



**University of Cumbria**

**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 the University of Cumbria (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 the University offers.

## Outcomes of the Institutional audit

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

- **confidence** can reasonably be placed in the soundness of the institution's present and likely future management of the academic standards of the awards that it offers
- **confidence** can reasonably be placed in the soundness of the institution's present and likely future management of the quality of the learning opportunities available to students.

## Institutional approach to quality enhancement

The audit team concluded that the University had systems for the identification of enhancement opportunities, and found examples of potential good practice in several areas, but that there were weaknesses in the systems for the dissemination of that practice. In the view of the team, it would be desirable for the institution to fully realise the potential of enhancement opportunities at all levels by developing a more systematic approach to their identification, dissemination and implementation.

## Institutional arrangements for postgraduate research students

The audit team considered that the University's arrangements, on behalf Lancaster University as the awarding institution, formed an effective framework for the management of the academic standards of the research awards in question and the quality of learning opportunities available to its research students. In general, those arrangements are aligned with Section 1 of the *Code of practice for the assurance of academic quality and standards in higher education (Code of practice)* published by QAA, although the team considers it desirable that the University expedite its action in response to the recommendation of the 2009 QAA special review of research degree programmes at the University to introduce benchmarking and performance measurements.

## Published information

Taking into account the recommendation it made, the audit team found that reliance can reasonably be placed on the accuracy and completeness of the information the University publishes about the quality of 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 advisable:

- improve the oversight and management of the quality of student learning opportunities and academic standards at all levels of the University to achieve coherence and consistency of practice (paragraphs 18, 42)
- devise, implement and embed an overarching and integrated approach to the communication of accurate, comprehensive and reliable information to prospective and current students (paragraph 160)
- ensure the effectiveness of planned actions to resolve ongoing capacity issues related to the timely securing of sufficient Education placements (paragraph 81)
- ensure compliance with HEFCE 2006/45 in making programme specifications publicly available (paragraph 157)
- engage fully with the precepts relating to the content of the collaborative provision register and information provided to students in the *Code of practice, Section 2: Collaborative provision and flexible and distributed learning (including e-learning)* (paragraphs 138, 157).

Recommendations for action that the team considers desirable:

- operate the minor change process in a consistent and timely manner in accordance with the University's published procedure (paragraph 54)
- develop and implement a procedure on programme closure (paragraph 58)
- achieve consistency in the operation of the University's processes for managing feedback from students (paragraph 64)
- strengthen the institutional management of blended learning to achieve the University's strategic objective to provide high-quality distributed learning (paragraphs 79, 82)
- share external examiner reports with student representatives, including those studying through collaborative arrangements (paragraphs 30, 132)
- fully realise the potential of enhancement opportunities at all levels by developing a more systematic approach to their identification, dissemination and implementation (paragraph 121)
- expedite the recommendation of the QAA special review of research degree programmes (2009) to introduce benchmarking and performance measurement in monitoring the performance of postgraduate research students (paragraph 155).

## Section 1: Introduction and background

### The institution and its mission

1 The University of Cumbria was formed in 2007 from the amalgamation of St Martin's College, Cumbria Institute of the Arts and the Cumbrian assets of the University of Central Lancashire. This amalgamation was recommended in the HEFCE-sponsored Harris Report (September 2005). The report outlined the need for a regional university that would contribute to the educational, social and economic regeneration of Cumbria. With the exception of postgraduate research programmes, the University awards its own degrees.

2 The University has just over 10,000 students, with 7,471 being full-time and 2,757 part-time. Undergraduates, including Foundation Degree students, make up a little more

than 76 per cent and postgraduate taught students around 23 per cent, with less than one per cent being postgraduate research.

3 The University offers programmes in a broad range of disciplines, which are organised into three faculties: Arts, Business and Science; Education; and Health and Wellbeing. It is based on three main campuses located in Carlisle, Lancaster and Penrith, with further satellite sites in Ambleside, Furness, Whitehaven and Workington and, in London, at Tower Hamlets. The University also works with approved Associate Partners to provide collaborative provision in the form of franchised and validated programmes.

4 In line with the aspirations of the Harris Report, the University is focused on the ambitious development of specialist provision with strong national and regional recruitment, but also on establishing a relevant and accessible offer to students from across Cumbria and the wider region. It is a University of and for Cumbria. Focused on developing strong partnerships and enhancing widening participation, the University aims to combine the campus-focused activity at a number of locations with innovative learning opportunities at 'Learning Gateway' sites and online. Furthermore, the University maintains 'close working relationships with key stakeholders in the professional disciplines', and states that this is central to its activity in supporting Cumbria's workforce development.

5 The University's mission, as set out in the strategic plan, is to '...provide excellent and accessible higher education which enhances the lives of individuals and fosters the development of the communities of which we are a part'.

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

6 The University provided the audit team with a Briefing Paper and supporting documentation, including that related to the sampling trails selected by the team. The index to the Briefing Paper was referenced to sources of evidence to illustrate the University's approach to managing the security of the academic standards of its awards and the quality of its educational provision. The team had a hard copy of a range of the documents referenced in the Briefing Paper; in addition, the team had access to the University's intranet.

