



**York St John University**

**Institutional audit**

**April 2011**

**Annex to the report**

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## Introduction

A team of auditors from the Quality Assurance Agency for Higher Education (QAA) visited York St John University (the University) from 4 to 8 April 2011 to carry out an Institutional audit. The purpose of the audit was to provide public information on the quality of the learning opportunities available to students and on the academic standards of the awards that the University offers.

## Outcomes of the Institutional audit

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

- limited confidence can reasonably be placed in the soundness of the University's current and likely future management of the academic standards of its awards
- confidence can reasonably be placed in the soundness of the University's current and likely future management of the quality of the learning opportunities available to students.

## Institutional approach to quality enhancement

The University is committed to enhancing the learning opportunities of its students, but, in that its approach to quality enhancement is not sufficiently systematic, it has some way to go before it can be said to have a strategic approach designed to ensure the enhancement of the quality of its provision.

## Institutional arrangements for postgraduate research students

The supervision and support arrangements for postgraduate research students at the University are broadly satisfactory and largely, but not entirely, meet the expectations of the *Code of practice, Section 1: Postgraduate research programmes*.

## Published information

Reliance can reasonably be placed on the accuracy and completeness of the information the University publishes about its educational provision and the standards of its awards.

## Recommendations for action

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

Recommendations for action that the team considers essential:

- in respect of the Independent and Professional Studies Framework:
  - secure the standard of the awards made by the involvement of external advisers in the approval and monitoring of all programmes of study (paragraph 31)
  - ensure the effective oversight by subject and award external examiners of the academic standards required of all students and the quality of the learning experiences offered (paragraph 31).

Recommendations for action that the team considers advisable:

- formally review its deliberative committee structure, in particular:
  - ensuring the effective institutional oversight of academic standards and student learning opportunities (paragraphs 8 and 74)
  - specifying the level of delegation to, and authority of, each body concerned (paragraphs 13 and 74)
  - specifying the circumstances under which chair's action is permitted and developing guidelines for the exercise of the discretion involved (paragraphs 13 and 74)
- ensure that procedures are in place to enable the Chief External Examiner to assure the institution of the overall effectiveness of the external examining system (paragraph 16)
- ensure the use of independent external expertise in the approval of new or significantly or cumulatively amended modules which contribute to final awards (paragraph 20)
- make explicit its procedures for monitoring the cumulative impact of changes to modules and programmes, including those delivered off site and in collaborative provision (paragraphs 22 and 72)
- ensure that the Independent and Professional Studies Framework meets all expectations of the Academic Infrastructure (paragraph 29)
- ensure the alignment of the academic standards of all master's-level awards with the level descriptors for master's programmes in *The framework for higher education qualifications in England, Wales and Northern Ireland* (paragraph 34)
- specify the means by which institutional academic strategies are implemented and formally monitored (paragraph 50)
- expedite its review of non-professional work-based learning (paragraph 54)
- ensure that the names and locations of partner organisations appear on award certificates or transcripts (paragraph 77)
- ensure that research students engaged in teaching receive appropriate training prior to commencing any teaching or assessment (paragraph 86).

Recommendations for action that the team considers desirable:

- institute a formal procedure for institutional-level committee consideration of external examiner nominations, including those for collaborative provision (paragraphs 15 and 76)
- give consideration to augmenting the external examiners' report template by:
  - providing details of the site and mode of delivery of modules examined (paragraphs 17 and 76)
  - providing an opportunity for comment on the nature and adequacy of responses made to the previous year's recommendations (paragraphs 17 and 76)
  - explicitly requesting comment on the comparability of student achievement, by different modes or locations, for identified cohorts across the institution's provision (paragraphs 17 and 76)
- ensure that external examiners' reports are consistently shared with students (paragraphs 18 and 92)
- provide a programme specification for each joint honours award (paragraph 33)
- review the effectiveness with which it communicates relevant aspects of its assessment policies to students (paragraphs 39 and 90)
- develop coherent and timely mechanisms for gathering, analysing and responding to student feedback across all provision (paragraph 46)

- fully and consistently implement and evaluate the revised academic tutor role (paragraph 61)
- develop a strategic approach to enhancement (paragraph 67)
- review its approach to the development of staff at partner organisations (paragraph 78)
- bring to a timely conclusion its review of the instruction, advice and guidance for research degree recruitment interview panels, as recommended by the QAA special review of research degree programmes in 2009 (paragraph 85).

## **Section 1: Introduction and background**

### **The institution and its mission**

1 The origins of York St John University (the University) lie in a Church of England diocesan training school for teacher education, inaugurated in 1841 and taking the patronal title St John in the 1890s. After rapid expansion and diversification in the mid-twentieth century, in 1974 the College merged with the diocesan female training school in Ripon to become the College of Ripon & York St John. The period 1999-2001 saw a steady migration of all teaching to York, at which point the institution took the title York St John College. The then College was granted taught degree awarding powers in 2005 and university title a year later, when it took its present title. Today the University is based on a single campus near the city centre; it has almost 6,000 students studying a wide range of subjects, and a network of regional, national and international partnerships. The University of Leeds, with which it has a longstanding relationship, awards research degrees to appropriate graduands of the University.

2 The University's mission involves embracing difference, challenging prejudice, promoting justice, providing opportunities, supporting personal and professional development, and engaging with external bodies regionally, nationally and globally. Since 2010 it has also emphasised exceptionalism in learning and teaching, the student experience, and the quality of its graduates.

### **The information base for the audit**

3 The University provided the audit team with an institutional Briefing Paper, which contained references to sources of evidence to illustrate its approach to managing the security of its awards and the quality of its educational provision; the team received electronic or hard copies of all documents referenced therein and all other documentation requested. It had access to a report prepared in lieu of Institutional audit, the University having recently been twice scrutinised in connection with its successful applications for taught degree awarding powers and university title (the in-lieu report, 2006), and to the report of the QAA special review of research degree programmes (the special review, 2009). The York St John Students' Union produced a written submission setting out students' views on the accuracy of information provided, their experience as learners and their role in quality management. The team thanks the Students' Union for its submission.

### **Developments since the last audit**

4 The in-lieu report recommended that the University address several aspects of institutional management. The University responded by making a series of extensive organisational changes over a period of time, including creating four faculties out of five schools; establishing several senior posts; commissioning an external review of the effectiveness of its leadership and management arrangements; and initiating internal reviews

of its academic provision and organisational structure. These reviews reflect a strategic ambition to move from a centralised to an increasingly devolved organisational model, not least in respect of quality assurance. Further changes to senior roles and functions were made in the present academic year by the incoming Vice Chancellor, who also introduced six workstreams to focus strategic attention on priority issues.

