Framework was the 'main vehicle through which [it] monitors and assures the establishment and maintenance of academic standards and the management and enhancement of quality'. The key elements of the Framework are the suite of documents which constitute the Academic Frameworks, Policies and Regulations (AFPR), faculty-based QSME operations, University-level QSME operations, and the University Quality and Standards Profile (formerly known as the Institutional Profile).

25 Academic Board approved the current QSME Framework in 2001 and the University cited a number of developments which had influenced its shape and structure. These include: the University's Vision and Values Statement (with a focus on continuous quality improvement); the use of the European Foundation for Quality Management

Organisational Excellence Model (to gain better understanding of the key elements of process management and improvement); and the influence of the Business Planning and Operational Review (BPOR) system (with a focus on local accountability and management). Other influencing factors were the outcomes of the QAA continuation audit of 2000 and the impact of the emerging Academic Infrastructure.

26 In the view of the University, the QSME Framework has significant strengths including its comprehensive nature, its developmental aspects, the shared commitment of staff to its success, the strength of Faculty operations, and the range of informal and formal groups which contribute to its development, implementation and review. The University also intends to develop the relationship between faculties and professional departments to enhance the quality of the student experience, and to strengthen the relationship between the QSME Framework and the BPOR.

### **The institution's framework for managing quality and standards**

27 Subject to the role of the Board of Governors to decide the educational character and mission of the University, the SED described Academic Board as 'the supreme academic body...[with]...primary responsibility for the assurance of standards and determining systems of quality management'. The Board has two major subcommittees: the Academic Development Committee (ADC) and the Research and Business Development Committee (RBDC). The remit of the ADC sets out its significant responsibility to advise Academic Board on all matters related to the educational provision of the University including the quality and standards of undergraduate, taught postgraduate, and research degree programmes. The ADC maintains two formal subcommittees to assist it in fulfilling this remit: the Monitoring Sub-Committee (MSC) and the Research Degrees Sub-Committee (RDSC).

28 The responsibilities of the MSC include monitoring the internal Annual Quality Review (AQR) process, assisting in the preparation of the annual University Quality and Standards

Profile (see paragraph 52 below), and considering all external reports made on the academic provision of the University. The remit of the RDSC reflects the University's response to the 2000 continuation audit which had recommended further reflection on plans for the devolution of responsibilities for research degrees. RDSC has retained responsibility for what was described to the audit team as 'the important quality markers', that is, the initial approval of research programmes and final examination arrangements. Faculty research degrees committees, reporting to the RDSC, take responsibility for all other aspects of a research students' programme including regular progress monitoring. In the view of the team, this particular arrangement represented an appropriate sharing of responsibilities and, on the evidence of documentation and meeting with staff and research students, appeared to be working well.

29 At faculty level, the faculty academic board (FAB) mirrors the role of the University's Academic Board as the 'supreme academic body in the Faculty'. This 'mirroring' of committees extends to the FAB subcommittee structure for quality and standards with a QSME Committee, a Learning, Teaching and Assessment Committee, and a Research Degrees Committee, all linked to the University's ADC. These links are achieved by structural cross-membership and the reporting opportunities which that enables. The audit team noted that the formal establishment of faculties at the beginning of the 2004-05 academic year meant that only oral reports from the initial meetings of FABs were available to Academic Board at its meeting in December 2004. However, the team also noted that such oral reports remained as the reporting line to Academic Board at its next meeting in February 2005. The University may wish to ensure that the receipt of FAB minutes by Academic Board is realised, given that it is the only formal reporting route from faculties to central committees of the University.

30 There are also a number of more informal groups which work in support of this formal academic governance structure. These include

the Assessment Working Group and a QSME Core Group. The QSME Core Group (set up to manage the review of the University's quality and standards systems in 2000) has more recently become the QSME Steering Group which was described to the audit team variously as a 'sounding board' or as a 'review group' which reflects on practice and makes recommendations for change' and which appears to have a status beyond that of a short-life working group. From the evidence of documentation and meetings with staff of the University, it was clear to the team that such groups were undertaking significant work in relation to quality management and standards in a competent and efficient manner. However, in some cases, the team found it difficult to clarify the relative responsibilities of such groups and formal committees within the governance structure (for example, the MSC's responsibilities for monitoring the 'effectiveness of the University's QSME Framework' and the work of the QSME Steering Group as it was described to the team). The University may wish to consider the desirability of keeping the relationship between ad hoc working groups and its established governance structure under review.

31 In addition to the structure for academic governance, a Vice-Chancellor's Group comprising senior managers of the University acts as an advisory body on strategic and operational matters to the Vice-Chancellor in her role as Chief Executive. A further University Executive Group and a University Leadership Group involve other managers in the operation of the University and the implementing and monitoring of policy and strategy.

32 In terms of executive responsibilities for quality and standards, the Pro-Vice-Chancellor (Academic Development) chairs the ADC and thus, under the aegis of the Vice-Chancellor (who chairs Academic Board), is the senior officer of the University with direct responsibility for matters of academic quality and standards. The audit team noted that some significant responsibilities for quality processes were also vested in the post of the Director of Registry. As an individual, the Director is responsible, for

example, for giving exemptions to programmes which do not meet with the University's standard Academic Awards Framework, approving the membership of the University Standing panels which conduct the validation of new academic programmes, and giving final approval to all external examiner appointments. In each case, however, the team was satisfied that the decisions of the Director were subject to the scrutiny of the appropriate University committee through proper annual reporting arrangements.

33 The University produces comprehensive documentation in support of the QSME Framework including the AFPR suite which covers the awards framework, assessment regulations, curriculum policy statements, a new Student Support Framework, and policies related to teaching, learning and assessment, admissions and recruitment, quality and standards, and research. A key document is the web-based QSME Handbook which provides comprehensive advice and guidance on all aspects of the University's QSME Framework including the major quality assurance processes.

34 In some senses, the production, nature and usefulness of the QSME Handbook can be seen as an example of the way in which the University effected the transition from schools to faculties in the context of quality and standards. A QSME transition plan was drawn up for the academic year 2003-04 and was supported by school QSME system reviews carried out in the first half of that year. One purpose of these reviews was to assist in the design and implementation of QSME systems for the new faculties. The audit team heard that the revised QSME Handbook was a product of co-operative work among appropriate staff of the new faculties to ensure the integration of good practice from the past, and to assure the best match between the Handbook and the structure which it was describing. Elsewhere, the team heard that the restructuring and the transition from school to faculty-based QSME systems had been a 'positive process' with a sense of continuity underlying it. The team formed the view that the well-planned and effective transition from school to faculty-based

QSME systems, and the clear and continuing engagement of staff in that process, was a feature of good practice.

## **The institution's intentions for the enhancement of quality and standards**

35 The University stated that, currently, it did not envisage any radical changes to its QSME Framework but intended to focus on the further embedding of QSME processes at corporate and faculty levels to refine and develop constituent parts and to achieve greater consistency across the institution. However, within this general approach to the securing of the QSME processes, the SED drew attention to a range of initiatives which the University intends to address as part of its agenda for the enhancement of quality and standards. These included further work on those Corporate Plan Implementation Plan (CPIP) projects which focus specifically on the quality of the student learning experience; seeking opportunities to streamline where possible the QSME systems; further work on developing the processes, systems and practices related to assessment; the full implementation and monitoring of the Internal Academic Audit process (see paragraph 49 below); and, in the light of the revised section of the *Code of practice for the assurance of academic quality and standards in higher education (Code of practice), Section 2: Collaborative provision and flexible and distributed learning (including e-learning)*, published by QAA, a review of its processes and practices in these areas.

36 The audit team welcomed this approach to ensuring the stability of the QSME Framework and the University's intention to secure it as a firm platform for future development. It would also endorse the future intentions related to assessment particularly in respect of the promotion of good academic practice and equity for students (see below paragraph 60). Comments on the potential for streamlining QSME systems are made elsewhere in this report.

## **Internal approval, monitoring and review processes**

### **Programme approval**

37 The University has well-established and systematic processes for the planning, validation and approval of new academic programmes, or the major modification of an existing programme, which are set out in detail in the QSME Handbook. Planning approval for new programmes must be given at both faculty and at University level before the validation process begins. Validation itself is normally undertaken by one of three University Standing Panels (USPs) whose responsibilities cover undergraduate, postgraduate, and collaborative programmes. A fourth USP has recently been established to consider the approval of professional doctorates. On occasion, and following consideration by the appropriate USP Chair and senior staff of the Registry, a validation which is considered to be 'low-risk' may be devolved to faculty level. Following a validation event, the recommendations of the panel are sent to Academic Board for approval. The USP Chair approves responses to any conditions arising from the validation.

38 The USPs involve a combination of staff of the University with significant experience in the planning and validation of academic programmes and those who wish to develop experience of quality assurance processes. They are nominated by the relevant dean of faculty or division/subject leader against a set University person specification. The panel chair approves nominated external members of validation panels. A USP Chairs' Forum permits those with substantial responsibility for this aspect of the University's quality assurance processes to meet on a regular basis.

39 In the view of the University, the USPs are 'a highly effective arrangement' which permits the deployment of core teams of very experienced staff and also allows for some flexibility in the approach to proposals. Through its reading of the reports of validation events and other appropriate documentation, the audit team would agree with this view. As

part of its overall approach to validation and approval, the University also produces an annual Validation Review which is considered by ADC and Academic Board. Reporting on the past year's activities, the review is an extremely comprehensive and thorough scrutiny and includes a full analysis of external participation, a review of any issues arising in relation to the QAA Academic Infrastructure, an examination of validation outcomes including conditions set and responses to those conditions, and a more general review of the process including USP membership and the resources expended by the University on these activities. In summary, the team formed the view that the University's arrangements for the validation and approval of new programmes of study and, in particular, the quality of the annual Validation Review was a feature of good practice.

### **Annual monitoring**

40 The QSME Framework includes a system for AQR which begins at the level of the individual module, passes through sub-faculty stages and culminates in MSC consideration of faculty annual quality reviews and the contribution which they make to the University Quality and Standards Profile.

41 Modules are reviewed following each occasion on which they are delivered. Drawing material from a Module File, the Module Leader and Module Team complete a standard pro forma which places an emphasis on student achievement in assessment and includes an action plan. Staff met by the audit team stressed the importance of module evaluation as the platform on which AQR was based, describing module reports as 'reflective' and designed for quality enhancement as well as assurance. Evidence from the DATs demonstrated that this aspect of the University's annual review processes was undertaken in a systematic and satisfactory manner.

42 Module evaluations are used as part of the key evidence in the compilation of programme-level AQRs. Each course or programme is reviewed either individually or as part of a related group. A standard Course/ Programme/ Portfolio Review Form is used to record inter-

alia evaluations of the curriculum and its assessment, teaching and learning, student progression and achievement, student support and guidance, learning resources, and QSME issues. An action plan is also required together with a consideration of the action plan from the previous report.