7 The Students' Union produced a student written submission setting out the students' views on the accuracy of the information provided to them, the experience of students as learners and their role in quality management.

8 In addition, the audit team had access to:

- reports produced by other relevant bodies (for example, Ofsted and professional, statutory and regulatory bodies)
- the report on the mid-cycle follow up to Institutional audit
- the institution's internal documents
- the notes of audit team meetings with staff and students
- the 2009 QAA special review of research degree programmes at the University.

## **Developments since the last audit**

9 The University has been going through a period of redevelopment, with changes to management structures and faculty hierarchy across the institution. At the time of the briefing and audit visits the University had an interim Vice-Chancellor who had been overseeing the development of an updated strategic plan. The audit team learned that the strategic plan had gone through a number of revisions since the University felt that previous

versions had been too ambitious, especially in light of the various strategic and financial challenges that the University has recently faced and the changing nature of the external environment.

10 The University stated in its Briefing Paper that in devising its approach to quality assurance and enhancement it had the benefit of 'inheriting processes that were generally robust and effective', and could take account of the recommendations of the QAA Institutional audit of St Martin's College in 2003 and the University of Cumbria's mid-cycle follow-up report by the QAA in 2008.

11 The areas of interest noted by QAA during the mid-cycle follow-up were:

- 'the embedding of the single framework of systems, processes and regulations which is planned for implementation in 2010-11; in particular the monitoring of procedures for quality assurance and enhancement within the new institution'
- 'operationalisation and monitoring of the renewed learning and teaching strategy and the new research, scholarship and knowledge transfer strategy'
- 'the new arrangements developed for collaborative provision' and
- 'progress in achieving consistent assessment practice across the institution'.

12 The present audit team found that the University had responded positively to the recommendations contained in its mid-cycle follow-up report in 2008.

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

13 The University was described to the audit team as an institution still in transition following wide-ranging reviews of its governance and strategic planning, and the comprehensive reorganisation of its management, organisation, executive and deliberative structures in 2009-10. Its quality management framework is based on that of one of its legacy institutions, St Martin's College. That framework, through which all the University's higher education academic provision, wherever delivered, is designed, developed and monitored, is described in the annually revised Quality Handbook produced by the Academic Quality and Standards Service. The Handbook also outlines roles and responsibilities of staff and students involved in the management of quality and standards. It is supplemented by additional procedural and guidance documents on StaffNet, for example the Academic Regulations, Procedures and Processes and revised Collaborative Provision Policies, Procedures and Processes. Executive and deliberative committee structures, terms of reference and membership are specified in the Committee Handbook.

14 The Vice-Chancellor, as chief executive, is supported by a Senior Management Team (SMT) comprising the Pro Vice-Chancellor (PVC) (Academic), the PVC (Academic Enterprise and External Relations), the Registrar and Secretary, the Directors of Finance, Human Resources, Estates and IT, and the three executive deans of faculty. A more broadly based University Management Team extends that membership to include associate deans and heads of central services. A revised Strategic Plan and supporting strategies are currently under development.

15 The Vice-Chancellor chairs the Academic Board, the highest academic authority in the University, which has overall responsibility for the academic standards of taught awards and the quality of student learning. Its remit covers research, scholarship and teaching; criteria for the admission of students, enhancing the student experience, student development, support and adjudication; the appointment and removal of internal and external examiners; policies and procedures for assessment and examination of the

academic performance of students; the content and delivery of the curriculum; and the validation and review of courses. The University does not have research degree awarding powers but aims to achieve them by 2015.

16 Following the 2009-10 review, the Academic Board delegates the operational oversight of the management of academic standards, quality and enhancement to two new committees, each chaired by a PVC. The Learning, Teaching and Quality Enhancement Committee (LTQEC) is responsible for taught programmes. The Research and Enterprise Committee (REC) exercises the responsibilities for postgraduate research programmes delegated by Lancaster University, the awarding authority. Various panels and groups report to these committees, including the Academic Collaboration and Partnership Sub-Committee (ACPSC), the External Examiners Panel and the Graduate School Advisory Group. At local level faculty boards have been abolished, so Faculty LTQECs and RECs report directly to their central counterpart committee. Students are represented on most central, faculty and programme committees relating to quality and standards, exceptions being ACPSC and FRECs.

17 Structural reorganisation has rationalised academic provision into three faculties (Arts, Business and Science; Education; and Health and Wellbeing). Each is managed by an Executive Dean, who is a member of SMT and Academic Board and is supported by a Faculty Management Team. An Associate Dean is responsible for the quality of taught provision, chairs the FLTQEC, is a member of LTQEC, and reports to the Dean. Programmes and their modules are gathered into subject-based Quality Groups, which replaced the previous school structure and have responsibility for quality assurance. The Quality Group Lead manages programme leaders. Programme Quality Committees were established across all faculties in 2010-11. Among their responsibilities is the monitoring of cross-campus parity of student experience (including franchised collaborative provision) where a programme is delivered at more than one location. Quality group leads report to FLTEQC on issues raised in Programme Quality Committee meetings. A further Associate Dean is responsible for research, chairs the FREC, is a member of REC and reports to the Executive Dean. A review of the effectiveness of the key elements of the new academic structure is expected to commence in April 2011.