5 The in-lieu report also recommended specifying the duties and extending the reporting requirements of the Chief External Examiner. This recommendation is discussed later, and reappears as a modified recommendation in the present audit (see paragraph 16). In addition, the special review identified five areas for further consideration, of which the University has fully addressed three; the remaining two re-emerge in this audit (see paragraphs 85 and 86).

## **Institutional framework for the management of academic standards and the quality of learning opportunities**

6 Responsibility for strategic management rests with the Vice Chancellor, who is assisted by the Deputy Vice Chancellor, two newly appointed pro vice chancellors, and a wider Senior Leadership Team which the University considers central to managerial decision-making and resource allocation. This team consists of deans of faculty, directors and heads of support departments, and the Strategic Analyst (see paragraph 42). The Academic Board, responsible under the Vice Chancellor for all aspects of academic regulation, discharges its responsibilities with the help of a suite of subcommittees, of which the most immediately relevant are the Quality and Student Experience Committee (chaired by the Dean of the Business School) and the Research Committee (chaired by the Dean of Education and Theology).

7 The Quality and Student Experience Committee has responsibility for the Academic Framework for taught awards; good practice in learning and teaching; quality assurance; external partnerships; assessment; appeals; discipline; and external examining. It produces an Annual Quality Report for a joint meeting of the Academic Board and the Board of Governors, and for the University of Leeds. It established an Executive Group in 2010 to shape agendas and advise its chair on business potentially requiring resolution between meetings; the Deputy Vice Chancellor, though a member of the committee, does not attend this group. While the audit team learned that the group is empowered to make decisions on behalf of the committee, it was unable to identify documentation other than the minute instituting the group specifying its membership or the extent of its decision-making powers; no terms of reference exist and no reference to the group appears in the minutes of the subsequent meeting of the Academic Board. Nor was elucidation forthcoming from the senior members of staff with whom the issue was raised.

8 The audit team found that the Committee's wide-ranging responsibilities rested, until the academic year 2008-2009, with two committees, both now disbanded, but that the University has yet to undertake a formal review of the effectiveness of this change; in consequence, the Quality and Student Experience Committee has an extremely heavy workload; senior staff acknowledge that the Committee handles this in part by prioritising particular issues over others: in particular, the student experience dimension is at risk of marginalisation; and there is a lack of clarity, and thus potential for confusion, over the locus of responsibility for quality and standards: for example, whereas one document identifies the Deputy Vice Chancellor as having strategic responsibility for academic development, quality and standards, another ascribes a very similar responsibility to the Chair of the Quality and Student Experience Committee. It is advisable that the University formally review its deliberative committee structure, in particular ensuring the effective institutional oversight of academic standards and student learning opportunities.

9 In addition to the formal institutional-level structures, an informal Quality Network engages its membership of around 110 academic and 20 support staff members in discussions and activities on topics which have included the roles of validation panel chairs and quality administrators, procedures for periodic review, and risk in collaborative partnerships. The audit team found that this group is fulfilling a useful role within its sphere of influence.

10 Significant responsibilities for academic quality are devolved to faculties, normally through faculty quality enhancement committees; these include module approval and amendment; scrutinising outline proposal documentation prior to centrally managed validation; annual programme monitoring; and subject review. While the University draws a clear distinction between both the functions and the nomenclature of the Quality and Student Experience Committee and faculty quality enhancement committees, the audit team was unable, either from documentary sources or discussions with staff, to identify a rationale for the distinction, and therefore for the institutional approach to delegation.

11 The University operates a two-tier examination board structure, with external examiners appointed at subject level and engaging with subject area assessment panels. The assessment process is controlled by the Board of Examiners for Progress and Awards, the work of which is overseen by the Chief External Examiner (see paragraph 16).

12 The University supplements its normal learning and teaching activities with an Independent and Professional Studies Framework, under the auspices of which students negotiate their academic pathway with their head of programme, subject only to the approval of the faculty quality enhancement committee concerned. This framework is subject to substantial discussion later in this report (see paragraphs 27 to 31).

## **Section 2: Institutional management of academic standards**

13 The University describes its approach to determining, protecting and monitoring academic standards as evolutionary. Its mechanisms for doing so are specified in a Policy, and include a common modular system; Academic Regulations; programme approval mechanisms; regular monitoring and review of provision; and admissions procedures. These are clearly set out in a Guide, which contains signposts to more detailed information; the audit team, while noting minor inconsistencies between the terminology of the Policy and the Guide, found the latter generally useful. Nevertheless, the team found a lack of clarity about the extent of delegation to, and the decision-making authority of, each body, and about the current use of chair's action. It is advisable that the University formally review its deliberative committee structure, in particular specifying the level of delegation to, and authority of, each body concerned, and specifying the circumstances under which Chair's action is permitted and developing guidelines for the exercise of the discretion involved (see also paragraph 74).

14 For ease of reference, all aspects of external examining, programme approval, monitoring and review and institutional engagement with the Academic Infrastructure and other external reference points are described and discussed in this section.

### **External examiners**

15 The University considers external examiners fundamental to maintaining academic standards in on-campus and collaborative provision, and to enhancing assessment practice.

Its framework for external examining covers nomination and appointment; briefing and induction; subsequent advice-giving; duties; reports and their consideration; institutional assessment arrangements; and the responsibilities of the Chief External Examiner. External examiners are in place for all on-campus and collaborative programmes. Nominations are signed off by the relevant dean, scrutinised by the Registrar and approved by the Chair of the Quality and Student Experience Committee (collaborative provision nominations also require the approval of the Chair of the Collaborative Provision Sub Committee). The audit team, finding no evidence of the committee itself formally considering (as opposed to merely noting) external examiner nominations, considers that this limited role reduces the formality of the system (see also paragraph 76). It is desirable that the University institute a formal procedure for institutional-level committee consideration of external examiner nominations, including those for collaborative provision.

16 The Chief External Examiner attends the Board of Examiners for Progress and Award to ensure that the Regulations are applied equitably; correct decisions are taken in respect of awards and progress; appropriate consideration is given to mitigating circumstances claims; and discretion is exercised consistently. The in-lieu report advised the University to provide a written role specification and to require a detailed separate report from the Chief External Examiner, a suggestion to which the University has gone some way towards responding. The reports of other examiners are not necessarily circulated to the Chief External Examiner, whose report template is required to address joint honours awards, Independent and Professional Studies awards (see paragraph 29) and the conduct of the board itself, but not single honours degrees, taught postgraduate degrees or the conduct of faculty-level subject assessment panels. It is advisable that the University ensure that procedures are in place to enable the Chief External Examiner to assure the institution of the overall effectiveness of the external examining system.