43 The multiple titles used as the heading for the standard review form is indicative of some confusion encountered by the audit team at this particular level of AQR, much of which appeared to be a function of the recent transition from schools to faculties and the resulting changes in nomenclature which had yet to become standardised across the University. The team was told that programme-level review was mandatory but that subject-level review was considered as optional good practice. In reality, the team saw examples of effective annual review of both programmes and subjects and gained the impression that, at these levels, staff adopted the format which appeared to them to be the most appropriate for their particular area or discipline. There is much to applaud in this pragmatic approach, although the University, as part of its intention to streamline QSME systems, may wish to review this level of its AQR processes to ensure that there is no unnecessary repetition of effort.

44 From the evidence considered by the audit team, faculty AQR reports drew appropriately on the previous stages in the process with issues being drawn out and discussed where they were clearly of significance across the relevant faculty or had institutional implications. An action plan was included in all faculty AQRs as were summary statistics on recruitment, progression and graduation. The reports dealt with the general issues raised by both external examiners' reports and student feedback. In the view of the team, these reports represented a good evidence base from which the MSC could monitor the management of quality and standards in the faculties.

### **Programme review**

45 The University's systems include the periodic revalidation of all academic programmes on a six-yearly basis. The process

used for such revalidations is essentially the same as for initial validation and, from the evidence considered by the audit team, is operated in a similarly efficient manner.

46 The University's other substantial process for the periodic review of subjects and programmes is Internal Academic Review (IAR). Approved in 2002, IAR is subject-based and has a strong focus on quality enhancement. It is intended to review each subject group in the University on a six-year cycle. Conducted by a panel which includes external and student representation, the review is initiated with a commentary prepared by the staff in the area under review and based on previous AQR reports. The essential business of the review is a discussion between the subject staff and the review panel that is intended to facilitate the staff's own evaluation of their subject strengths and potential areas of development. A commentary on the review and an action plan, are agreed between the subject leaders and the coordinator of the IAR for publication on the Teaching Quality Information (TQI) website.

47 Although the initial approval for IAR was given in 2002, the University delayed its implementation until 2004 in order to develop a detailed methodology which could be informed by both QAA developmental engagements and the University's own School QSME Systems Reviews. Five IARs were then scheduled for 2004-05 of which the audit team was able to see reports of the three which had been undertaken at the time of the audit. Although in the team's view it is too early to form a conclusive judgment on IAR, the reports which it considered demonstrated the willingness of staff to engage in the developmental aspects of the process: in particular, the staff commentaries were generally open, direct and evaluative. In the view of the team, the public reports generated by the review of those commentaries for inclusion on the TQI website were, perhaps unavoidably, written in a less direct register. However, in one case the reliability of the information proposed for publication on the TQI website was questioned by the team (see below, paragraphs 123, 162)

### **Other review processes**

48 The University's QSME Framework also contains a number of other review mechanisms. Internal Thematic Review (ITR) is a process originally included in the QSME Framework to enable the University to address cross-cutting issues related to quality and standards. The SED described how one of the outcomes of the School Quality Systems Reviews in 2003-04, which scrutinised the University's learning infrastructure, was a determination that ITR should not become a routine part of QSME activities but should only be deployed where cross-cutting issues could not be addressed adequately by other review methods. At the time of the audit, the QSME Steering Group had considered a paper outlining the methodology for ITR but, as yet, it has not been presented for approval to ADC or Academic Board.

49 Another review method, which the University would only deploy in cases where other QSME processes had demonstrably failed or were otherwise inappropriate, is Internal Academic Audit (IAA). The catalyst for an IAA is relatively focused and relates to the discovery of a quality or standards failure by an external body which had not been identified through normal QSME processes, or a failure to remedy or manage properly an identified weakness in quality and standards within a reasonable timescale. ADC and Academic Board have approved the detailed methodology for IAA.

50 Given that neither process has yet been used by the University, it is not possible for the audit team to make any comment on their operational effectiveness. It did appear to the team, however, that the University had in place two methods of dealing quickly with identified weaknesses in quality and standards. In its SED, the University identified the potential for overlap and duplication in its QSME Framework, and the need to avoid 'incremental complexity in the design of QSME systems'. While ITR and IAA have different emphases, the University might thus wish to consider whether those differences are sufficient to warrant the two separate processes.

51 A similar comment might also be appropriate in the context of the planned triennial review of faculty QSME systems. This process was developed from school QSME system reviews and is intended to test the management of quality and standards in faculties. Comment has already been made above (see paragraph 34) on the successful school QSME system reviews conducted in 2003-04 which made a positive contribution to the approval of faculty QSME systems in September 2004. Those faculty systems would presumably be due for a triennial review in 2007. However, the University may wish to reflect on whether its current faculty AQR process could not be extended in a modest fashion to give the University assurance on an annual basis that the management of quality and standards was sound.

52 The University Quality and Standards Profile occupies a significant position in the overall QSME Framework and is considered by the University as a key output from its QSME processes. The Profile is compiled annually by the Registry and MSC, considered by the ADC, and finally received by Academic Board. It is an extensive document which provides systematic internal and external evidence on the quality and standards of the University's programmes. It contains reports on the outcomes of all external reviews, and the findings of all internal annual QSME reports including the faculty AQRs. A set of appendices lists the evidence used to compile the Profile, an action plan derived from the information contained in the Profile, and an appropriate statistical digest. The audit team noted the range and coverage of the Profile which appears to provide an invaluable source of evidence on quality and standards matters to Academic Board. The Board, in 2004, considered the Profile in detail in workshop sessions and expressed the wish that it should be further developed for quality enhancement purposes and to feed more directly into the University's planning processes. Despite these future intentions, the team considered that the current comprehensive nature of the University Quality and Standards Profile, and the way in which it enables Academic Board to fulfil its

remit to monitor quality and standards, to be a feature of good practice.

### **External participation in internal review processes**

53 The SED noted the University's 'longstanding commitment to the involvement of people from outside the University in the planning, approval, monitoring and review of provision'. External peer review is recommended as part of the initial course planning process but external participation is mandatory at the point of validation for each USP or faculty-based validation panel. The nature of the experience of the external peers, for example, the balance of academic and professional expertise, is considered and regulations are in place to avoid the appointment of any external who has had significant and recent contact with the University. The range and provenance of external peers involved in the validation process is analysed in some detail in the annual Validation Report presented to ADC and the Academic Board. External participation is also mandatory in the University's major periodic review process, IAR, with an emphasis on appointing external peers at the discipline level to take particular responsibility for the evaluation of the standards achieved by students.

54 The audit team was able to confirm the systematic use of external academic and, where appropriate, professional peers in the University's approval and review processes. The team noted that external membership was not a feature of the proposed ITR and IAA processes. The University may wish to consider whether including such an external perspective as a norm might enhance these processes and confirm its already effective and methodical use of external participation.

### **External examiners and their reports**

55 The SED identified the University's commitment to ensuring that external examining continues to play its vital role in the establishment and maintenance of academic standards. It stated that the University operates 'fully in accordance with the good practice

articulated in the *Code of practice* [published by QAA] and that associated processes are closely monitored, reviewed and reported on annually. External examining procedures and regulations are contained in the University external examiners Handbook. An External Examiners Working Group meets as required and proposals for significant developments are sent to relevant University committees for approval. The appointment of external examiners follows clear and appropriate criteria for proposal and approval, with formal consideration given at faculty level and finally by the Director of Registry on behalf of Academic Board. The Academic Registry maintains a detailed and effective information set relating to over 400 external examiners. Reports from external examiners are scrutinised both locally and at University level. Written responses to their reports are sent from the subject/faculty level and from Academic Registry in relation to University level comments. An overview of external examiner reports is generated locally for formal consideration and also for faculty monitoring and review processes. The Registry also produces a University level overview. Key features from these overviews are sent upwards to Monitoring Sub-Committee and some are included in the annual University Quality and Standards Profile.

56 The University has introduced mandatory training for external examiners from 2004-05. The well-established annual Forum facilitates external examiner feedback across the University at a one day staff briefing session which provides a 'useful communication medium and opportunity for sharing views'. The forum will in future be held less frequently, possibly on a triennial basis. The audit team was able to see at subject and University levels the strong engagement with the requirements of the External Examiners Handbook and, implicitly, the *Code of practice*. External examiner reports are considered locally through AQR and other processes and the subject areas respond effectively to comments received. The team heard of the beneficial informal interactions with external examiners through such events as Examination Board discussions, visits to student presentations and the annual Forum. An example

of the institution level response to external examiner comments was the rapid development in 2004 of modifications to the Honours Classification Regulations which had been applied at Assessment Boards in summer 2003. The team concluded that there was evidence of the effective use of external examiners in respect of standards and academic development.

57 The role of Registry in responding to issues raised by external examiners is commented upon in the SED and includes information that 'the external examiners' annual report is reviewed simultaneously by the Faculty, for issues to be addressed at Faculty level, and by Registry who follow up any significant issues raised'. The audit team saw and heard evidence of a lack of coherence in the University and local responses to external examiners' reports. For example, subject area responses had been followed by Registry responses some months later (see below, paragraphs 133, 143). The External Examiner Handbook (2004) has a more detailed process under the new faculty model than under the old school model. Nonetheless the team consider it is desirable for the University to review the internal processes for responding to the reports of external examiners to avoid the potential for duplication and ensure timely responses.

### **External reference points**

58 The SED systematically identified the elements of the Academic Infrastructure and the associated monitoring and review mechanisms that are in place at University level to ensure their embedding into the QSME Framework and their routine adoption by staff. The mechanisms to take account of the requirements of other external agencies are identified, together with the associated annual reporting processes. Monitoring the continual adherence to and effective use of external reference points 'relies on a variety of different checks', including the Faculty QSME requirement to ensure practice aligns with the Academic Infrastructure. These checks are systematically drawn together on an annual basis to inform the University Quality and Standards Profile. In the new Faculty system,

the Faculty Quality System Review and IAR programme explicitly check engagement with external reference points. The new course planning and validation includes a requirement for course teams to take into account University frameworks and national developments and a requirement for 'External Examiners and external members of validation panels to explicitly assess the way that external reference points are used at subject level'.

59 The audit team was able to scrutinise University level and local engagement with external reference points and although there was some localised evidence of limited implementation (see paragraphs, 114, 121, 140) there was generally effective engagement with the Academic Infrastructure by the University. This engagement includes implementation within QSME systems; the annual review processes; the arrangements for the approval of new programmes; the University Quality and Standards Profile; and the receipt and consideration at University level of the reports of professional, statutory and regulatory bodies.

60 While the University's approach to the *Code of practice* was generally appropriate, the audit team noted some issues with respect to the *Code of practice, Section 6: Assessment of students*. The SED described that during 2003-04, the Assessment Working Group had reviewed coursework and feedback management. In discussions with staff, the audit team heard that a three-week turnaround period was considered the University norm. However, the students' written submission (SWS) identified a concern about the University's 'approach to the turnaround of marked work'. In the DATs the team learnt of different practices regarding the time taken to return student work (see below, paragraphs 108, 117, 129, 134, 144, 151). The team formed the view that the institution may find it desirable to review its practices with regards precept 12 of the *Code of practice, Section 6: Assessment of students* and consider the implementation of clear University guidelines for the timely feedback on assessed work to students.