18 The Briefing Paper claimed that the University's framework seeks to balance institutional oversight and responsibility for academic standards with the need to ensure local responsibility for standards at faculty level. Many aspects of the University's framework, for example its academic organisation, management and deliberative committee structure, are so recently introduced that there are insufficient outcomes upon which to base a judgement of their effectiveness, so the next mid-cycle follow-up will no doubt wish to consider this. Procedures for the management of the academic standards of its awards, based on those of St Martin's College, appear to be generally sound, although inconsistencies in the quality of learning opportunities across the University have yet to be fully resolved. The audit team therefore considers it advisable for the University to improve the oversight and management of the quality of student learning opportunities and academic standards at all levels of the University to achieve coherence and consistency of practice.

## Section 2: Institutional management of academic standards

### Approval, monitoring and review of award standards

#### Programme approval

19 The University uses a range of external expert opinion in programme design, approval and review in its efforts to assure academic standards.

20 In its Briefing Paper, the University stated that its strategy for managing academic standards 'is founded on a framework which established and assured the appropriate quality and standards for all its programmes'. The framework, which stems from the University's Academic Regulations and Procedures, is managed through local faculty responsibility, the Academic Quality and Standards Service (AQS) and the University's new executive and deliberative committee structures. Academic standards, which are set and maintained through the University's academic regulations, are established through validation and revalidation processes.

21 The validation process commences with programme approval, which initially is a 'peer review scrutiny process' to ensure that standards, regulations and threshold criteria are met. The APL officer reviews the programme specification before a full validation can commence. From the evidence seen by the audit team, the University's validation process meets the requirements set out in the *Code of practice, Section 7: Programme design, approval, monitoring and review*. The University's threshold criteria were not fully explicated in its Briefing Paper; however, through a review of those criteria and their central importance to the validation process, the team learned that programme proposals were firmly guided by them.

22 Collaborative provision (franchised or validated programmes) follows a process of programme approval and validation similar to home programmes (see Section 5 for details).

23 The validation panel membership, drawn from the Standing Validation Panel, is strongly structured, comprising an approved chair, up to two members from a faculty not involved in the proposal and two academic specialists, acting as external advisers. One of the external members, where appropriate, may be an adviser of standing from industry, and, where required, representatives from professional, statutory or regulatory bodies (PSRBs) are invited to attend. Past and present students also attend. The full validation panel may set conditions, recommend any particular enhancements or recommend non-approval. Any conditions set must relate to the threshold criteria (see paragraph 21). The University operates a streamlined validation procedure for minor awards of 60 credits or less and for changes to an existing programme for which a full revalidation is not required. Validations relating to collaborative provision have chairs and panel members selected from the Standing Validation Panel, who have 'substantial validating experience and/or experience of collaborative provision activity'. Minor changes to programmes, or new stand-alone modules suggested by a programme team or as result of several levels of feedback, including that from external examiners, are dealt with internally. Subject to initial approval by the relevant Faculty Learning, Teaching and Quality Enhancement Committee (FLTQEC), changes are initially signed off by faculty-facing AQS before final approval by FLTQEC. There are no separate procedures for minor changes for collaborative programmes.

24 The audit team examined stage 1 and stage 2 documents for programme approval documentation and was satisfied that these were scrupulously detailed and maintained due academic standards and procedures.

### **Programme monitoring**

25 The University operates a continuous cycle of monitoring, which allows for contributions by stakeholders, staff, students/student surveys, partner institutions, external examiners and PSRB representatives. These routine processes complement the more formal Annual Evaluatory Review (AER), which requires the scrutiny of each programme. The AER reports, written by programme leaders, are submitted to quality group leads, who compile Quality Group-level AERs for dissemination to FLTQECs. The Dean or Associate Dean compiles the faculty-level AER for consideration by LTQEC. A summary of issues requiring action at University level is submitted to the Academic Board.

26 FLTQECs and Quality Groups monitor the progress of action plans across the faculty, and Quality Groups also monitor the progress of action planning. In future, the University's statistical information supporting the AER process will be available as early as mid-September to enable all resit data to be processed and finalised. There is an Exception Report detailing any modules with a failure rate of 20 per cent or more following reassessment. This matter requires commentary in programme-level AERs. From the sample AERs made available, the audit team found rigorous practice in evaluation, but noted that data commentary was more sharply in evidence in the subject reports composed by the Quality Groups than in those composed at faculty level.