17 While the external examiners' report template invites comment on areas of importance for the University (including professional placements and research-informed teaching), staff involved in faculty overviews of such reports were unable to confirm that all such comments are systematically monitored. The audit team also noted that the template does not request information or comment on the site and mode of delivery of modules examined, responses to the previous year's report, or the comparability of student achievement in on-campus and collaborative provision. While, shortly before the audit, the Collaborative Provision Sub Committee identified and recommended addressing one of these issues (the comparability of student achievement in multi-site programmes), it is desirable that the University give consideration to augmenting the external examiners' report template by providing details of the site and mode of delivery of modules examined; providing an opportunity for comment on the nature and adequacy of responses made to the previous year's recommendations; and explicitly requesting comment on the comparability of student achievement, by different modes or locations, for identified cohorts across the institution's provision.

18 Only one student who met the audit team had seen an external examiner's report and was familiar with the external examining process, and the University acknowledges that its recent decision that external examiners' reports be discussed at faculty level with student representatives is not fully implemented; staff who met the team were unaware how institution-wide implementation would be achieved. While the University, having recently identified a section of its website for disseminating the outcomes of evaluative activities, invites external examiners to write short comments for publication there, the section inaccurately describes these comments as report summaries. In the event, students stated that awareness of the section is low and little use is therefore made of it (see paragraph 45). It is desirable that the University ensure that external examiners' reports are consistently shared with students (see paragraph 92).

## Approval, monitoring and review of programmes

19 New programme proposals require the approval of the Strategic Leadership Team; resource implications are signed off by the Director of Finance before proceeding from outline to full development. Responsibility for validation rests with the Quality and Student Experience Committee, which proceeds on the basis of specified and detailed regulations and guidelines, the content of which partially, but not wholly, reflects institutional priorities. For example, while the guidance for programme development teams contains prompts about internationalisation (identified as a validation priority in 2007), those for validation panels and new module developers do not. Externality is achieved through requirements to consult employers and professional groups and to include at least two external members on panels. The procedures are mapped against relevant sections of the *Code of practice for the assurance of academic quality and standards in higher education (Code of practice)* and take account of relevant professional and regulatory requirements. Validation events are chaired by the Chair of the Quality and Student Experience Committee or her nominee. The audit team reviewed the papers associated with one validation; it confirms that due process was followed but notes that the papers were not submitted to the committee in a timely fashion. Since this issue features elsewhere in this document (see in particular paragraphs 24 and 40), the University may wish to give further consideration to the timeliness with which committee procedures are completed.

20 Approval of new and amended modules is a faculty responsibility, with implementation based on clearly specified procedures; this delegation includes the approval of bespoke modules within the Independent and Professional Studies Framework (see paragraph 28). Nevertheless, while a guidance document on programme modifications makes reference to the possibility of consultation with external examiners, no equivalent reference appears in the guidance on module development or amendment; the audit team was informed that externality is an expectation not a requirement, and that the same applies to the approval of 60-credit University certificates (see also paragraph 22). It is advisable that the University ensure the use of independent external expertise in the approval of new or significantly or cumulatively amended modules which contribute to final awards.

21 Annual programme monitoring is a faculty responsibility. Each programme produces an annual programme evaluation report drawing upon centrally produced statistical information and including responses to external examiners' reports; reflection on admissions, progression and academic achievement; responses to the previous year's action plan; and a new action plan. As an outcome of the process each faculty presents a consolidated annual evaluation report for the Quality and Student Experience Committee: these are collated into the University's Annual Quality Report (see paragraph 7). The audit team, having reviewed the most recent such report, believes the University may find it helpful to reflect on whether it would be better produced in a more structured and concise format.

22 The audit team, on enquiring about procedures for monitoring the impact of changes over time to modules and programmes, was advised that formal institutional oversight is based solely on annual procedures. Accordingly, in both on-campus and collaborative programmes, substantial incremental change can be made to modules and programmes, in content, mode of delivery or both, without the cumulative impact of such changes being systematically and formally monitored. It is advisable that the University make explicit its procedures for monitoring the cumulative impact of changes to modules and programmes, including those delivered off site and in collaborative provision.

23 Periodic review consists of two processes, identified by the University as subject and faculty review. The former is a faculty responsibility; the latter, an audit of faculty operations and quality processes, is undertaken centrally. Revalidation, a separate process

focusing on programme review and approval, normally occurs around 18 months after the associated subject review.

24 Subject review panels, chaired by a dean or deputy dean external to the faculty, include a student representative and at least one external subject peer. On the basis of its consideration of one such review the audit team found the process thorough and rigorous, and found that the student written submission, to which the University remains committed (though its introduction has not been unproblematic), makes a useful contribution. Nevertheless, the team concurs with the University's view that scope exists to strengthen the guidance to ensure cross-faculty membership of review teams; the University may also find it helpful to reflect on the appropriateness of the time frame within which it requires consideration of, and formal responses to be made to, review outcomes (see also paragraphs 19 and 40). The team also noted three cases in which an interval of at least seven years between subject reviews is scheduled; it learned that a case-by-case judgement is made as to whether a review should be deferred, run to schedule or advanced. The University will doubtless wish to determine the maximum acceptable time between reviews, and satisfy itself that the decision-making criteria involved are robust and consistent.

25 Faculty review is a two-stage activity undertaken on a six-year cycle. A preliminary investigative visit leads to an interim report; a second visit (at which the response made to the interim report is discussed) leads to a final report to the Quality and Student Experience Committee. Review panels are chaired by an external dean or deputy dean, and include an external peer with experience of institutional management; again, a written submission is invited from students. At the time of the audit only one such review had taken place; the audit team confirms that procedures were followed; it also notes that panel members offered advice as to possible future enhancements and that the faculty concerned expressed the view that the time-lag between the internal review and receipt of the review report had been excessive.

26 Institutional procedures for programme termination are clearly specified and meet all necessary obligations to those affected.