61 The audit team enquired about extensions to student coursework submission deadlines.

Staff tentatively identified that there were new procedures this year which need longer to embed and that the University is looking to make the difference between extenuating circumstances and late submission clear and will review the matter at the end of the year. The team considered that the University may find it desirable to review practices for precept 5 of the *Code of practice, Section 6: Assessment of students* and keep under review University policy and practice in the consideration of extenuating circumstances and the granting of extensions to assessment deadlines to ensure consistent implementation at the local level.

### **Programme-level review and accreditation by external agencies**

62 Since its last audit in 2000, the University has had three subject reviews all of which resulted in approval of the quality of education in the relevant subjects. In all cases, aspects of provision were judged to be making a full or substantial contribution to the attainment of the stated objectives. In the same period, that part of the University's provision subject to Office for Standards in Education (Ofsted) inspection has also been graded as 'good' or 'satisfactory'. Although it does not prescribe the ways in which external reports are considered at faculty level, the University requires faculties to produce an action plan for each report which addresses any recommendations or areas for development. The MSC considers both the external reports and the accompanying action plans with the intention of monitoring any institutional-level issues which may have arisen. In the SED, the University noted that this process was not yet fully embedded for Ofsted reports although action was in hand to bring the consideration of such reports into line with its standard practice.

63 The SED also stated that, given the University's intention that its provision should be vocationally relevant and its students highly employable, professional, statutory and regulatory bodies' (PRSB) reports were 'of key importance to the establishment and maintenance of [its] academic standards'. The audit team thus took particular note of the University's process for considering such reports.

At the time of the audit, the University had almost 200 courses accredited by nearly 60 PSRBs. In line with its normal practice, faculties produce action plans related to PSRB reports and MSC scrutinises both the report and the action plan. In addition, an annual report on PSRB activity is produced by MSC and incorporated into the University Quality and Standards Profile. The team noted the inclusion of a regular item on the agenda of the MSC dealing with PSRB reports, and the minutes of the committee provided evidence of the detailed way in which it examined reports. The annual report was also a useful summary of all PSRB activity in the University covering the cross-institutional themes which had emerged. The team formed the view that the way in which the University receives and considers at institutional level the reports of PSRBs is a feature of good practice.

### **Student representation at operational and institutional level**

64 The SED stated that 'there are comprehensive consultative processes [with students] at all levels in the University'. There is student representation on the Board of Governors, Academic Board and its subcommittees, and on faculty committees and faculty boards. Students take part in regular staff-student liaison committees (SSLCs), 'typically by course and year' to 'communicate student views to the course team...discuss plans of action for the course and report back to the student body'. Briefing and induction are offered to prepare student representatives for their role, and both the SU and the University encourage participation through the Hallam Award, which recognises student volunteers. The University monitors the effectiveness of its student representative system 'via annual monitoring of the Academic Board and its sub-committees'.

65 The SU, with University support, recently undertook a review of the student representative system (SRS), as a result of concerns within the University that student representation could be made more effective, and that student 'engagement with the representative structure is variable'. This review concluded that the SRS was 'well received' by students but operated variably

across schools. In response, the SU and University enacted a 're-invigoration' of the SRS in the new context of faculties, including the creation of faculty representatives and student representation on the IARs. The University has had a system of student representative liaison officers (SRLOs) at school level for a number of years. The SLRO will now operate in each faculty to act as a point of contact and support for student representatives although currently these plans are delayed.

66 Evidence from the SWS suggested that students are content with the opportunities available to them to comment on the education they receive while at the University. The SWS noted that students rate highly the opportunities for an 'informal chat with staff' in addition to the formal routes offered through the student representative system, module evaluation system, and Student Experience Survey.

67 In its discussions with students and staff the audit team found broad confirmation for the SED and SWS statements about the effectiveness of student representation at the University. It formed the view that the SRS was generally working effectively, with appropriate opportunities for student involvement in decision-making processes. Examples were offered of changes made to the student experience as a result of student representation, for example the provision of more notice-boards and improved access to computers in the Learning Centre (LC). SSLCs meet typically twice each year and feedback is given to students on actions taken, through the minutes of these meetings. The team did, however, note that attendance of student representatives was sometimes patchy. The team supports the efforts of the University, in partnership with the SU, to further improve the SRS. The team noted the commitment of both staff and students involved in the SRS and the positive partnership clearly in existence between the University and SU.

### **Feedback from students, graduates and employers**

68 The University seeks the views of its students through a number of mechanisms, including an annual Student Experience Survey

(SES), module questionnaires, participation of student representatives in SSLCs, year cohort meetings, and 'informal staff student contact'. The wide-ranging SES, increasingly conducted via the University's virtual learning environment (VLE), leads to a detailed annual report, the results of which feed into the annual Institutional Quality and Standards Profile, and are analysed and acted upon by the relevant levels of the University. Research students' views are sought via the annual Research Degree Monitoring exercise. Distance Learning students complete a separate SES, and their views are sought additionally through other means, for example, by telephone or email or a virtual distance learning programme committee. The LC, Communication and IT Service (CIS) and Student Services Centre (SSC) also undertake user surveys, and these are increasingly coordinated with the SES and delivered through the University's VLE, which is becoming the primary means for communication of the survey to the University's students.

69 The audit team was able to confirm that student evaluation at module level was conscientiously performed, however, there did not appear to be a mechanism for feeding back to students actions resulting from module questionnaires. Despite this, SSLCs did ensure that in general actions resulting from issues raised by students were fed back appropriately to the students concerned. The team formed the opinion that the SES is a thorough and useful instrument for systematically gaining the views of students across the University; results are widely disseminated across the University electronically, they feed through into the University Quality and Standards Profile and are considered at committee level; and staff and students could point to examples where student concerns voiced through the SES had led to changes, for example, in increasing provision of computers in the University's Atrium.

70 The University runs an Alumni Association, offering opportunities for further study, access to the University's facilities and coordinating contact between graduates. There is evidence in parts of the University that the staff make use

of feedback from graduates to inform course developments, although the audit team could discern no University-wide expectations or framework to guide staff in this area.

71 The SED stated that the University 'profits from a great variety of contacts with employers', noting links formed during work placement, student projects, course planning and development, Knowledge Transfer Partnerships, and work conducted by the Enterprise Centre and the Careers Service of the University, among others. Some faculties and subject groups operate employer forums, policy committees or advisory panels. Some had consulted employers over the restructuring from schools to faculties. The SED noted in respect of employer involvement that 'the diverse nature of this activity means that it is difficult to judge the scale of employer involvement and to monitor its outcomes and effectiveness'. The audit team noted the University's intention as expressed in the SED to 'conduct some initial mapping within and across faculties' to this end.

## **Progression and completion statistics**

72 The SED explained that the University operates a corporate Student Management System to store and process statistical information. The University's ambition is that this corporate system will eliminate the need for local student information systems. The data generated form a key component of the University's annual review process, at course level in the Course Annual Quality Review Reports, at faculty level in the review by FABs, and at University level in the annual University Quality and Standards Profile, considered each year by Academic Board.

73 In its meetings, the audit team heard evidence that the University's ambition to phase out local information systems is succeeding. The University itself recognises the difficulty in doing so in a large and complex organisation, which offers its students flexibility in start dates, in transfer between courses, and mode of delivery. In the SED, the University described a number of issues which remain to be addressed in fully meeting its ambitions. These include placements, assessment for courses whose practical

arrangements vary between individuals and timetabling requirements. The team appreciated the difficulty of managing a corporate information system, but given the importance of ensuring the quality of individual student experience, would nevertheless encourage the University to continue the development of its Student Management System system.

74 The audit team considered that, while the process was an ongoing one, the University was engaging effectively with the management of data on admissions, progression and completion.

### **Assurance of the quality of teaching staff, appointment, appraisal and reward**

75 The University has a comprehensive HR Strategy, updated in March 2005 to incorporate a strategy for rewarding and developing staff. The strategy also makes provision for a leadership development programme, in partnership with the Leadership Trust, for its most senior 150 leaders to facilitate the development of effective management teams for the new University structure.

76 The University's system for recruitment, appointment, induction and mentoring of new academic staff is well-documented in the Staff Handbook and the Managers' Guide to Human Resources Policies and Procedures. Both documents are readily accessible through the staff intranet. Existing staff who participate in selection procedures receive appropriate training through the HR department and each faculty has a designated HR officer, working for the executive dean, to provide support and guidance. The initiatives to integrate more effectively the procedures for regular visiting or associate lecturers have resulted in a dedicated set of guidelines and procedures for the employment of associate lecturers that reflect the University's policies on induction and mentoring.

77 The SED stated that staff appraisal is an entitlement. The Managers' Guide to the University Appraisal Framework reflects the guidelines for staff appraisal approved by the Vice-Chancellor and Executive in 1999 and implies that it is a requirement for all staff. The

framework enables faculties, adopting their own system of documentation, to encompass the broad principles of a system whereby all staff will have an appraisal at least once per year, resulting in a personal development plan and a set of objectives which align their work to the University's broad strategic objectives. During the visit the audit team could not find evidence for the consistent application of the policy on staff appraisal. Evidence from the meetings demonstrated that not all teaching staff have appraisal meetings and that the method and coverage of appraisal can vary between faculties. As currently applied it is neither a mechanism for the assurance of teaching quality in the University nor for the consistent identification of staff development needs (also see below, paragraph 86).

78 The academic staff role descriptions produced by HR identify research, teaching and learning and course administration as core responsibilities. These definitions are used in the Academic Work-Planning meetings conducted between academic staff and their line managers whereby workload allocations can be made in a clear, fair and transparent way. The meetings also provide an opportunity for staff development needs to be identified but as the SED stated, there will be local variation in the implementation of work-planning. The project is in its first year of operation and the SED anticipated a revised system for implementation in 2005-06.

79 Although the processes for promotion for academic staff are clearly understood, the staff experience surveys for 2003 and 2005 reveal consistent dissatisfaction with the opportunities for regrading and promotion. The University operates a scheme of Learning, Teaching and Assessment (LTA) fellowships whereby recognition can be given to individuals who demonstrate good practice and innovation in LTA.

80 The audit team concluded that the University's policies and procedures for the quality assurance for the appointment, appraisal and reward of teaching staff was generally effective, although the team had some concerns about the consistent implementation of the appraisal system across the University.

## **Assurance of the quality of teaching through staff support and development**

81 The Learning and Teaching Institute (LTI) within the University is instrumental in the enhancement of teaching and a central source of support for both academic and administrative staff. It has a critical role in the development and coordination of the LTA strategy across the University. Using funding from the Teaching Quality Enhancement Fund, CETL and Fund for the Development of Teaching and Learning (FDTL) projects, the Institute enables the sharing and dissemination of good practice across the academic community. This approach is complemented by corporate events hosted by the LTI, for example, the annual LTA conference and internal staff development events. The audit team learnt that training in the use of the VLE was welcomed by staff.