### **Periodic review**

27 Periodic review, also termed revalidation, is a five-year cycle of scrutiny of academic programmes. The aims of periodic review are to ensure that the programme's learning opportunities and outcomes, as well as the currency and validity of the curriculum, are at appropriate and satisfactory levels for the named award. Closely aligned with the validation procedure, the process has an additional requirement of feedback from current and past students, including a retrospective critical review, which draws on a number of sources, relevant statistical data, external examiner and PSRB reports. There are also summaries of the learning experience. There is student engagement with the periodic review meeting; however, the audit team learned that there had been irregular student attendance at these events. The team became aware that as an aspect of the University's academic structure, periodic review was relatively unknown to students. A future plan for the University has been the intention to move towards a more holistic method at discipline level. To date, no collaborative programme periodic reviews have taken place.

28 An annual synopsis of periodic reviews is completed by the AQS and presented to the LTQEC to enable scrutiny of any overarching themes, issues and features of good practice. The audit team found the process of periodic review a satisfactory means of addressing the quality and standards of the University's awards. From the periodic review reports seen by the team it deduced that, while these were satisfactory in their review detail, and particularly well cross-referenced and vigorous in the reports, there were some that tended to convey a culture more akin to a voluntary process rather than a mandatory one in terms of contributions and attendance. For example, irregular student attendance and poor participation in some areas were noted in one main report.

## External examiners

29 The University stated in its Briefing Paper that, 'the University regards its external examiners as key to assuring the academic standards of its awards and that they are comparable with those made by other UK HEIs'. External examiners report annually to the Vice-Chancellor on the quality and standards achieved across University programmes. There is a rigorous process for the appointment of external examiners. Nominations for appointment are carefully scrutinised by the Chair of the FLTQEC before approval by an Associate Dean and appointments are made in the categories of subject and award. Nominations from partner colleges are scrutinised by the Quality Group Lead responsible for the process. The criteria for appointment are informed by the *Code of practice, Section 4: External examining*. There is a scrupulously detailed External Examiners' Handbook.

30 All appointment proposals approved by the External Examiners' Panel are recommended to the LTQEC and ratified by the Academic Board. Appointed external examiners are invited to attend an induction day. The External Examiners' Panel has the power to vary the agreed duties of external examiners including, in exceptional circumstances, extensions to appointment and/or remit. Quality Groups are responsible for ensuring that criteria for the appointment of PSRBs are duly met. External examiners' reports, submitted on a standard template, are held centrally with the AQS, which circulate these to faculties. Any serious concerns are addressed to the Pro Vice-Chancellor (PVC) (Academic), the Head of AQS and the relevant Executive Dean. Quality Groups, through programme leaders, are tasked with the responses made to external examiners on any matters arising from the reports and on suggested improvements. External examiners' reports and responses to them are monitored by faculties and are fed to deans, quality group leads and programme leaders, before informing the various AERs. Annual summaries compiled by AQS are considered by the LTQEC. The chair of LTQEC may request them if required. The audit team found no substantive evidence detailing precise arrangements for student contact with external examiners' reports and would encourage the University to consider the desirability of sharing external examiners' reports with student representatives.

31 There is an ongoing dialogue between external examiners and programme leaders, and external examiner attendance at the Module Assessment Boards (MABs) enables any issues of concern to be addressed. The audit team learned that tutor support given to students and the 'quantity and quality of feedback given to students' were recent good-practice issues commended by external examiners. However, the matter of feedback received mixed views in the student written submission (see paragraph 62).

32 A sample of the external examiners' reports and the formal responses to them seen by the audit team was comprehensive in addressing matters relating to academic quality and standards. However, other external examiners' reports seen by the team were not so detailed. Roles and responsibilities for external examiners were found to be sound and operating as stated in the documentation.

33 The audit team's view was that the University has a strong and effective process for external examining.

## Academic Infrastructure and other external reference points

34 The University stated in its Briefing Paper that external examiners 'play an important role' in assuring the University's 'alignment with the academic infrastructure'. This means that they are asked to comment on programme alignment with subject benchmarks, programme specifications, *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ) and PSRB requirements. The University provides a

comprehensive programme specification template for all academic subjects, and a sample of these specifications was provided to the audit team. In the team's view, they were sound in their reference to subject benchmark statements, the FHEQ and other relevant concomitant detail. Guidance given on the FHEQ in the Course Developers' Guide is also sound. The Briefing Paper stated that the FHEQ, subject benchmark statements and sections of the *Code of practice* were considered carefully as part the University's validation process. The team found that the *Code of practice* informed revisions to existing policies as the University continues to develop.

35 Other external reference points relating to the Academic Infrastructure include the University's participation in QAA's Special Interest Group in flexible and distributed learning. With Lancaster University, there is ongoing work towards the introduction of specific benchmarking and performance measurements to research programmes. Support is given to partner colleges in QAA's Integrated quality and enhancement review process. Thematic outcomes arising out of QAA Institutional audit have been considered by the Academic Collaboration and Partnership Sub-Committee (ACPSC) in relation to the University's collaborative provision. The University maintains careful oversight of its work with PSRBs, and their requirements and their operation at validation is clearly outlined in terms of the need to meet a professional body's own professional quality standards. Monitoring of the PSRB inputs and commentaries is managed by the faculty or Quality Group, and guidance is provided by AQS. PSRB reports are monitored through the standard Annual Evaluatory Review (AER), while responses and action plans following these reports are considered by FLTQEC and LTQEC.