## **Independent and Professional Studies**

27 In 2009 the University introduced an Independent and Professional Studies Framework (the Framework) for both undergraduate and postgraduate awards, to facilitate a response to requests from employers and other organisations for bespoke provision, and to provide an accredited professional development framework for its own staff. The Framework was restructured in 2010 in the belief (the correctness of which the audit team questions), that devolving responsibility for managing on-campus provision to faculties would justify reducing the risk level associated with it from medium to low. Supported by an external adviser's report, the Framework was validated through internal committees prior to formal approval by the Academic Board, and was not subject to a separate validation event.

28 Under the Framework, a student's pathway through the system may, subject to the inclusion of one of a group of designated core modules, involve a combination of standard and bespoke modules. In the case of standard modules, both syllabus and assessment method are open to amendment to accommodate the needs of the student concerned; all such arrangements, including award titles (which are negotiated between student and head of programme in advance of commencement), are subject only to the approval of faculty quality enhancement committees, to which day-to-day responsibilities are delegated; no externality is required.

29 Where standard modules are taken, assessed work is submitted to the designated external examiner; for bespoke modules the faculty concerned is responsible for identifying a suitable external examiner and subject assessment panel. The results of Framework students are formally considered by the Joint Honours and Independent and Professional Studies Assessment Panel, which makes recommendations to the Board of Examiners for Progress and Award. The Chief External Examiner is involved at both stages. No programme specification is produced for individual awards (though a generic specification for the Framework is in place), since the function of individual specifications is deemed fulfilled by individual learning contracts. Such contracts identify the modules to be completed and confirm the award title, but make no reference to aims or learning outcomes. The arrangements for designing, monitoring, modifying and examining individual programmes of study do not meet the expectations of the *Code of practice*, and the fact that individual learning contracts do not necessarily specify clear learning outcomes in advance, but are subject to negotiation with students as the programme proceeds, means that the University cannot be assured that outcomes are set at the appropriate level in *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ). It is advisable that the University ensure that the Independent and Professional Studies Framework meets all expectations of the Academic Infrastructure.

30 The audit team's review of the operation of the Framework revealed significant procedural errors and omissions; these are not detailed here since, were this to be done, it would be impossible to conceal the identities of the students concerned. The University is, however, aware of and has undertaken to address them; its progress in doing so will be monitored in the action plan it will be producing following completion of the audit process.

31 The audit team considers that the design, validation and operation of the Framework give rise to immediate concern, and that the procedures for designing, monitoring, modifying and examining individual programmes of study do not meet the expectations of the *Code of practice* (see also paragraph 29). It is essential that, in respect of the Independent and Professional Studies Framework, the University secure the standard of the awards made by the involvement of external advisers in the approval and monitoring of all programmes of study, and ensure the effective oversight by subject and award external examiners of the academic standards required of all students and the quality of the learning experiences offered.

## **Academic Infrastructure and other external reference points**

32 The University states that its Academic Framework takes full account of the Academic Infrastructure and, where appropriate, the requirements of professional, statutory and regulatory bodies. For on-campus provision the University has developed a suite of qualifications descriptors for all awards, mapping module and programme learning outcomes on to all relevant external requirements or expectations; partner organisations are required to map provision against relevant parts of the Academic Infrastructure and external reference points. The audit team, while noting both the variability of academic staff members' awareness of these arrangements and that they were largely bypassed in the case of the Independent and Professional Studies Framework (see paragraph 31), confirms that validation and revalidation procedures take account of all relevant external reference points.

33 While a current programme specification prepared to a common template is a requirement, the audit team found that joint honours students receive two separate programme specifications without their experience being addressed in a coherent manner. It is desirable that, in respect of joint honours programmes, the University provide a programme specification for each joint honours award.

34 The audit team found in the programme specifications for master's-level awards regulatory inconsistencies in the credit rating applied, different approaches in one faculty to the acceptability of undergraduate modules for master's-level study, and different credits being assigned to such modules without discernible academic rationale. It is advisable that the University ensure the alignment of the academic standards of all master's-level awards with the level descriptors for master's programmes in the FHEQ.

35 The University has on the whole demonstrated engagement with the Academic Infrastructure.

## **Assessment policies and regulations**

36 The University has a comprehensive and well-publicised Assessment Policy and associated procedures, which are governed by Regulations and, it states, approved by the Quality and Student Experience Committee.

37 The audit team confirms that procedures are in place for handling complaints, appeals and alleged academic misconduct, and for reviewing and reporting annually on potential areas for policy and procedural development. One student who met the team had been satisfied with the way in which a complaint had been resolved; others, while describing the procedures as hard to find, knew of a source from which they could seek advice.

38 As noted above (see paragraph 11), a two-tier examination board structure operates, with (in the case of single honours programmes) external examiners members of subject area assessment panels. These panels are overseen by the Board of Examiners for Progress and Award, which determines award classifications. In the case of joint honours and Independent and Professional Studies students a separate Assessment Panel, also attended by the Chief External Examiner, is responsible for reviewing student profiles and making recommendations to the Board of Examiners for Progress and Award. As the proceedings of this panel are not minuted, the audit team cannot comment on the manner in which it conducts its business.

39 Students' work, including placement work, is assessed on common marking scales, with central guidance on local interpretation and implementation. Students told the audit team that they were unaware of how classifications are arrived at; staff, while pointing to the availability of the information on the website, acknowledged that they were themselves uncertain where it was. The team located it but confirms that it is difficult to find from either the homepage or the student section. In addition, while some students confirmed that they had been consulted about changes to their programmes, others were unaware that changes had been made. This level of uncertainty makes it desirable that the University review the effectiveness with which it communicates relevant aspects of its assessment policies to students (see paragraph 90).

40 Faculties provide guidance on assessment feedback mainly through handbooks. At the start of each module students receive a guide containing information on assessment; they also receive written feedback on assessed work according to a schedule published by the faculty concerned. Students pointed to considerable variability in the timeliness of feedback, which, they stated, can take between one week and three months; one student had been told that feedback would not be provided until marks had been ratified by assessment panels. On the whole, students of both on-campus and collaborative provision spoke positively about the quality of the feedback itself.

41 Overall, the audit team found that the University takes a considered and serious approach to assessment.

### **Management information - statistics**

42 The Strategic Analyst, based in the Vice Chancellor's Office and working closely with the Registry, is responsible for producing institutional data and statistics, including admissions, retention and progression (these data are regularly and promptly available, as are annual quality reports and summaries of module evaluation data); measuring performance against key performance indicators; and working with senior colleagues to ensure effective admissions planning. The audit team confirms that the University keeps these matters under regular and senior review, both managerially and deliberatively. The Quality and Student Experience Committee also receives and comments on internal and external satisfaction data, and on the annual report from the Board of Examiners for Progress and Award.