82 Despite the contribution made by the LTI to the enhancement of teaching quality, the procedure for the identification of staff development needs in this area is not consistent throughout the University and various mechanisms are employed. The QSME Handbook states that individual members of staff normally identify their own development needs. The identification of development needs may also be identified through student evaluations or in relation to comments from external examiners at module and/or course level. Informal processes, such as Work-Planning, may also be used to this effect or peer review of teaching where it is practiced, although evidence from the institutional meetings indicated that peer review is not mandatory for all teaching staff.

83 The faculties have budgets for staff development that can be devolved to subject or programme leaders to respond to staff requests for development activities. The emphasis is on enhancement of teaching and learning through the activities of the LTI. These are supplemented by University-wide initiatives such as the Research Supervisor Development Programme.

84 The University offers its academic staff the opportunity to register for or participate in the

Postgraduate Certificate in Teaching and Learning in HE (PGCTLHE) or the Professional Doctorate in Education (EdD) programmes. Figures supplied by the University during the audit visit show that 9 per cent of the total teaching staff either hold or are currently registered for the PGCTLHE and that eighteen individuals, including staff from Central Departments are registered for the EdD.

85 Evidence from the meeting with staff associated with research and research degrees indicated diverse practice between faculties in terms of the nature and extent of the teaching duties assigned to graduate or research students. There was no evidence presented to the team to show that a systematic approach operates across the University other than the entitlement for such students to participate in the PGCTLHE programme (see below, paragraph 96).

86 In November 2000 the ADC had approved the development of a University Peer Observation of Teaching Scheme which has evolved into the Peer-Supported Review of Learning, Teaching and Assessment. This is currently at different stages of establishment in the faculties, despite the framework document presented to Academic Board in April 2004 outlining that all faculties would operate the scheme in the 2004-05 academic session. The audit team learnt from meetings with staff that peer observation of teaching is not implemented universally. The guide for staff stated that each member of the teaching staff will undergo peer review but will identify a colleague to act as reviewer themselves. This approach to peer review whereby those engaged in it may select a preferred reviewer could also present a potential weakness in the process. The inconsistent and incomplete application of both staff appraisal (see above, paragraph 77) and peer supported review of learning, teaching and assessment could result in issues of teaching quality being overlooked. The audit team considered that the mechanisms to assure the quality of teaching are neither secure nor applied consistently. The University may find it advisable to reassess how the staff appraisal and peer-supported review of

LTA systems might be more effectively used for the assurance of teaching quality in addition to the enhancement of teaching standards.

### **Assurance of the quality of teaching delivered through distributed and distance methods**

87 The SED stated that the University seeks to ensure the quality of its distance and distributed learning through particular tailored approaches. Staff are assisted in the development of flexible and distance learning (FDL) course materials by the Learning and Teaching Institute (LTI). At validation, those proposing an FDL course must present one module in full, a skeleton outline of a second, and details of the remaining modules in order to secure approval. Assessment for FDL programmes must conform to the University's Criteria for Assessing Quality and Academic Standards: Additional Criteria for Assessing Quality and Standards of Distance Learning Provision. In 2004 the University audited its practice in respect of FDL against the revised section of the *Code of practice, Section 2: collaborative provision and flexible and distributed learning (including e-learning)* by means of a working group which has made recommendations.

88 The University is increasing the use of e-learning as part of a blended approach to learning, teaching and assessment. It started a project to expand and embed use of e-learning in 2000, and systematically reviewed progress and impact in 2002. It has adopted a VLE and provided training and development opportunities for its staff. The audit team found clear evidence of a systematic approach to assuring the quality of FDL programmes. The University's QSME Handbook states that FDL programmes must meet in full the standard academic course approval process, in addition to a number of other criteria.

89 The audit team was satisfied that adequate arrangements were in place to monitor and review FDL provision. In its discussions with staff and students the team was satisfied that the University's procedures for validating FDL provision were effective and that a positive student experience was achieved.

### **Learning support resources**

90 The learning support resources are primarily located within the LC and the CIS. These central service departments work with the Facilities Directorate (FD) to plan the future provision of learning resources. A joint CIS/LC executive has been established to facilitate the convergence of CIS and LC. The intention stated in the SED is to create a single entity that has the potential to lead innovation in learning, teaching and research across the University. The strategy for learning resources is driven by the academic agenda and articulated within the Corporate Plan 2003-2008 with its attendant key performance indicators. In the view of the audit team this approach is likely to secure improvements and expansion of facilities, on both the City and Collegiate campuses, to create a modern and efficient learning environment for the students.

91 The SED stated that the LC provides a high quality integrated learning environment bringing together a range of information resources including learning materials, equipment and support personnel. Recently the LC has focused more on the provision of electronic resources partly in response to changing student expectations. The LC provides extra support for student learning, including study skills; a distance-learning support service for students on more flexible modes of study; and assistive technology and dedicated support for students with special educational needs. Various self-service options such as issuing, renewing and reserving books and materials are also available. Students had mentioned that quiet spaces for study were sometimes lacking in the LC but with the help of LC staff more specific areas for group work had been created.

92 The University has made a significant investment in the upgrading of the information technology network as part of its Corporate Plan strategy. There are PCs for academic use across the University including those in the LC, open access areas and social spaces. The number of classrooms with PCs and data projectors has increased and specialist workstations and software are available to meet

specific needs of students. Though some concerns were expressed regarding access to computers at peak times, the students met by the audit team stated their satisfaction with the range and extent of information technology provision and the SES supported this view.

93 As part of the University's development of blended learning it is examining the way in which virtual learning facilities can be made available off site and in student residences. Pilot schemes are running in respect of wireless access and plug in points for laptops. Currently the usage of the VLE is variable across programmes but it is envisaged that its development will enable the learning environment to be further driven from the student perspective in terms of the time, pace and place of learning. Increasingly the VLE is being used as an effective means of communication with students with the intention of developing a student portal able to act as a personalised information resource. The audit team formed the view that the University's use of its VLE, both as a pedagogical and communications medium, and the plans for its future development was a feature of good practice.

### **Academic guidance, support and supervision**

94 The CPIP Project: Consistency and Good Practice in Student Support, was charged with the responsibility for reviewing student support. The Project took as its starting position that the University has an excellent position in student support demonstrated through a range of internal and external measures and benchmarks. The outcome has been the development of a student support framework which encompasses the whole student life cycle from pre-entry through course membership to post graduation. It recognises the diversity of the University's students alongside the variety of learning opportunities offered to students as well as the evolving nature of support needs.

95 Support for students forms part of the LTA strategy and predominantly operates at the programme level. Given the diversity of programmes and students there is no uniform system in place across the University. Most

commonly, the year tutor is the first point of contact for matters other than those specific to particular modules. Where Professional Development and Review (PDR) is in operation the PDR tutor will often assume the role of personal tutor. Student handbooks clearly set out the systems for advice and guidance. A range of other information including notice boards and electronic sources supplements these. In discussions with staff and students it appeared that the eclectic methods of support worked to the benefit of students. Such formal methods for guidance were complemented by informal mechanisms that fostered a supportive and approachable culture. Students stressed the willingness of staff to offer help to groups or individual students outside of the formal structures and welcomed the open door policy of many staff. Students also commented favourably on the use of electronic facilities, including the VLE, as a way of providing them with necessary advice and programme information.

96 Support for research students addresses the revised *Code of practice, Section 1: Postgraduate research programmes*. Each faculty and research institute has a head of programmes to provide appropriate academic and administrative support. He or she provides pastoral support independent of the primary supervisor. Research students receive induction at both University and faculty level. The annual academic monitoring of research students was conducted in tandem with students' evaluation of their own progress. However, the application of this process was not always consistent and the University may wish to address this issue. There is no such systematic support for students on postgraduate taught courses. Support is spread across the course leader, dissertation supervisor and administrative staff. This can be effective where student numbers are small but has led to a perception among some students that the absence of a standardised approach may lead to their needs being overlooked. The CPIP project, support for Postgraduate Taught Processes, recommends a closer alignment of the support for taught postgraduates with the relevant *Code of practice* and the audit team would support this advice.

97 Academic support at programme level is enhanced at the central level by the Education Guidance Service (EGS). This is available to all students who want further advice. Intensive support in mathematics for local students wishing to study at the University is provided, as is a summer orientation course for mature students. The Disabled Student Support Team (DSST) is the focal point for provision of learner support for students with disabilities and successfully coordinates the implementation of the Special Educational Needs and Disability Act (SENDA). The audit team considered that the University has a comprehensive system of learner support which facilitates the meeting of its Widening Participation benchmarks. Students met by the team were appreciative of the learner support available to them. The team concluded that academic support and guidance was appropriate and effective.

### **Personal support and guidance**

98 The Student Services Centre (SSC) is the central provider of student support in the University. The SSC oversees a wide range of services available to students. Students are directed to support appropriate to their needs by the Initial Advice and Guidance service. The SSC works closely with the SU. The SU Advice Centre has four advisers and complements services provided within the SSC particularly academic, financial support and counselling services. The SU Advice Centre received 6,000 visits in the academic year 2003-04 which helps to confirm the generally held student view that there was sufficient non-academic support available to them.

99 Increasingly the employability of students is a strategic objective of the University. A Framework for Employability approved by Academic Board seeks to integrate enterprise and career management into course planning. The University has succeeded in a CETL bid entitled Embedding, Enhancing and Integrating Employability while its Enterprise Centre has received funding to support and disseminate best practice in creativity, innovation and risk taking in curriculum development. The LTI is

engaged with many of these initiatives and plans to use the momentum gained from the successful CETL and FTDL bids to further develop career planning and autonomous learning within the curriculum. An example of social enterprise engaged in by students is the Hallam Award which has been introduced by the University to give recognition to voluntary work.

100 The University supports both within faculties and by the SSC International Office and the Learner Support Team (LST). SSC support is provided in the form of pre-arrival information packs, a 'meet and greet' service, orientation events as well as help with accommodation. The University recognises that there can be substantial learning and cultural issues for international students. The LST of the SSC works with students and programme teams to develop the skills needed to enable international students to become effective learners but indicated support could be variable at programme level. The SES and the SSC Annual Review inform the Institutional Profile on the experience of international students. Given the developing international strategy, the audit team encourages the University to continue to monitor international student performance so as to assure itself of the consistency of the student experience.

101 In 2002 SKILL carried out an audit of the University's support mechanisms for disabled students in the light of the requirement of the *Code of practice*. The report indicated that excellent service was provided by DSST and that the University has a strong commitment to providing access and equality of opportunity for disabled students. A significant development has been the appointment of a Mental Health Coordinator charged with supporting students with mental health difficulties and raising awareness of mental health issues.

102 It was clear to the audit team that the University had made a serious commitment to student support. The available evidence indicated that such provision was effective in its intent and moreover there was a willingness to seek further improvement.

## **Section 3: The audit investigations: discipline audit trails**

### **Discipline audit trails**

103 In each of the selected DATs, appropriate members of the audit team met staff and students to discuss the programmes, studied a sample of assessed student work, saw examples of learning resource materials, and studied annual module and programme reports and periodic school reviews relating to the programmes. Their findings in respect of the academic standards of awards are as follows.