36 The University's engagement with the Academic Infrastructure and other external reference points was judged by the audit team to be strongly purposed and effective and to contribute to the management of academic standards. In a wider context, the team encourages the University to consider the *Standards and Guidelines for Quality Assurance in the European Higher Education Area* in any future deliberations.

## Assessment policies and regulations

37 The mid-cycle follow-up review of 2008, among others, identified 'consistent assessment practice across the institution' as a matter requiring further attention, and efforts have been made towards addressing this concern, namely through conferencing (2008-2011) and the production of Guidelines for Good Assessment Practice in Higher Education. The University appears to have lacked pace in mounting consistent, coordinated monitoring, which is evidenced by the newly established Task and Finish Group currently working on such issues in assessment practice. Since the creation of the University in 2007, there has been a published set of Guidelines for Good Assessment Practice in Higher Education, which underwent revision for 2010-11. These assessment policy guidelines provide reference points for practice and contain a clear procedure 'for ensuring robust assessment procedures'. Some students claimed that tutors do not necessarily adhere closely to marking criteria, and the audit team saw evidence of this in examples of the external examiners' reports that it studied (see also paragraphs 88 and 101).

38 The Guidelines for Good Assessment Practice in Higher Education have been compiled through the guidance and contributions made by staff members, remaining open for continual contributions. They comply with the University's Academic Regulations. Assessment for collaborative programmes follows standard procedure, with the same external examiners operating across home and partners, visiting the associate sites, sampling students' work and commenting on its assessment.

39 The two-tier system of MABs and University Assessment Boards (UABs) for internal assessment procedures operates for both home and collaborative programmes, and senior partner colleagues are invited to attend both boards. An anonymous marking procedure is in operation, but is solely applied to written examinations. The entire assessment process is managed administratively by the Student and Management Information Service (SaMIS), a new service created through the amalgamation of faculty administration, student administration services and parts of strategic policy and planning support.

40 The Academic Regulations, in existence since 2007-08, are clearly set out, with a number of significant changes approved in December 2009-10. Further changes to the undergraduate regulations were required for September 2010 to accommodate the alignment of new academic and professional service structures. The University stated that 'it is considered' that the changes to regulations would not disadvantage students. While staff briefings on the changes were held in September 2010 at Lancaster, Fusehill St in Carlisle and Newton Rigg, the audit team found less evidence to suggest that the notification arrangements for students were equally sound. The team noted a lack of formality and coordination, although more informal means of communicating the changes had been in place, namely through email messaging, programme leaders and the Students' Union Rules and Regulations Awareness (RARA) campaign.

41 Concerning the new honours degree classification, there is discretion for examination boards to accommodate 2009/10 students in respect of the new weighted mean and among other areas within the changes to regulations. Faculties have until 2012 to be fully 'in line' with the regulation stipulating the new arrangements for summative assessment. It was explained that this was a necessary, gradual process which took precedence over the need for simultaneous faculty coordination.

42 On considering the University's assessment policies and guidance, the audit team concluded that, although these were soundly conceived, work was still needed in the area of consistency in practice across faculties, programmes and modules. It advises the University to improve the oversight and management of the quality of student learning opportunities and academic standards at all levels to achieve coherence and consistency of practice.

## **Management information - statistics**

43 The Briefing Paper claimed that 'management information underpins the enhancement of the student experience'. Organised across three centres, SaMIS operates across the University. The Student Data Management Unit (SDMU) works in three areas across SaMIS: SITS, assessment and business process review, and data quality.

44 The University's management of academic standards is supported by statistical information via SITS, a system managed by the SDMU under the apex of the SaMIS. This new professional service has overall control over the establishment and maintenance of student records. SDMU, which works across SITS, is a structure which operates methodologies 'surrounding' data management. Management and maintenance of data is undertaken in the Student Information Point (SIP). The rationale for some elements of the new service structure was not wholly clear to the audit team, for example the transfer of programme and module set-up from SITS to AQS. However, the University's increase in emphasis on central administrative management was helpful to the team's understanding of the need for changes in the management and enhancement of data.

45 There is a Student Recruitment, Retention and Achievement Report (SRRAR) compiled by the Student Data Management Unit (SDMU), which is produced annually and presented to LTQEC. This report, which contains data on key trends in student registration,

progression and achievement data and variables on ethnicity, age, campus base and disability, is used as a source to inform AERs, Office for Fair Access agreements, faculty portfolio reviews and by the Vice Chancellor's Office as a means of informing future student matters. The Academic Board recommended improvements to the SRRAR in data presentation, dissemination for action and action planning.

46 All students from collaborative programmes are entered into the University systems; data for monitoring and reporting are provided by SaMIS. Future enhancements for University data include the implementation of a reporting calendar and improvements within the COGNOS system towards increasing accuracy and timely information, with strategies to inform decision-making. Guidance on records management is provided in the University's Committee Handbook.

47 The audit team formed the view that the University was striving creatively to improve its systems for management information to support both the maintenance and the comparability of academic standards across the University and that those systems contribute to the management of academic standards. The team encourages further development in the new professional services.