43 In conclusion, the audit team has serious concerns about arrangements for the Independent and Professional Studies Framework (see paragraph 31) and about the operation of delegated powers and chair's action (see paragraph 13); the lack of committee consideration of external examiner nominations (see paragraph 15); the lack of Chief External Examiner oversight of all aspects of assessment (see paragraph 16); the limited nature of the external examiners' report template (see paragraph 17); the lack of timeliness with which quality monitoring procedures are completed (see paragraphs 19 and 24); the lack of monitoring of the cumulative effect of module changes (see paragraphs 20 and 22); and a lack of consistency in master's-level awards (see paragraph 34). Limited confidence can reasonably be placed in the soundness of the University's present and likely future management of the academic standards of its programmes and awards.

## **Section 3: Institutional management of learning opportunities**

44 All aspects of external examining; programme approval, monitoring and review; and institutional engagement with the Academic Infrastructure and other external reference points are described in Section 2.

### **Management information - feedback from students**

45 The University states that it gives high priority to internal and external student feedback (received mainly through module evaluations, representation, and student-staff liaison committees), the outcomes of which contribute to annual evaluations and reviews, and are summarised on the website. For module evaluation it uses an institution-wide questionnaire, with core questions augmented locally; it is completed online, with guidance available. Both staff and students told the audit team that response rates are normally low (the team confirms that the range is 20-73 per cent); not all modules are required to institute feedback procedures every year; few students are aware of the 'How Are We Doing' website (see paragraph 55); some students perceive accessing the online evaluation form as complex; post-evaluation responses are not always clearly communicated and in some cases are not communicated at all (the team confirms that a programme evaluation report made only limited reference to feedback and contained no summary of responses received); and some students, uncertain as to the anonymity of the process, are reluctant to offer feedback prior to receiving their assessment results.

46 The University runs few surveys, relying on module evaluation responses and national surveys as its main feedback vehicles. Here too it acknowledges difficulties in systematically utilising relevant external information. The audit team found that the University's approach to gathering, analysing and responding to student views is less than wholly systematic: it follows that its evidence sources do not contribute optimally to its management and enhancement of the quality of learning opportunities. It is desirable that the University develop coherent and timely mechanisms for gathering, analysing and responding to student feedback across all provision.

## **Role of students in quality assurance**

47 Students are represented at all levels of the deliberative structure. Officers of the Students' Union are members of institutional-level committees and subcommittees and have valued having a role (though not as of right) in recent senior appointments. Students are full members of subject review panels, for which they are trained (see paragraph 24), though not of internal faculty review panels; nor do they necessarily meet such panels. Research students serve on the Research Committee and Research Degrees Sub Committee; an elected student representative serves on faculty quality enhancement committees; programme-level representatives are elected, offered training (though few participate) and can compete for an Effective Programme Representative award. The University considers these arrangements, while effective for full-time undergraduates, less so for part-time, postgraduate and off-site students. The audit team notes that the lengthy agendas of the Quality and Student Experience Committee mean that student experience can be marginalised (see paragraph 8), and students believe they have few opportunities to provide informal feedback (opportunities which do exist include two faculties' dialogue days and focus groups for international students).

48 The audit team formed the view that, overall, while scope exists for improvement, arrangements for student involvement in quality management are broadly appropriate and contribute to the management of the quality of learning opportunities.

## **Links between research or scholarly activity and learning opportunities**

49 The Teaching and Learning Strategy and Research Strategy aim to embed research-informed teaching and enquiry-based learning in institutional pedagogy by supporting research and scholarship designed to enhance student learning. The University is or has been involved in two Centres for Excellence in Teaching and Learning and a Teaching Quality Enhancement Funded project. It has three national teaching fellows, the work of which it has augmented with a network of 41 internal teaching fellows charged with facilitating project-based work in and across faculties.

50 The University aims to monitor the impact of research and scholarship on teaching and learning at all stages of programme design, monitoring and review. Hence, programme evaluation reports are required to discuss the contribution of curriculum-related staff research to quality enhancement, and external examiners to comment on the influence of research on the curriculum. The audit team found, however, that the relevant sections of programme evaluation reports and external examiners' reports are seldom completed in a detailed or informative way; students who met the team were largely unaware of research or scholarly activity underpinning their curriculum, and academic staff were unclear whether research-informed teaching is embedded in the curriculum or how, other than by external examiners, it is monitored. Senior staff, while confirming that the Senior Leadership Team provides strategic direction for learning and teaching, stated that following changes in personnel they do not know where operational (as opposed to formal) responsibility for the

Learning and Teaching Strategy lies, and that senior committees only monitor its delivery through reports to the Quality and Student Experience Committee and Academic Board. The team found this approach unlikely to be adequate to assure the University of the Strategy's effectiveness or to facilitate the mapping of an enhancement agenda. It is advisable that the University specify the means by which institutional academic strategies are implemented and formally monitored.

## Other modes of study

51 The University operates only a limited number of distance-learning programmes. Where flexible or distant learning forms a significant element of a programme proposal, completion of a checklist mapped against the relevant section of the *Code of practice* is required prior to validation; monitoring and review follow standard procedures. These arrangements are satisfactory.

52 Of greater significance is the fact that the University normally requires all programmes to include a minimum 20-credit level 5 or 6 experiential learning component, normally workplace-related; students believe this to be universal practice. The University provides a detailed guidance document for placement providers: this states that the University is responsible for approving proposed placements, providing supervision, and informing the placement provider of the requirements involved, and that the provider must agree learning contracts with students, liaise with academic staff, monitor progress, and provide feedback. The University issues students with a second document specifying the respective responsibilities of student and University; the latter's responsibilities include identifying and providing appropriate professional placements and supporting students as they participate in them.

53 The audit team found that for non-professional programmes:

- placements vary between three days and five weeks, depending on faculty requirements
- academic staff who met the team were largely unaware of these differences
- placements are not always relevant to the programme (and can involve unskilled labour)
- no institution-wide requirements for the nature or internal monitoring of placements exist
- there is no requirement for external examiners to comment, and few do so
- many students feel unsupported in finding and undertaking their placement
- staff are aware of difficulties experienced by students in placement finding (which, however, they emphasise is a student responsibility).