#### **Built environment**

104 The scope of the DAT focused on programmes leading to awards of Certificate in Planning Studies; BA (Hons) Planning Studies; Diploma In Town Planning; Master in Planning; Master in Planning and Transport; MSc Urban and Regional Planning; and three courses: the Postgraduate Diploma in Urban and Regional Planning; the MA Urban and Regional Planning; and the MA Urban and Regional Planning (Transport). The DSED, written to a common template for the audit, had an emphasis on descriptive commentary with appended progression data, course AQRs and action plans. The programme specifications were clear and articulated well with *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ), the subject benchmark statement, the PSRB requirements and the intentions of the relevant section of the *Code of practice*.

105 Because of University practice, evaluative review is carried out annually and records filed by module. The audit team found full records for the programmes and evidence of a reflective engagement by staff with the process. The issues arising at module level are taken up at team reviews, at which there is student representation. Quality issues arising from reviews are addressed to the Head of Quality and Enhancement in the faculty and the faculty QSME Committee while resource issues go to the head of division. These reflections also inform the course annual quality

reviews and their associated action plans. The team found that staff were operating effectively the procedures of the University and faculty QSME systems in respect of annual review.

Progression and completion data were used by the team for recruitment purposes and for professional body returns but no evidence was presented to show that the data were used to monitor quality and standards.

106 The audit team was able to review the external examiners' reports on modules and the separate responses made both by the course leader and the Director of Registry. The reports expressed general satisfaction with the course content, course documentation and the standards of assessment. Evidence from the module files indicated that the Town Planning teams responded promptly and effectively to issues raised by the external examiners.

107 The audit team was able to review a sample of assessed student coursework from the module files and found evidence of both the use of an appropriate range of assessment instruments and articulation between the documented learning outcomes and the FHEQ. The team concluded that the standard of student achievement is appropriate for the title of the awards and their position in the FHEQ.

108 The University's LTA Strategy informs the development of a Faculty LTA Strategy which, in conjunction with the appropriate Programme Specifications, informs the LTA strategy at course and module level. The students are informed of generic threshold assessment criteria and receive assignment specific criteria through module documentation. The University Assessment Regulations are applied to the marking and moderation of student work. The feedback to students on assessed work was both formative and summative and the staff confirmed that they attempt to provide feedback on examination performance when it is sought by students. The audit team however found variable practice in the timing of the return of assessed work. This was confirmed in the meeting with students who reported some long delays between the submission deadlines and the return of assessed work with feedback.

109 The student handbooks, whether for overall programmes of study or individual modules, were found to be comprehensive and detailed. The learning and assessment expectations were clearly expressed, including deadlines for assignment submissions, and, in general, detailed timetables and learning support guidance were provided. Copies of the handbooks were also accessible through the VLE. The SSLC meetings were also a vehicle for the communication of more general information, such as the procedures for dealing with extenuating circumstances. The evidence from the meeting with students showed that the information they are provided with is appropriate and that the handbooks in fact had improved in recent years.

110 The Town Planning students benefit from specialist facilities such as a resources room and dedicated computer suites. The resources for learning are evaluated through the SSLC Meetings and the institutional student experience questionnaire. Evidence from the minutes of the SSLC Meetings highlighted an accommodation issue that had arisen in December 2003 and was postponed for resolution until the academic session 2004-05. The lag in response time was noted by students as a concern. Otherwise the students expressed a high level of satisfaction with the library facilities, resources and loan practices, the availability of group-work rooms in the Adsetts building, their dedicated computer facilities and the VLE. The latter is used proficiently for course materials, to assist student representatives in communicating with their peers and to disseminate information, including the minutes of the SSLC meetings.

111 The audit team found that the Town Planning staff were considered to be very approachable by students, accessible via an open-door policy, email or in some cases mobile phone. Students were clear who course leaders and personal tutors were and their respective roles in providing student support. A system of student peer mentoring has also been introduced in 2004-05 as a pilot to further enhance the support structures.

112 Peer-Supported Review of Learning Teaching and Assessment has not yet been introduced. Staff monitor their own development needs, in addition to which RTPI members will have professional Continuing Professional Development requirements. The operation of staff appraisal provides an opportunity for development needs to be addressed. Staff are encouraged to participate in the PGCTLE and EdD.

113 The audit team concluded that the quality of learning opportunities available to students is suitable for the programmes of study leading to the named awards above.

### **Business and management**

114 The scope of the DAT covered the BA (Hons) Business Studies (BABS); the BA (Hons) International Business Studies (BAIBS); the MSc Human Resource Management (HRM); and the MSc Marketing Management (MM). The DAT was supported by a DSED which consisted of an overview commentary of Faculty procedures for the maintenance of quality and standards supplemented by the AQR. The programmes reflect the University's level descriptors and are aligned with the FHEQ. The curriculum, which reflects appropriate benchmark statements, is based on a core of modules supported by a range of options and demonstrates coherence and progression in its structure. However, programme specifications did not clearly link intended outcomes with assessment methods but discussions with staff offered assurance of their suitability. In general, the programme specifications and module booklets provided substantial guidance for students.

115 The AQRs use data generated centrally by the Student Management System but are selective in terms of what is considered. The available data indicate acceptable student progression and achievement on a par with overall University statistics. This data together with consideration of module reports and student feedback constitute an evidence base which indicates an effective AQR process. The strength of the AQRs lies in their development of action plans to improve provision because of

issues raised in the annual monitoring process. The previous year's plan is formally considered to establish if actions have been completed. Although parts of the action plans are relatively minor in their impact, discussions with staff indicated a systematic and reflective approach to securing improvements to programmes resulting from the AQRs.

116 The audit team read the most recent reports from external examiners and noted that they met the recent TQI reporting requirements. External examiners' reports are considered as part of the annual monitoring process, and dependent on the issue raised, a response is forthcoming from an appropriate point in the University. At the faculty level the head of quality and enhancement ensures that a response is provided to all external examiners on any issues which are pertinent to programme teams. One such issue where steps are being taken to ensure compliance was the need to evidence internal moderation in the working of assessments at master's level. Examiners confirmed that the programmes were suitably challenging and that the standards of achievement by students as a whole were appropriate for the award.

117 The approach to assessment articulates well with the University assessment strategy. A variety of assessment methods are designed not only to evaluate student achievement but also to support learning. The audit team saw examples of assessed work from all programmes covered by the DAT. Work was consistently marked against the assessment criteria and this was confirmed by external examiners' comments. Feedback on written assignments was generally of a high standard and appreciated by students. The team learnt that academic staff were seeking further improvements in the consistency of feedback and the timeliness of its return to students. Overall, the team found the standard of student achievement to be appropriate to the titles of the awards and their location within the FHEQ.

118 Student handbooks are clear and provide students with the necessary information regarding both their programme and the

University. Module guides in particular support effective learning and identify assessment tasks and criteria. Students felt that induction packs and activities had helped them to settle into the University and particularly valued the access they had to staff to discuss matters both of an academic and personal nature. The general view expressed to the audit team by students about learning resources, including library provision and IT, was positive. Increasing use is being made of the VLE to support teaching and learning and to communicate with students. PDR had been developed to provide academic, pastoral and placement support for students. Staff indicated a sound system for support for students before and during their placement period and the students met by the audit team confirmed this. The overall impression gained by the team was one of a strong system of support for students.

119 Student feedback is principally secured through course committees, module questionnaires and the University's SES questionnaire. Students met by the audit team also felt able to raise issues of concern directly with their programme leaders and module tutors. All such information informs the AQRs. Students were able to give examples of how issues they had raised had been resolved and of consequential improvements for their own learning experiences. Student representatives sit on Course Committees and on the Faculty Board. They had received support and training for their role from the SU. While recognising that their views could be aired, students met by the team felt that feedback on actions taken could be improved.

120 Overall, the audit team concluded that the quality of learning opportunities available to students was appropriate to the programmes of study leading to the named awards above.

### **Computing**

121 The DAT covered four BSc degrees in computing and two MSc courses. The DSED was specifically produced for the audit, and addressed standard aspects of the quality of provision. It was supplemented by several appendices, including AQR Reports. The University also provided programme

specifications and external examiners' reports. The DSED itself appeared to the audit team to follow a prescribed template, and lacked critical reflection. The programme specifications were informed by the relevant *Subject benchmark statement* for computing. The programme specifications do not all contain references overtly to the FHEQ, but it was evident to the team that they are well aligned with the FHEQ.

122 The audit team was provided with AQRs. The standard format for these reviews is comprehensive, and requires the course director to address issues on all aspects of the course. There was clear evidence from the reviews that the University is able to assure itself of the quality of the academic standards of the degrees, and to monitor the quality of the student experience. An action plan is generated from the annual review, and from other inputs such as from external examiners and staff-student meetings. Progression and classification data clearly inform the annual reviews and the progression rates were judged satisfactory and appropriate by the audit team. The team considered that these procedures were thoroughly implemented, and materially improved the University's provision in computing. It was clear that staff are committed both to the quality of the students' experience, and to the maintenance of academic standards.

123 The University has recently instituted a system of IARs, and computing was one of the first four areas selected for review. The audit team found the internal report to be admirable in its consideration of the evidence available to it, and in the candour and intellectual integrity of the analysis in the report. The team however had some concern about the summary that the University proposes to publish on the TQI website, particularly omissions regarding written feedback on assessments and the loss of experience staff in key areas (see, paragraph 47, 162).

124 The audit team reviewed the reports of the external examiners, and confirmed that the examiners were generally approving of the standards of the awards in computing. The team also reviewed examples of assessed work selected across the entire spectrum of student

achievement. The team judged that the standard of student achievement was appropriate for the title of awards and their location in the FHEQ.

125 Information to students in the form of student handbooks and module information is well presented, is accurate, and is generally of a good standard. These, and other publications, are made available to students on the University's VLE, a facility that is much appreciated by the students.

126 In its meetings with staff and students, the audit team discussed the hardware and software resources available to students. Both students and staff described these as broadly satisfactory, but some issues were raised. Undergraduates expressed some concern that at times, they were unable to access computers that were designated for them, as students from other disciplines were using them. When discussing provision with postgraduates they raised some concerns about the quality of the hardware. The University may wish to reflect on the quality of experience it is offering its computing students in respect to both these issues.

127 In their meeting with the audit team, students described a range of experiences in their interaction with academic staff, and in the responsiveness of the University in meeting their concerns. Some academic staff were readily available and helpful, but this was not universally the case. The primary source of student support had been transferred from academic to designated administrative staff. In its meeting with academic staff, it was explained to the team that this had improved the support offered to students, for example by improving the consistency of the student experience: a small number of administrative staff provided support for a large number of students. Following discussions with students the audit team was not convinced that this practice served the best interests of the students and also it did not reflect the very positive interactions observed by the team between staff and students in other DATs.

128 The audit team was able to review the minutes of SSLC meetings. These provide a forum for the students to raise issues of direct

concern to them about their modules and course. It was evident from the minutes that discussions could, and did, fully explore issues that concerned students. The team saw examples where student views were directly taken into account in forming the action plan for the programme area.