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

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

48 The University reviews the relationship between its procedures and the *Code of practice* as and when QAA releases revisions or additions to the *Code of practice*. Detailed and thorough mapping of University policies and procedures against relevant sections of the *Code of practice* is undertaken and effectively reported through the Learning, Teaching and Quality Enhancement Committee (LTQEC). The audit team was informed that in view of significant and recent changes to University policies and procedures and in order to ensure that all revised policies and procedures remain aligned to the *Code of practice*, a comprehensive mapping and review exercise is planned in the near future. Although the team found no evidence to suggest that the new and revised processes and procedures do not take account of the *Code of practice*, it supports the University in its intention to undertake this mapping exercise and believes that it will provide additional assurance that this aspect of the Academic Infrastructure is fully embedded.

49 Threshold criteria for the validation of HE programmes are provided as a guide for curriculum development and to act as a reference point for validation panels. The criteria clearly indicate the necessity to take account of subject benchmark statements published by QAA as well as other external reference points such as professional, statutory and regulatory body (PSRB) and Sector Skills Council requirements. Having reviewed a range of validation reports, it was evident to the audit team that validation panels were utilising the threshold criteria effectively to inform their judgements and recommendations.

50 Reference to external reference points is also expected in the annual monitoring process through the completion of Annual Evaluatory Reviews (AERs). In particular, the report template guides authors to consider the impact of any actions or changes to PSRB requirements.

51 The audit team confirmed the University's view that institutional policies and processes for the management of learning opportunities have been developed in line with

the requirements of the *Code of practice* and subject benchmark aspects of the Academic Infrastructure and contribute to the management of the quality of learning opportunities.

## **Approval, monitoring and review of programmes**

52 The Academic Board has ultimate oversight of student learning opportunities, but operationally management is delegated to LTQEC. The range of learning opportunities is detailed in the Learning, Teaching and Assessment Strategy 2009-2012. LTQEC manages the development, implementation and review of the Strategy. At the time of the audit, the University, led by Centre for the Development and Enhancement of Professional Practice (CDEPP) (see paragraph 117), was engaged in revising its Learning, Teaching and Assessment Strategy in order to ensure its alignment with the new University Strategic Plan.

53 Revised processes for approval, monitoring and review of programmes were introduced in 2009-10 and are as described in Section 2 above. The revised processes are based on those of one of the University's legacy institutions, and the University states in the Briefing Paper that the quality framework remains largely unchanged and continues to provide tools to manage learning opportunities effectively. Approval processes are supported by published guidance for chairs and members of validation panels. Training is provided jointly by the CDEPP and AQS for those participating as panel members and threshold criteria for validation are published. The threshold criteria direct panels to consideration of matters related to student learning opportunities, including the learning and teaching strategy for the programme, admissions criteria, student support and guidance, and learning resources. Reports of validation and revalidation events seen by the audit team confirmed that the threshold criteria, as they relate to learning opportunities, were being effectively addressed in the course approval and/or revalidation processes. In particular, the team saw evidence that feedback from students on the quality of their learning experience was always incorporated into the evidence considered by validation and review panels.

54 Minor changes to programmes can be made to modules or courses in accordance with the University's published Guide to Minor Change Process. The guide sets out information on the documentation and process to be followed, with a summary table that indicates the scope of what constitutes minor changes. A flowchart of the process shows the indicative timescales involved. The flowchart states that consideration of a minor change should be completed and approved no later than three weeks before the start date of affected modules. In meetings with students, the audit team was given several examples of changes to modules being introduced after the module had been launched. Students indicated that the late notification of changes had caused some confusion around what precisely was expected of them, particularly with regard to assessment tasks and weightings. In reviewing the documentation associated with the process of approving minor changes, the team saw an example of a minor modification that had a date of approval by the Faculty LTQEC (FLTQEC) one week after the module had commenced. In order that students be kept fully and accurately informed of expectations regarding their learning, the team considers it desirable for the University to operate the minor change process in a consistent and timely manner in accordance with the University's published procedure.

55 The University views annual monitoring as a means of assuring itself that the academic quality of its provision is appropriately monitored and maintained. It uses a process of Annual Evaluatory Review to fulfil this function and this requires the production of AERs at Programme, Quality Group and Faculty levels. AERs sampled by the audit team generally showed careful and reflective consideration of student learning opportunities by course teams and action plans were appropriately constructed, with the aim of improving the student learning experience.

56 Course or programme AERs are fed into a Quality Group AER, which focuses on the processes used for monitoring as well as drawing out institutional-level issues for consideration by the University. AERs produced at all levels of reporting were scrutinised by the audit team, which was satisfied that student learning opportunities were being given due attention at every level of reporting and that significant issues were being accurately reported to the University senior committees. The team agreed with the University's view that the monitoring process provides the University with an effective means of providing assurance that academic standards and quality are appropriately monitored and maintained.