Students also drew attention to the occurrence of serious academic misconduct (involving the submission of fictitious placement documentation) of a kind which would unavoidably threaten the security of academic standards. The University acknowledged that one such instance had recently been detected, and stated that it had taken appropriate disciplinary action; it has yet to institute procedures which will reliably prevent repetition, thereby enabling it to meet in full its responsibilities in respect of Precept 2 of the *Code of practice, Section 9: Work-based and placement learning*.

54 The audit team noted that the University's placement activity has been under review for over a year, but that action is incomplete. In particular, the inaugural meeting of a group established in July 2010 to consider placement mapping against the *Code of practice* did not take place until eight months later, less than a month prior to the audit. While the notes of the meeting confirm that work-based learning is mapped accurately against the *Code of*

*practice*, they do not address the range of issues brought to the team's attention by staff or students and enumerated in the previous paragraph. In the light of these considerations it is advisable that the University expedite its review of non-professional work-based learning.

## Resources for learning

55 For existing programmes the annual planning and resource allocation cycle aims to align learning resources with academic needs; for new programme proposals all resource implications must be identified and centrally approved prior to validation. The audit team noted that, of the service directorates, only YSJ International (a body created by the merger of the International Centre, the International Office and the international student support element of the Learning Development Directorate) conducts its own user surveys; the remainder rely largely on internal and external survey results and student forums. While historically the only formal mechanism for the directorates to communicate improvements to students has been the Students' Union, the team was informed that a subject librarian now attends faculty quality enhancement committees, and, occasionally, validation panels, to improve liaison and information flow, and that such information is now communicated through the 'How Are We Doing?' section of the website (see paragraph 45).

56 Students generally spoke positively about available learning resources, recognising that reservations previously expressed about, in particular, book stocks, study space for research students and opening hours had been given due consideration even where complete resolution was not achieved. They did, however, also take the view, with which the audit team concurs, that scope exists for the University to improve the channels through which it communicates such actions (see also paragraphs 39 and 90). Notwithstanding this point, the team confirms from documentary study that the University has identified the issues concerned, in some cases assigning a risk measure and benchmarking its performance against comparator institutions.

57 On the basis of the information provided and meetings with staff and students, the audit team found arrangements for the provision, allocation and management of learning resources effective in maintaining the quality of student learning opportunities.

## Admissions policy

58 The University is committed to widening access, and has formally introduced alternative entry routes for those lacking normal entry requirements. It has increasingly centralised admissions, with the department concerned (which has been nationally recognised as outstanding) liaising closely with academic departments and producing a comprehensive annual report for the Academic Board with a breadth of statistical information, an outline of the year's activities, a report on actions agreed for the previous year, and an action plan to address issues identified.

59 The audit team confirms that the Admissions Policy, which has been mapped against the relevant section of the *Code of practice*, broadly meets the expectations of the *Code of practice*, although the training of selectors is not mandatory, take-up is low, and training is not offered to collaborative programme admissions tutors (see also paragraph 78). Overall, the University effectively monitors the effectiveness and consistency of the implementation of its admissions policy.

## Student support

60 Responsibility for overseeing and integrating institutional-level student support currently lies with the Directorate of Learning Development; delivery is primarily through the

Holgate Centre, which houses a full range of support services, supplemented by online facilities and additional support for international students. Home students, echoing the student written submission, spoke warmly of these services, though the University is aware that not all international students, some of whom have faced difficulties in areas ranging from visas to social integration and plagiarism, feel so well supported.

61 The University has recently introduced a new Academic Support Policy, with revised guidelines for academic tutors. While the draft policy was sent for comment to faculty quality enhancement committees, awareness of the change was variable among the academic tutors who met the audit team, and senior staff were unable to confirm that a process for communicating the changes was in place. Students who met the team, while all had been assigned academic tutors, said that maintaining contact was their responsibility (this is not policy compliant), that they were (with the exception of those on professional programmes) unaware that personal development planning is universally available and supported by academic tutors, and that not all academic tutors maintain contact with students on placement (again, this is not policy compliant). It is desirable that the University fully and consistently implement and evaluate the revised academic tutor role.

62 Notwithstanding these points, the audit team concluded that the University's provision of student support is broadly appropriate.

### **Staff support (including staff development)**

63 The University's well-publicised human resources policies are supported by a Staff Handbook. All new staff are expected to attend an induction event, assigned a mentor and, unless in possession of a teaching qualification, required to register for a postgraduate certificate programme. Staff spoke well of these arrangements, particularly the mentor system. The University operates a peer observation scheme, which is currently under review. Promotion policies and arrangements for the conferment of professorial title are widely publicised. The University encourages staff to pursue higher qualifications and provides fee remission and financial and practical support for those concerned, and a research leave scheme is in place.

64 Mandatory performance development review is used to identify training needs, which in turn inform staff development programmes. Details of staff development opportunities, some of which are targeted at areas where enhancement needs have been identified, are well publicised and complemented by faculty-organised events on topics of local importance. While partner organisation staff are permitted to attend University development events, those who met the audit team were unaware of this opportunity ever having been taken up (see paragraph 78).

65 Confidence can reasonably be placed in the soundness of the University's current and likely future management of students' learning opportunities.

## **Section 4: Institutional approach to quality enhancement**

66 The University states that deliberate institutional-level steps to improve provision emanate mainly from its current Corporate Plan and from the eight aims of the Learning and Teaching Strategy; it expects the six recently created workstreams (see paragraph 4) to identify enhancement priorities over the next planning period. Stressing that enhancement is institutionally embedded, the University draws attention to estate development; the internationalisation of the curriculum; widening access; the provision of personal development opportunities; and the work of the two Centres for Excellence in Teaching and Learning. In terms of quality management, the University approaches enhancement primarily

through annual evaluation and periodic review; although in this regard it emphasises the importance of student feedback, as noted previously (see paragraphs 45 to 46), it has had only qualified success in obtaining it.

67 The audit team was told that the Quality and Student Experience Committee is the key institutional-level driver of enhancement, although ideas often originate with programme and subject teams; in the course of the audit the team heard of many such ideas and initiatives. While the team also learned that responsibility for translating the Learning and Teaching Strategy into actions and outcomes rests largely with faculties (particularly through faculty quality enhancement committees' consideration of programme evaluation reports and subject and faculty reviews) and departments, it was unable to establish how the University assures itself that this is reliably and effectively done. Accordingly, while a strong institutional commitment to enhancement exists, with staff involved in many initiatives to improve quality, further institutional-level development is needed to enable the University to achieve an agreed institutional understanding of, approach to, and means of monitoring and evaluating enhancement. It is desirable that the University develop a strategic approach to enhancement.