129 In general, the quality of the feedback provided to students in the written work made available to the audit team was of a high standard. In discussions with students, however, there was some concern that work was not always returned by the dates given to students. Staff confirmed that this sometimes was the case, and explained that the requirement of double-marking made prompt feedback difficult to achieve on occasion.

130 Overall, the audit team found that the quality of the learning opportunities to be suitable for the programmes of study leading to the named awards above.

## History

131 The DAT covered the following programmes: BA in History; BA in Criminology and History; BA in English and History; BA in Film and History; MA Imperialism and History; and MA History: Imperialism and Culture. The audit team was provided with a DSED and commentary written specifically for the audit, and a detailed and evaluative annual review of the history programmes for 2003-04.

Programme specifications for the undergraduate BA in History and MA in History: Imperialism and Culture conform to the expectations of the FHEQ. The undergraduate programme specifications demonstrate that the *Subject benchmark statement* for history was taken into account in their construction.

132 The AQRs in history are detailed and thorough documents, and there is a clear process for integrating into the review student progression, achievement and employment data, external examiners' comments, and student feedback, as well as the University's own goals and agendas. Reports lead to action plans which form an integral part of the subject team's activities in the coming year. The course

teams employ progression and completion data to monitor quality and standards on the programmes of study through the AQR.

133 External examiners' reports are positive about the quality of the programmes under review, and note the variety of teaching techniques employed, the challenging nature of much of the assessment, the commitment to student support and guidance, the way in which the team's strong research profile informs teaching, and the thoroughness of the marking. In its discussions with staff and perusal of documentary evidence provided by the subject group, the audit team was able to confirm that external examiners' reports were considered in detail as part of the AQR; copies of resulting action plans were sent to external examiners; and that where issues of concern were raised these were responded to by the subject team in a full and timely manner, although the University-level response to external examiners was not always timely.

134 Assessment strategies are made known to students through a student course guide for each relevant level of the programme, a detailed and helpful assessment handbook, and through module handbooks. Most module handbooks contain the relevant aims and learning outcomes, although the programme aims and outcomes are not present in the course guides. Assessment on the undergraduate programmes is typically a mixture of coursework and examination, but also includes other approaches, such as group presentations, book reviews, reports, reflective pieces of writing, document analysis and research projects. Assessment on the distance-learning MA is by essay. There are robust protocols for internal and external moderation of assessed work. Feedback on assessed work was generally helpful and included advice on ways to improve, although some students seen by the audit team noted that it was variable in its quantity and quality. The subject team work to a three week turnaround of assessed work, which is generally, but not always, met.

135 The audit team reviewed a range of assessed student work. It was satisfied that the nature of the assessment and the standard of

student achievement were appropriate to the various named awards and their location within the FHEQ. External examiners' reports similarly demonstrated that assessed work matched their expectations.

136 Students benefit from a team of research-active staff who reflect regularly on their teaching practice and course curricula, and make use of University-based good practice in learning, teaching and assessment to hone their own methods. Lectures and seminars are delivered in appropriate rooms and the subject team are increasingly employing IT in the delivery and support of taught sessions. There is growing use of the University's VLE to support modules, a development appreciated by students. Library resources, housed in the LC, are generally sufficient. In discussion with the audit team, staff were able to describe clear mechanisms to ensure that adequate resources are made available in the LC, although some student feedback suggests they did not always work fully. MA students receive full paper-based course materials by post.

137 Students receive pastoral support and guidance and their attendance at classes and progress is regularly monitored. Students seen by the audit team commented positively on the accessibility and approachability of academic staff. Those students with experience of wider student support structures at the University, such as the Careers and Employment Service, disability support and study skills support were complimentary about the quality of the services provided.

138 Students evaluate each module by means of an end-of-module questionnaire, there is an annual SES conducted by the University, and undergraduate students send year representatives to a course committee that meets four times per year. MA students' views are invited at an annual seminar, supplemented by email contact from the course leader. Staff are responsive to student feedback and, for example, recommended additional texts for purchase by the LC when requested. Feedback on the course teams' responses to student representations were provided via the staff/student course committees but there did not appear to be

regular feedback of any changes made as a result of module questionnaires.

139 The audit team was satisfied that the quality of the learning opportunities was appropriate for programmes of study leading to the named awards above.

### **Mechanical engineering**

140 The scope of the DAT included a range of awards from mechanical engineering: HND, Foundation Degree, BSc, BEng, MEng and MSc awards. The DSED described the main elements of the QSME systems, and included AQR documentation at programme/subject level for 2003-04. The DSED, together with the other material available in paper and web-based format, provided a comprehensive set of information for the team. Programme specifications and module descriptions for all courses were available to the audit team. The content of the Programme Specifications contained clear links to subject benchmark statements, the *Code of practice* and the FHEQ. The module descriptions provided an appropriate level of information for students and most of them addressed the QAA Academic Infrastructure well. However, there were some examples of module descriptions where the learning outcomes statements could have been better aligned with the FHEQ.

141 A high degree of focus is given to AQR at module level. Students have opportunity to input feedback qualitatively through the SES and quantitatively through the Student Questionnaire. The student representative system worked well and the SSLC meetings and minutes contain pointed commentary on the strengths and weaknesses of module delivery, as well as the broader based consideration of course and University level items. More informal mechanisms also exist for students to contact staff. All these inputs, together with external examiner comments and statistical data are brought together to inform AQR. This thorough process leads to appropriate action plans. Students identified that these feedback mechanisms worked well overall, though they were not formally made aware of the actions arising out of their feedback via Student Questionnaires. The

audit team formed the view that local QSME systems were working well and were providing the University with an effective oversight of quality and standards at the local level.

142 The spectrum of the statistical data available was large and included student retention, progression and awards information, module level progression, feedback from students at module level, student placements and first destination in employment statistics. The consideration of key data and trends was effective in contributing to the monitoring of quality and standards.

143 The audit team evidenced samples of student work across all levels, including project reports, together with external examiner reports. External examiner comments were largely very supportive and were clear about the maintenance of academic standards. Where issues had been raised, they were responded to at a local level, and also at University level (by Registry) on generic matters. There was evidence of occasions where there had been a subject area response and a Registry response some months later, and that both responses had included coverage of the same point. External examiner comments had helped to inform the review of University academic regulations and the development of aspects of the University Student Management System. The team concluded that the standard of student achievement was appropriate to the titles of the awards and their location within the FHEQ.

144 The audit team considered the student handbooks to be comprehensive documents. The team also saw some module based material available to students on the VLE and the best examples contained a weekly breakdown of the lecture/tutorial activities, support material and reference to web-based and other sources of further information. Students verified that the module level information and support material available was generally good and that they were well informed of coursework assessment models. However there was sometimes less clarity regarding specific assessment criteria for individual coursework activities. Students received feedback on their coursework but not

on examinations unless they sought it individually. However, the timing of the return of coursework varied and often exceeded the 'three week guideline'. For University level documentation, students confirmed that the information available to them in printed and electronic formats before joining the University and subsequently was generally accurate.

145 Students confirmed that the learning resources were good including hardware and software facilities, library facilities, teaching spaces, the increasing use of the VLE and the overall level of resource provision. Students also reported that the quality of teaching was generally good and academic, technical and administrative staff were approachable and helpful. Sandwich placement was given a strong emphasis and support. The influence of professional accreditation and the engagement of staff in research activities provided a positive contribution to curriculum delivery.

146 Based on the documentation presented and discussions with students and staff, the audit team concluded that the quality of learning opportunities available to students was suitable for the taught programmes of study leading to the named awards above.

### Sport

147 The DAT focused on the sports studies programme consisting of nine undergraduate degree routes and the recently introduced MSc Exercise Science and Wellbeing, now predominantly based in the Faculty of Health and Wellbeing. The DSED was brief and largely descriptive. It contained a detailed AQR listing actions arising from 2003-04 and issues to be addressed during 2004-05, for both the undergraduate and postgraduate programmes. The programme specifications were made available to the audit team and included clear reference to the sport subject benchmark statements. Learning outcomes were according to the levels defined in the FHEQ, demonstrating engagement with the Academic Infrastructure. It was also clear that the programmes were professionally linked, the programme team taking advice and guidance

from appropriate professional statutory and regulatory bodies, especially at validations.

148 Annual Monitoring is conducted through the AQR. The action plans following the 2003-04 academic year and discussions by the audit team with academic staff and students, demonstrated a clear commitment to enhancing the quality of the learning experience of the students. Progression and completion data are produced annually and are used in the management of quality and standards. The team formed the view that the internal review processes are thorough, effective and taken seriously, and provide a suitable means for maintaining standards in the sports programmes.

149 The audit team saw external examiners' reports from 2003-04 and the responses embedded in the AQR action plans. The external examiners were impressed by a number of features of the provision with academic performance compared favourably to elsewhere in the UK and the courses delivered by a team committed to quality, rigour and high academic standards. The formal response to the external examiners indicated how issues raised by the external examiners were being dealt with, including an issue of overlap of module content, teaching on the Research Methods module and to ensure that the external examiners could meet the students in person in the coming years.

150 The audit team was able to scrutinise examples of assessed work and to agree that marks were fairly awarded and feedback entirely appropriate. It was able to support the view of the external examiners that student achievement was appropriate to the title of the awards and their location within the FHEQ.

151 The meeting with students indicated a high degree of satisfaction with their experience. They were especially complimentary about the approachability and accessibility of staff, their academic professionalism and the quality of feedback received on their coursework. However, the audit team noted room for improvement in the time needed for the return of marked coursework, especially as the examinations approached. Furthermore, the

AQR and discussions with students also noted the need to address the issue of bunching of assignment deadlines for modules delivered in the same semester, again leading to delays in the return of work.

152 Student handbooks and module guides were comprehensive and detailed. Students expressed satisfaction with the usefulness and accuracy of the information provided to them both before enrolment and at induction. Both first year and part-time students praised valuable pre-arrival information and electronic access. All students were complimentary on the value of the VLE, especially for communication with staff.

153 Sport students regarded the learning resources as good, with appropriate access to computer facilities both on and off-site, and appropriate training in the use of work packages was provided. Their experience of the library provision was mixed. Some students remarked that some key texts were outdated and others available in only limited numbers, while other students were content with the selection of journals available and the availability of inter-library loans. Laboratory facilities were described as good and a wide range of dedicated sports facilities was available to students in the Sheffield area.

154 Sports studies programme level committees operate for all years and take place twice each year. Minutes describe student views on modules and resources and, in 2003-04, referred to a lack of computer availability at key times and the proposed internet access to halls of residence. Staff took student views seriously and responded in an appropriate fashion. Students also commented that their views were taken seriously and that they were well supported in their studies and valued the input from staff.

155 The audit team concluded that the quality of learning opportunities available to students was suitable for the undergraduate and postgraduate programmes leading to the named awards above.