57 The periodic review of programmes takes place through a process of revalidation, which, in most respects, is identical to that of validation, with the exception of the consideration of a Critical Review that is prepared by course teams prior to the revalidation. The guidance and criteria for revalidation are the same as those provided for validation. Examples of Critical Reviews were made available to the audit team and these were found to be very detailed, thorough and appropriately self-critical. Learning opportunities form a specific and significant part of the Critical Review report. Reports of revalidation events seen by the team provided evidence that panels were scrupulous in their consideration of issues pertaining to the student learning experience, including learning and teaching approaches, student support and guidance, learning resources and placement learning, where appropriate.

58 The University's Briefing Paper describes a 'period of intense change' in which the University is focused on the continuous development of its academic offer. To support this development, the University has introduced a new Academic Planning Cycle Process that considers matters of programme feasibility. However, the University was unable to provide evidence that it had in place a specific process for managing the closure of programmes, particularly for those with students currently enrolled. Where programmes are identified for withdrawal, and in order to protect and secure the learning opportunities of students, the audit team formed the view that it is desirable that the University develop and implement a procedure on programme closure.

59 The audit team concluded that, overall, the University has effective procedures for ensuring the quality of students' learning opportunities through approval, monitoring and review.

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

60 The Briefing Paper stated that student feedback is regarded as an important component of the University's quality assurance processes. Student feedback is obtained at module and programme level, including through module and programme evaluation questionnaires, Programme Quality Committee meetings, and surveys focusing on specific services such as Learning Information and Student Services (LISS). Revised and updated Guidelines and Processes for Student Evaluative Feedback were introduced in June 2010 and included the introduction of a programme-level questionnaire, which had not been previously required. The guidelines clearly set out the responsibilities of module leaders, programme leaders and Quality Group leaders in respect of the management of feedback from students. Quality Group leaders are given the overall responsibility for ensuring that student feedback is obtained at both module and programme level for the modules and courses that fall within their area of responsibility. Staff met by the audit team demonstrated a sound understanding of their responsibilities with regard to obtaining student feedback and were fully conversant with the University guidelines. However, the mechanisms for feeding back to students on actions taken in response to their feedback were not fully effective in operation.

61 The module questionnaire consists of 11 questions specified by the University, with the facility for module leaders to add module-specific questions. A template for the programme-level questionnaire has similarly been agreed by the University. The questionnaire is based upon the National Student Survey (NSS) questions, with the facility to add questions that may, for instance, reflect PSRB matters. At the time of the audit programme, these questionnaires had not yet been utilised. The guidelines recommend that surveys be conducted electronically through the facility available in the virtual learning environment (VLE). Both the student written submission (SWS) and students met by the audit team confirmed that opportunities to complete module and programme evaluations are provided as set out in the University guidelines.

62 The SWS indicated that the process of 'closing the loop' on student feedback was not consistent and often not timely. Students whom the audit team met also endorsed this view. The SWS indicated that some module staff use module guides to inform the next year's students what has been done in response to the previous year's students' feedback, in order to show that student feedback did make a difference. However, this is not consistent practice across all modules and is not a requirement of the university-supplied template for Module Guides. The University may wish to consider the usefulness of incorporating this information as part of its Module Guide template.

63 Programme Quality Committees (PQCs), the membership of which includes student representatives, meet two to three times a year. Examples of minutes of PQCs seen by the audit team showed that student representatives were present at meetings and that there was a specific opportunity on the agenda for students to raise issues and to receive feedback on actions taken to address issues raised at previous meetings. From its reading of sample minutes and meetings with students, the team concluded that PQCs were being used effectively to obtain feedback from students and that that feedback was being reflected in the AER.

64 NSS results are discussed at a range of committees at both the faculty and University levels. The audit team saw evidence of the results being discussed at FLTQEC meetings and at the University LTQEC and Academic Board. The Academic Board has set a benchmark for programme leaders that by 2011 all results should have improved compared with the 2009 survey outcomes. The minutes of the LTQEC and Academic Board demonstrate that the survey, its results and subsequent actions are being discussed with scrupulous attention at the most senior levels of the University. In considering the NSS outcomes, the University acknowledges that specific and clearly communicated actions are required to address the concerns of students, particularly those related to organisation and management. In order to improve students' understanding of how the University is responding to their feedback, a communication campaign has been implemented called 'You said...We did'. However, the SWS indicated, and students met by the audit team confirmed, that the University's approach to closing the 'feedback loop' is not yet fully effective. It is, therefore, desirable that the University achieve consistency in the operation of its processes for managing feedback from students.

65 The audit team found that, although the University made effective use of student feedback to assure and enhance the quality of learning opportunities, action should be taken to improve further the communication to students of the responses it makes to their feedback.

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

66 The Students' Union submitted a detailed written submission, which, according to students met during the audit team's visits, was a broadly accurate portrayal of the student experience and which identified issues of relevance to the current student body.

67 There is a comprehensive system for student representation. In addition, students are consulted or are represented on panels, committees and groups and at a recent CDEPP conference.

68 Representatives are particularly active at faculty and programme level. The role of the student representative is clear in documentation, although students are less clear about which representative should be approached to assist them and how to raise issues about support services. Academic staff have been offered advice on how to engage student representatives.