68 The University is committed to enhancing the learning opportunities of its students, but, in that its approach to quality enhancement is not sufficiently systematic, it has some way to go before it can be said to have a strategic approach designed to ensure the enhancement of the quality of its provision.

## **Section 5: Collaborative arrangements**

69 The University's collaborative arrangements are helpfully explained in a comprehensive Collaboration Handbook; they have been mapped against the *Code of practice, Section 2: Collaborative provision and flexible and distributed learning (including e-learning)*, and largely meet its expectations. Where possible, arrangements for the approval, management and review of collaborative provision mirror those for on-campus programmes, with supplementation as appropriate (for example in respect of due diligence and specifying the respective responsibilities of the University and partner organisation in providing learning resources). Other than where stated, these arrangements were found to be generally satisfactory.

70 Collaborative arrangements are managed with the aid of extensive delegation to the Collaborative Provision Sub Committee, which develops and coordinates policy on all relevant quality and standards issues, advises the Quality and Student Experience Committee on such matters as the approval of external examiners and associate tutors, and monitors the programme evaluation reports submitted by the host faculty. These reports and action plans are used in compiling the University's annual quality report and updating the Register of Collaborative Provision. At faculty level too, significant responsibilities accrue, with the head of programme, who also frequently serves as liaison representative, being responsible for quality management, assurance and enhancement.

71 The University adopts three models of collaborative partnership: validation (where a programme is developed and delivered by another institution), franchise (where it authorises the delivery of part or all of its own specified programmes by a partner organisation), and off-site delivery (where teaching is undertaken by University staff, partner staff, or a combination of the two). Of these, the first and third were operational at the time of audit, with 320 students in validated institutions and 534 receiving off-site teaching.

72 On scrutinising off-site delivery arrangements, the audit team found that, whereas the University's approach to collaboration pays due regard to quality risk management by

articulating the level of risk associated with different partnership models, the risk tool it deploys assigns the lowest possible risk score to off-site delivery. The team found that for the University to be assured that policy and procedures associated with off-site delivery are fit for purpose, this assignment would benefit from reconsideration. The team notes particularly that a programme approved for off-site delivery by institutional staff may move to being delivered largely by partner institution staff without the University reappraising the quality implications of doing so (see also paragraph 22). It is advisable that the University make explicit its procedures for monitoring the cumulative impact of changes to modules and programmes, including those delivered off site and in collaborative provision.

73 The audit team looked in detail at the University's relationship with a local college, where, in addition to validating three awards, it provides, through its Higher Education Scheme, a framework for the management, design, delivery and assessment of higher education provision in disciplines it does not itself deliver. The college concerned has developed a scheme document encompassing its arrangements with both the University and another higher education institution in Yorkshire. Since no awards have yet been brought forward, definitive comment would be premature; nevertheless, the framework agreement gives grounds for confidence that the University is in a position to discharge its responsibilities for the management of academic standards and the quality of learning opportunities.

74 The audit team confirms from documentary study that the Collaborative Provision Sub Committee is alert to the need for faculties to follow University procedures for approving collaborative partners, but also that the extent of delegation to the Sub Committee is high and may reflect an underestimation of the risks involved in collaborative activity; there is no guidance for the chairs of relevant committees over the circumstances in which chair's action on collaborative issues is permissible, or over the exercise of the discretion involved; and, contrary to institutional procedures, chair's action from the Quality and Students Experience Committee and the Senior Leadership Team was on at least one occasion sought simultaneously rather than sequentially. Given these considerations (see also paragraph 72), it is advisable (with particular reference to the Collaborative Provision Sub Committee) that the University formally review its deliberative committee structure, in particular specifying the circumstances under which chair's action is permitted and developing guidelines for the exercise of the discretion involved; specifying the level of delegation to, and authority of, each body concerned; and ensuring the effective institutional oversight of academic standards and student learning opportunities.

75 While its collaborative portfolio is currently modest, mainly regional and supportive of an institutional commitment to lifelong learning, the University aims to increase its on-campus international student population by 150 per cent within four years, and its Internationalisation Strategy requires each faculty to provide off-site delivery of at least one programme or module by 2012. Institutional oversight of progress in implementing these ambitions is facilitated through the Academic Board's scrutiny of an annual report prepared by the Head of YSJ International (see paragraph 55); programme and annual evaluative reports; faculty reviews (see paragraph 25); and validation and revalidation. Although references to internationalisation exist in programme and annual evaluative reports, the audit team found that they vary in detail and sophistication.

76 External examiners for collaborative provision are appointed for all levels rather than just levels 5 and 6, as is the case for on-campus provision. The team notes that:

- in the past three years no collaborative provision external examiner has attended the annual briefing event
- staff members expressed concern that they had difficulty in disaggregating cohorts in an external examiner's report

- the external examiners' report template does not request information on the site and mode of delivery of a kind which would better facilitate comment on the comparability of student achievement
- not all issues raised in external examiners' reports (for example a suggestion that students' writing skills be developed) are addressed in a timely manner
- the fact that nominations are signed off by the relevant dean and the chair of the Collaborative Provision Sub Committee without committee-level discussion of nominations reduces the system's formality and independence (see paragraph 15).

It is desirable that the University give consideration to augmenting the external examiners' report template by providing details of the site and mode of delivery of modules examined; providing an opportunity for comment on the nature and adequacy of responses made to the previous year's recommendations; and explicitly requesting comment on the comparability of student achievement, by different modes or locations, for identified cohorts across the institution's provision. It is also desirable (see paragraph 15) that the University institute a formal procedure for institutional-level committee consideration of external examiner nominations, including those for collaborative provision.

77 The audit team found that, while the information provided on award certificates and transcripts relating to collaborative provision is complete in respect of validated and franchised provision, for off-site delivery, contrary to the expectations of both institutional procedures and the *Code of practice*, necessary information is omitted. It is advisable that the University ensure that the names and locations of partner organisations appear on award certificates or transcripts.

78 The audit team was told that staff development for partner staff is deemed important, and that potential partner organisations must demonstrate a strong commitment to it as a condition of approval. While the University makes staff development opportunities proportionately available to relevant staff of partner organisations at institutional level (see paragraph 64), awareness and take-up are very low. Nevertheless, since two faculties have engaged constructively with such staff, the approaches taken there could with benefit be brought to wider institutional attention. It is desirable that the University review its approach to the development of staff at partner organisations.