## **Section 4: The audit investigations: published information**

### **The students' experience of published information and other information available to them**

156 The audit team found that the University provides a wide and comprehensive range of information about courses, modules, policies and regulations to its students. Both printed and electronic media are used, with an increasing emphasis on the latter. The University's website includes a large amount of publicly accessible information about the University itself, its courses and facilities. The University's student intranet provides access to further and more detailed information relevant to individual students as well as to its VLE and email systems. In meetings with students, the team heard that the University used these electronic means of communication effectively. The team was provided with copies of undergraduate and career development prospectuses, and was able to review a wide range of material available to students through the University intranet.

157 The SWS addressed several aspects of the accuracy, completeness and reliability of the information published by the University for applicants and its students. There was general praise for the quality of the University's prospectus and for the helpfulness of admissions staff in the recruitment process. This view was supported in meetings with students. The SWS went on to comment on the quality of the University's communications with its students during their courses. In general, it stated that the quality of the information provided was satisfactory, though it reported that a few students expressed reservations about the completeness of the information about optional modules.

158 In its SED, the University stated that it recognised the importance of clear communication and effective consultation. It set out in some detail the means by which the University achieves these ends. These include

newsletters and bulletins published at the levels of the University and faculties. One of the means by which the University informs itself about the views of its students is through its annual SES. The audit team formed the view, from a perusal of a wide range of material made available to it, that the University did indeed communicate clearly and effectively with its students.

159 Through its meetings with staff and students, and through perusal of the published material made available to it, the team formed the view that the University placed a high value on clear and comprehensive communications at all levels with its students, and had set in place appropriate mechanisms to deliver that objective.

### **Reliability, accuracy and completeness of published information**

160 The SED described the procedures adopted by the University to meet the requirements of HEFCE's document 02/15, *Information on quality and standards in higher education*, and 03/51, *Final guidance*. An Information Task Group, chaired by the Director of Registry, was established to deliver the requirements of the TQI website. The Group sought to coordinate the requirements of TQI with the preparation for its QAA institutional audit. In the longer term, it intends that its annual Institutional Profile exercise will be coordinated with TQI.

161 The audit team was able to confirm that the University meets the TQI requirements in respect of statistical information. The publication of external examiner summaries had been a main consideration for the University, with its two tier assessment board system, and the need to transfer information from subject external examiners to award external examiners. At the time of the audit visit, the University had successfully met the TQI deadline produced summary reports of external examiners on the TQI website.

162 At the time of the audit visit, the Internal Reviews section of the TQI website contained QAA subject review and developmental engagement reports in those academic disciplines where these were available. The audit team was provided with proposed overviews, intended for

publication on the TQI web site, which summarised the outcomes of IAR reports. The team reviewed both the reports themselves and the corresponding overviews, and formed the view that the reports were admirable in their candour and reflective analysis. While the team recognises the difficulties inherent in producing a summary that is accurate both to the letter and spirit of a rather longer and necessarily complex report, it found that in one case (see above, 123), the proposed overview conveyed a different sense about some issues than the report itself.

163 On the basis of the extensive evidence provided to it, the audit team formed the view that there could be confidence about the University's procedures to ensure the accuracy, completeness and reliability of the information it publishes.



# **Findings**

## **Findings**

164 An institutional audit of Sheffield Hallam University (the University) was undertaken during the week 11 to 15 April 2005. The purpose of the audit was to provide public information on the quality of the University's programmes of study and on the discharge of its responsibility as a UK degree-awarding body. As part of the audit process, according to protocols agreed with the Higher Education Funding Council for England (HEFCE), the Standing Conference of Principals and Universities UK, six discipline audit trails (DATs) were selected for scrutiny. This section of the report of the audit summarises the findings of the audit. It concludes by identifying features of good practice that emerged from the audit, and recommendations to the University for enhancing current practice.

### **The effectiveness of institutional procedures for assuring the quality of programmes**

165 Academic Board is the supreme academic body with primary responsibility for the assurance of standards and determining systems of quality management. The Academic Board has two major subcommittees, the Academic Development Committee (ADC) and the Research and Business Development Committee (RBDC). At faculty level, the Faculty Academic Board (FAB) mirrors the role of the University's Academic Board as the supreme academic body in the Faculty. This 'mirroring' of committees extends to the FAB subcommittee structure for quality and standards with a QSME Committee, a Learning, Teaching and Assessment Committee, and a Research Degrees Committee, all linked to the University's ADC.

166 There are also a number of more informal groups which work in support of this formal academic governance structure. From the evidence of documentation and meetings with staff of the University, it was clear that such groups were undertaking significant work in relation to quality management and standards in a competent and efficient manner. However, in some cases, it was difficult to clarify the relative

responsibilities of such groups and formal committees within the governance structure and the University may wish to keep the relationship between ad hoc working groups and its established governance structure under review.

167 The University produces comprehensive documentation in support of the Quality and Standards Management and Enhancement Framework (QSME) including the Academic Frameworks, Policies and Regulations (AFPR) suite. A key document is the web-based QSME Handbook which provides comprehensive advice, guidance on all aspects of the University's QSME Framework including the major quality assurance processes. The production, nature and usefulness of the QSME Handbook can be seen as an example of the way in which the University effected the transition from schools to faculties in the context of quality and standards. The audit team found that the well-planned and effective transition from school to faculty-based QSME systems and the clear and continuing engagement of staff in that process was a feature of good practice.

168 The University has a well-established and systematic processes for the planning, validation and approval of new academic programmes, or the major modification of an existing programme. Validation itself is normally undertaken by one of three University Standing Panels (USPs). The audit team found the USPs to be a highly effective arrangement which permits the deployment of core teams of very experienced staff and also allows for some flexibility in the approach to proposals. As part of its overall approach to validation and approval, the University also produces an annual Validation Review which reports on the past year's activities. The review is extremely comprehensive and thorough. The team found the University arrangements for the validation and approval of new programmes of study and, in particular, the quality of the annual Validation Review was a feature of good practice.

169 The QSME Framework includes a system for annual quality review (AQR) which begins at the level of the individual module, passes through sub-faculty stages and culminates in Monitoring

Sub-Committee (MSC) consideration of faculty annual quality reviews and the contribution which they make to the University Quality and Standards Profile. The audit team found that this aspect of the University's annual review processes was undertaken in a systematic and satisfactory manner. The University's systems include the periodic revalidation of all academic programmes on a six-yearly basis. The process used for such revalidations is essentially the same as for initial validation and is operated in a similarly efficient manner.

170 The University's other substantial process for the periodic review of subjects and programmes is Internal Academic Review (IAR) which is subject-based and has a strong focus on quality enhancement. The audit team consider that it is too early to form a conclusive judgment on IAR, but the reports which were considered demonstrated the willingness of staff to engage in the developmental aspects of the process: in particular, the commentaries were generally open, direct and evaluative.

171 The University's QSME Framework also contains two other review mechanisms. Internal Thematic Review (ITR) and Internal Academic Audit (IAA). It appeared to the audit team, however, that the University had in place two broadly similar methods of dealing quickly with identified weaknesses in quality and standards, and might thus wish to consider whether those differences are sufficient to warrant the two separate processes.

172 The University Quality and Standards Profile occupies a significant position in the overall QSME Framework and is considered by the University as a key output from its QSME processes. The Profile is compiled annually by the Registry and MSC, considered by the ADC, and finally received by Academic Board. It is an extensive document which provides systematic internal and external evidence on the quality and standards of the University's programmes. The audit team consider the comprehensive nature of the University Quality and Standards Profile and the way in which it enables Academic Board to fulfil its remit to monitor quality and standards to be a feature of good practice.

173 A range of approaches are employed to gather student feedback on the quality of programmes at the University. The institution-wide Student Experience Survey is conducted annually, increasingly using the University's virtual learning environment (VLE), and offers students the opportunity to comment on many aspects of their experience at the institution. These evaluations inform the AQR process particularly at programme and subject level. Students are represented on University and faculty-level committees, and via staff-student course committees. The audit team formed the view that course committees were an effective vehicle for student feedback and subsequent enhancement of the student experience, but noted that there did not appear to be clear channels to inform students of changes made as a result of module evaluations.

174 The University has in place processes to secure the quality and appropriateness of flexible and distance learning programmes. The University has audited its practice against the recently revised section of the *Code of practice for the assurance of academic quality and standards in higher education (Code of practice)*, published by QAA, relating to flexible and distance learning and implemented a series of changes. The University supports those preparing flexible and distance learning material through the Learning and Teaching Institute (LTI), and issues appropriate guidance to ensure course materials and, in particular, assessment instruments are appropriate to the medium. There are detailed requirements for the validation of flexible and distance programmes beyond that required for on-site provision, and there are adequate means for ensuring the ongoing quality of the student experience of flexible and distance learning provision.

175 The findings of this audit confirm that broad confidence can be placed in the University's current and likely future management of the quality of its academic programmes.

## **The effectiveness of institutional procedures for securing the standards of awards**

176 The QSME Framework was the main vehicle for monitoring and assuring the establishment and maintenance of academic standards. The Quality and Standards Profile evidences typical management information that is available from the University Student Management System. The DATs also evidenced University Student Management System generated statistics, together with some locally generated statistics. In total, the availability and use of data to monitor the achievement of standards and other key indicators is robust. External examiner reports 'are scrutinised at both University level and within faculties, and summaries produced of them'. The University is committed to 'ensuring that External Examining continues to play its vital role in the establishment and maintenance of academic standards' and that the University operates 'fully in accordance with the QAA code. The operation of the associated processes is therefore closely monitored and reviewed and reported on annually'. The audit team considered however that the University may find it desirable to review the internal processes for responding to the reports of external examiners to avoid potential duplication and ensure timely responses.

177 It was clear to the audit team from the information gathered and discussion with staff that the QSME arrangements at University and local levels are well established and understood. The arrangements have significant strengths in terms of their comprehensiveness and integration. The findings of the team confirm that broad confidence can be placed in the soundness of University procedures for the current and future management of the standards of its awards.

## **The effectiveness of institutional procedures for supporting learning**

178 The audit team found that students have good access to PCs including those in the Learning Centre (LC), open access areas and social spaces. The LC is focusing more on the

provision of electronic learning resources partly in response to changing student needs. The use of VLE is variable across programmes but it is envisaged that its development will enable the learning environment to be increasingly driven from the student perspective in terms of the time, pace and place of learning. Students expressed their satisfaction with the learning resources available which helped to promote a modern and efficient learning environment. The audit team formed the view that the University's use of its VLE was a feature of good practice.

179 The framework for student support encompasses the whole student life cycle from pre-entry through course membership to post graduation. The Student Services Centre (SSC) is the central provider of student support and oversees a wide range of services. The audit team found the system of support was comprehensive and well regarded both by students and by outside agencies. The University has developed a Framework for Employability which is successfully integrating enterprise and career management into course planning. There has been a strong commitment to providing access and equality of opportunity for disabled students. Academic support for students is provided at the central level by the Education Guidance Services (EGS) and by drop-in study support in each LC. Extra support is provided at the programme level. Formal methods for guidance were also complemented by informal mechanisms that fostered a supportive and approachable culture. Students stressed the willingness of staff to offer help to groups or individual students whenever necessary and this clearly was of benefit to the students.

180 Processes for continued staff development are well established in the University. These are delivered through a mix of provision from the LTI as well as a range of institutional measures. Peer observation of teaching has been replaced by a policy of peer-supported review of learning, teaching and assessment. Although in its infancy it provides an environment within which staff can reflect on current practice and identify areas for further development. However it was not clear whether these policies or an appraisal

system were mandatory across the University. The audit team could not find conclusive evidence that the mechanisms to assure the quality of teaching were secure and consistent and advises that the University reviews the system. Nevertheless the team considered that academic staff, both full and part-time, were committed to enhancing the learning experience for their students and well supported by the University in the range of opportunities for professional and personal development.

181 Overall, the audit team found that the level and calibre of resources placed alongside the effective support for students and staff provided a quality experience for learners.

## **Outcomes of discipline audit trails**

### **Built environment**

182 From its study of students' assessed work and from discussions with students and staff, the audit team formed the view that the standard of student achievement in the programmes was appropriate to the titles of the awards and their locations within the *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ). The programme specifications articulated well with the benchmark statement, the FHEQ and professional, statutory and regulatory body (PSRB) requirements.

183 Learning support for students is good. There is a dedicated resource room and dedicated computer facilities. The LC's resources and facilities were highly rated by the students and the use of the VLE as a learning and communication platform is considered to be highly satisfactory. The audit team concluded that the quality of learning opportunities available to students was suitable for the programmes of study leading to the undergraduate and postgraduate awards in the built environment.

### **Business and management**

184 From its review of students assessed work, and from it discussions with staff and students the audit team formed the view that the standard of achievement in the programmes was appropriate to the titles of the awards and their location within the FHEQ. The AQR is

thorough and assures the continued monitoring and development of the programmes. Programmes specifications were provided and reflected appropriate benchmark statements and professional body requirements.

185 Student evaluation of their learning experience was positive and they fully endorsed both the extent and the nature of the support they received from staff, and the learning resources which support their studies. Students were able to offer feedback on their programmes through both formal and informal mechanisms and felt able to raise concerns with staff. The audit team found that the quality of learning opportunities were suitable for the programmes of study leading to the awards in business and management.

### **Computing**

186 From its study of examples of assessed work, and from discussions with students and staff, the audit team formed the view that the standard of student achievement in the programmes was appropriate to the title of the awards and their location in the FHEQ. The programme specifications are informed by the relevant *Subject benchmark statement* for computing and PSRB requirements. The specifications do not all contain references overtly to FHEQ, but it was evident to the team that they are well aligned.

187 Students described a range of experiences in their interaction with academic staff, and in the responsiveness of the University in meeting their concerns. Some academic staff were readily available and helpful, but this was not universally the case. Students described the hardware and software resources available as broadly satisfactory, but with some significant issues. Overall, based on the available evidence, the audit team concluded that the quality of learning opportunities available to students was suitable for the taught programmes of study leading to the awards in computing.

### **History**

188 From its discussions with staff and students and from study of students' assessed work, the audit team reached the conclusion

that the standard of student achievement was appropriate to the titles of the awards and their location within the FHEQ. The programme specifications set out appropriate educational aims and learning outcomes, and describe the teaching, learning and assessment styles and approaches students can expect.

Undergraduate history programme specifications have been written in the context of the *Subject benchmark statement* for history.

189 Student evaluation of the programmes was broadly positive, including the developing use of the University's VLE as a teaching and learning tool. They were given regular opportunities to evaluate and comment on their experience of their programme of study and received helpful and effective responses from staff. The audit team concluded that the quality of learning opportunities available to students was suitable for the programmes of study leading to the undergraduate and taught post-graduate awards in history.

### **Mechanical engineering**

190 From its study of examples of assessed work, and from discussions with students and staff, the audit team formed the view that the standard of student achievement in the programmes was appropriate to the title of the awards and their location in the FHEQ. The programme specifications generally addressed the FHEQ and subject benchmark statement and professional body requirements.

191 Student Handbooks are comprehensive documents and students verified that the module level information and support material available was generally good. Students confirmed that the learning resources were good and academic, technical and administrative staff were approachable and helpful. Sandwich placement was given a strong emphasis and support. Based on the available evidence, the audit team concluded that the quality of learning opportunities available to students was suitable for the taught programmes of study leading to the awards in mechanical engineering.

### **Sport**

192 From its study of examples of assessed work, and from discussions with students and staff, the audit team formed the view that the standard of student achievement in the programmes was appropriate to the title of the awards and their location in the FHEQ. The programme specifications included clear reference to the sport subject benchmark statements and PSRB requirements. Learning outcomes were according to the levels defined in the FHEQ.

193 The meeting with students indicated a high degree of satisfaction with their student experience. They were especially complimentary about the approachability and accessibility of staff, their academic professionalism and the quality of feedback received on their coursework. Based on the available evidence, the audit team concluded that the quality of learning opportunities available to students was suitable for the taught programmes of study leading to the awards in sport.

### **The use made by the institution of the Academic Infrastructure**

194 The University has monitoring and review mechanisms in place that allows it to ensure that the Academic Infrastructure is embedding into the QSME Framework. The audit team was able to scrutinise University level and local engagement with external reference points and although there was some evidence of limited implementation there was generally effective engagement with the Academic Infrastructure. Effective engagement includes implementation within QSME systems; the annual review processes; the arrangements for the approval of new programmes; the University Quality and Standards Profile and the receipt and consideration at University level of the reports of PSRBs.

195 On the *Code of practice* on assessment the audit team considered that the University may find it desirable to consider its policies and procedures in relation to precepts 5 and 12. More generally however, the team concluded that the University operated effective policies

for ensuring the Academic infrastructure was implemented into its QSME framework, promulgated within the institution and applied by the body of the staff.

### **The utility of the SED as an illustration of the institution's capacity to reflect upon its own strengths and limitations, and to act on these to enhance quality and standards**

196 The self-evaluation document (SED) contained a comprehensive review of the structures and processes the University has in place to manage its quality and standards in a time of continuing change and transition from schools to faculties. It included detailed and helpful references to supporting documentation. It also contained a critical self-evaluation of evolving processes, identifying the many strengths of the QSME Framework, actions taken following the previous audit and developmental engagements, and areas for further development to enhance future quality and standards. There were, however, areas in the SED which were unclear to the audit team, including the relationship between committees and working groups and the extent of progress being made with initiatives generated at a time of restructuring.

### **Commentary on the institution's intentions for the enhancement of quality and standards**

197 The University does not envisage any radical changes to its QSME Framework but intended to focus on the further embedding of QSME processes at corporate and faculty levels. However, within this general approach to the securing of the QSME processes, the SED drew attention to a range of initiatives which the University intends to address as part of its agenda for the enhancement of quality and standards. These included further work on those Corporate Plan Implementation Plan projects which focus specifically on the quality of the student learning experience; seeking opportunities to streamline where possible the QSME systems; further work on developing the processes, systems and practices related to assessment; the full

implementation and monitoring of the IAR process; and, in the light of the revised section of the *Code of practice* on collaborative provision and flexible and distributed learning, a review of its processes and practices in these areas.

198 The audit team welcomed this approach to ensuring the stability of the QSME Framework and the University's intention to secure it as a firm platform for future development. It would also endorse the future intentions related to assessment particularly in respect of the promotion of good academic practice and equity for students.

### **Reliability of information**

199 Both from the direct evidence available to the audit team in printed and electronic publications, and in its meetings with staff and students, it was evident that the University is strongly committed to clear and effective communications. Staff are regularly consulted through in-depth surveys, and are kept very fully informed of developments across the University.

200 Extensive information is provided to students, who were generally satisfied by the extent, accuracy and quality of the information they received. There is a strong commitment from the University at its senior levels to communicate effectively with its students. With the strong endorsement of its students, the University is successfully migrating much of the information flow from printed media to the internet, intranet, VLE and email. The audit team was satisfied that the information provided by the University to its students on its website was well presented and readily accessible.

201 The University has ensured that it is meeting the requirements of HEFCE 03/51, including the production of accurate statistical information and the development of external examiner summaries, and the outcomes of periodic review. The audit team is confident that the University is meeting the full requirements.

### **Features of good practice**

202 The following features of good practice were noted:

- i the well-planned and effective transition from school to faculty-based QSME systems and the clear and continuing engagement of staff in that process (paragraph 34)
- ii the University's arrangements for the validation and approval of new programmes of study and, in particular, the quality of the annual Validation Review (paragraph 39)
- iii the comprehensive nature of the University Quality and Standards Profile and the way in which it enables Academic Board to fulfil its remit to monitor quality and standards (paragraph 52)
- iv the receipt and consideration at institutional level of the reports of professional, statutory and regulatory bodies (paragraph 63)
- v the University's use of its VLE, both as a pedagogical and communications medium, and the plans for its future development (paragraph 93).

### **Recommendations for action**

203 Recommendations for action that is advisable:

- i reassess how the staff appraisal and peer-supported review of Learning Teaching and Assessment systems might be more effectively used for the assurance of teaching quality in addition to the enhancement of teaching standards (paragraph 86).

204 Recommendations for action that is desirable:

- ii review the relationship between ad hoc working groups and the established governance structure (paragraph 30)
- iii review the internal processes for responding to the reports of external examiners to avoid potential duplication and ensure timely responses (paragraph 57)

## Appendix

### **Sheffield Hallam University's response to the audit report**

Sheffield Hallam University welcomes the outcome of the Institutional Audit, which expresses broad confidence in the management of quality and academic standards at the University. We are also pleased to note the positive outcomes of the six Discipline Audit Trails.

The University pleased to receive specific acknowledgements for good practice, including:

- our arrangements for validation and annual review of programmes;
- our comprehensive annual profile of quality and standards; and
- the way we respond to reports from professional and other bodies.

Other commendations are for the effective management of quality and standards as the University underwent major academic restructuring, from ten schools to four faculties. The use of the University's virtual learning environment in support of e-learning is also commended.

The University is also pleased to note the many positive comments within the report on other examples of good practice.

The report states that the University has a comprehensive and well regarded system of student support and a strong commitment to providing access and equality of opportunity for disabled students. It also cites our thorough and effective student experience survey. It notes that academic staff, both full and part-time, are committed to enhancing the learning experience for their students and are well supported by the University in the range of opportunities for professional and personal development.

The report approves the way in which the University ensures the stability of its systems for managing and enhancing the quality and standards of provision. It considers that these University systems are well established and understood. It also notes that University staff benefit from a comprehensive on-line handbook on the processes for ensuring quality and standards.

The report comments favourably on the University's systematic use of external academics and professionals in its review processes. It is positive about the effective use of external examiners overall. There are also favourable comments on our effective processes for approving and monitoring flexible and distance learning.

The University notes the single advisable recommendation for change. We will reassess how the staff appraisal and peer-supported review of learning, teaching and assessment might be more effectively used for the assurance of teaching quality, in addition to the enhancement of teaching standards.

The desirable recommendations are also acknowledged by the University. They reflect our intentions to streamline and continue to improve assessment and the processes for managing and enhancing the quality and standards of provision. Actions addressing these recommendations will be monitored during 2005/06 through a University action plan.

RG 156 09/05