79 The audit team confirms that its judgements in respect of academic standards and the quality of learning opportunities apply also to awards made in collaborative provision.

## **Section 6: Institutional arrangements for postgraduate research students**

80 At the time of the audit the University had 58 research students (43 full-time equivalents) reading for research degrees of the University of Leeds, of which eight were members of staff. In 2009 the QAA special review of research degree programmes confirmed that overall the University's ability to secure and enhance the quality and standards of its research degree programmes was appropriate and satisfactory. It invited the University to consider five issues, of which the audit team found two (reviewing the instruction, advice and guidance for research degree recruitment interview panels; and providing training and development for research students engaged in teaching) to be, respectively, still under discussion and requiring further attention (see paragraphs 85 and 86).

81 Managerially, responsibility for research and research students rests with the Deputy Vice Chancellor, assisted by the Chair of the Research Committee, research professors and senior researchers. The Research Office provides administrative support;

a dedicated deputy registrar is responsible for liaison with the University of Leeds, maintaining research student records and convening an annual meeting with research students. The Research Committee, which advises the Academic Board on research policy, also monitors and supports research activity and oversees research degree programmes; its Research Degrees Sub Committee monitors student progress and makes recommendations, and the Postgraduate Research Supervisors Forum facilitates cross-institutional discussion of supervision and other topics. At faculty level, research committees oversee and promote research and research degree supervision. These arrangements were found to be satisfactory.

82 The Research Strategy aims to develop a strong and vibrant research culture and enable academic staff to achieve research excellence. It aspires to a 20 per cent increase in submissions to the Research Excellence Framework; a similar increase in the proportion of submissions recognised as internationally excellent; an increase in the number of research students (with particular emphasis on attracting international PhD students); and applying for research degree awarding powers by summer 2013. Since, however, the Strategy does not always allocate responsibility for the achievement of objectives or indicate timelines, its precise relationship with action plans is not always apparent.

83 Postgraduate research students have the use of the Graduate Centre, which provides desk space, computers, lockers, free printing, access to reference books, a meeting room and kitchen facilities; the University provides financial support through both scholarships and expense accounts for the purchase of books, laptop computers and conference attendance. While students who met the audit team appreciated these facilities and support, the University acknowledges that a recent increase in numbers has created strains for which the long-term solution is likely to involve faculties providing space for their students. The University also acknowledges that Library resources are focussed primarily on taught programmes, but explains that research students have access to inter-library loans, electronic resources and the British Library Boston Spa repository.

84 Students are admitted to research degrees in accordance with the regulations and procedures of the University of Leeds, which makes the final decision to admit, appoints supervisors (who are normally but not necessarily members of University staff), and manages or oversees all aspects of assessment, including appeals; complaints are, at least initially, a University responsibility. Doctoral students are admitted to provisional PhD status and assessed for possible transfer to a degree programme within a specified period. The process is thorough; its outcome is reported to the University of Leeds and feedback given to the student.

85 Students are appropriately inducted and normally assigned two supervisors, one of which must hold University of Leeds sole supervisor status (at the time of the audit 19 members of staff had such status). Supervisors work to an agreed maximum load, with compliance monitored by the Research Degrees Sub Committee; their responsibilities and the reciprocal rights of students are clearly specified. Supervisory meetings are recorded and retained by the University, and progress monitoring is reliably undertaken. These arrangements meet the expectations of the *Code of practice, Section 1: Postgraduate research programmes*. Nevertheless, the University has still to address in full the special review's suggestion that it consider reviewing the instruction, advice and guidance for research degree recruitment interview panels. It is desirable that the University bring to a timely conclusion its review of the instruction, advice and guidance for research degree recruitment panels.

86 The University responded to a suggestion of the special review that it consider providing training and development for research students engaged in teaching by inviting voluntary participation in its postgraduate certificate programme. The absence of formal

advance training for such students constitutes a potential threat to the quality of learning of recipients of the teaching; it is advisable that the University ensure that research students engaged in teaching receive appropriate training prior to commencing any teaching or assessment.

87 The means by which the University obtains feedback from research students include the Postgraduate Research Experience Survey, student representation on all relevant deliberative institutional-level bodies and some (but not all) faculty research committees, and individual feedback. The annual evaluation report on research includes a thorough analysis of the outcome of the Postgraduate Research Experience Survey and expresses the need for an action plan to address issues of concern, but does not specify how, by whom or when this plan is to be prepared and implemented.

88 The supervision and support arrangements for postgraduate research students at the University are broadly satisfactory and largely, but not entirely, meet the expectations of the *Code of practice, Section 1: Postgraduate research programmes*.

## Section 7: Published information

89 The University's Admissions and Marketing Department is responsible for externally facing areas (including materials developed by faculties, departments and partner organisations) and maintaining the staff homepage; the Registry manages and maintains the student (including research student) webpages. While the University has confidence in the effectiveness of its oversight of all information and marketing materials produced internally and by collaborative partners, in respect of the latter no systematic post-validation monitoring of websites or other publications is required. Although the audit team accepts that in practice such monitoring may be undertaken by the liaison representative, this duty is not included in the role description concerned. The University may find it helpful to introduce mechanisms to ensure that partner publicity and marketing materials are systematically monitored.

90 All regulations, policies and procedures, including full programme specifications, are available online in a document directory from which staff and students can also access the minutes of university-level committees. Students also receive programme and module handbooks, increasingly through the virtual learning environment. Students, for whom access to this information is through explanatory pages, informed the audit team that they were unaware of important information, including programme specifications, how degrees are classified, and how to make a complaint or lodge an appeal. The team found that this information, though available, is not always readily accessible, but work is continuing on a pilot project to develop a new student portal. It is desirable that the University review the effectiveness with which it communicates relevant aspects of its assessment policies to students (see paragraph 39).

91 While broadly satisfied with the accuracy of information provided, students identified two instances of programmes being oversold to applicants, with consequential disappointment and dissatisfaction. The University is aware of this problem, which one faculty has addressed by involving students in the preparation of prospectus material.

92 It is confirmed that the externally available information required by the Higher Education Funding Council for England guidelines is published on the University's website and that the teaching quality information on the Unistats site appears accurate and complete. However, while the data include a helpful and accurate employability statement, the University has yet to put in place satisfactory arrangements for sharing external

examiners' reports with student representatives. It is desirable that the University ensure that external examiners' reports are consistently shared with students (see paragraph 18).

93 Reliance can reasonably be placed on the accuracy and completeness of the information the University publishes about its educational provision and the standards of its awards.

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