69 The Students' Union has found recruiting, training (undertaken with the office for AQS), and monitoring the system challenging with such a diverse and dispersed community of students, in particular those students studying part-time or who are geographically remote. In future, this will be aided through the employment of a member of Union staff and by achieving more consistent communication through the use of the VLE. Representatives have found some difficulty in understanding the language and systems associated with quality assurance and some committee papers have been late, making consultation with peers difficult. Attendance at committees and at special events such as periodic review is something the University is working to improve. The Students' Union is liaising with University management to improve these issues and some measures are already in place, including the Rules and Regulations (RARA) campaign run by the Students' Union to make University rules and regulations clear and comprehensible.

70 The University expects partner institutions to engage with students in recorded programme-level discussion (for example through a programme committee) and thus feed into the relevant University faculty committee. It acknowledges the need to review the training and support of student representatives for collaborative programmes.

71 An emergent Student Charter makes clear what students can expect from the University and vice versa, although students that the audit team met expressed a desire to have been involved more in its development.

72 Overall, the University shares the audit team's view that there is a secure system of student representation in place for full-time students and those studying on the main campuses. The University has recognised the need to improve representation for part-time and geographically remote learners and is already working with the Students' Union to address this.

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

73 The University is committed to ensuring that teaching is underpinned by subject and pedagogical research. Research and scholarly activity are overseen by the Academic Board through the Research and Enterprise Committee (REC) and its faculty-level associates, which discuss and receive reports on faculty-level related activity and are developing action plans to support the new institutional strategy for Research, Scholarship and Academic Enterprise. However, their main focus is not the link between research and the students' learning experience. There are research coordinators in the faculties, although again their

principle focus is not on developing the link between research and student learning opportunities.

74 The University has identified research, scholarship and enterprise as needing a more structured and coordinated approach and a number of improvements are currently being developed. Research activity is monitored through appraisal, and a review of appraisal is underway, including a sharper focus on the performance management of the research outputs. There is a new database, Insight, for research outputs, including those related to higher education teaching, learning and assessment. Individual staff webpages are under development and there is a commitment to celebrate and make more prominent staff scholarly activity. Personal Scholarship Plans are being introduced, which will enable support for and the monitoring of research and scholarly activity for all staff. A flexible sabbatical scheme is available to support research and scholarship, including staff doctorates. There are plans to support research only in 'niche' areas to develop a critical mass, but the above strategies aim to ensure that all staff undertake scholarly activity, which can then inform the curriculum, as well as teaching and learning strategies. There is a successful Research and Scholarship Fest(ival), as well as a journal and funding for projects linked to research into higher education teaching and learning. Faculty and Quality Group AERs consider research and scholarship.

75 There is clear advice on research-informed teaching available to those developing courses and the guidance given to panel members includes some reference to the use of research in the curriculum. Curricula vitae are also seen by panels. However, although validation reports seen by the audit team consider staff development in relation to pedagogic practice, they are inconsistent in their consideration of how staff research informs the curriculum, and modules focusing on staff research are not actively encouraged in some areas.

76 The University appoints Readers and Professors using 'criteria appropriate for a teaching institution'. Criteria for the appointment of staff do not require teaching staff to have or be willing to obtain a higher degree, although it is a desirable criterion for appointment. It is also an essential criterion for all academic appointments that the applicant should have met standard two of the UK Professional Standards Framework or be willing to achieve this within three years of appointment.

77 Overall, the University is continuing to strengthen the range of systems it has in place to ensure that research and scholarly activity inform student learning opportunities, although this could helpfully receive greater focus during validation and staff appointment processes.

## **Other modes of study**

78 A distinctive characteristic of the University is its distributed nature due to the diverse and disparate student body with its high proportion of part-time and mature students, as well as its multi-campus structure arising from its heritage institutions. It remains committed to distributed learning in its new Strategic Plan. The University reports substantial experience in this area and it has been rapidly developing technology-enhanced learning through the introduction of a range of software packages, funded projects and staff development activities. The University made the case in its Briefing Paper that its use of the VLE and Learning Gateways is good practice, although it adds the caveat that further evaluation of their effectiveness will be needed. Staff and students whom the audit team met acknowledged that, in their minds, there remained some confusion over the function of the new Learning Gateways and that there was a significantly variable level of engagement with

blended learning strategies, including on Foundation Degrees and courses with lower contact hours.

79 The recently disbanded Flexible and Distributed Learning (FDL) Sub-committee made the case that 'the new structure doesn't reflect the importance of FDL in driving forward the Flexible Futures agenda' and noted the need to decide 'where the leadership for this (FDL) should lie in the new academic and professional services structures'. The CDEPP effectively advises and supports staff in the development of the VLE, although it is not responsible for oversight or monitoring of its use across the University. The University does not have a policy or framework for this area of its work, nor is it an explicit and distinct responsibility of any of its deliberative committees. Instead it embeds its strategy and guidance within existing documents such as the Learning and Teaching Strategy. The threshold criteria used in validation require that learning technology be used to the best advantage of students, and validation reports discuss blended and work-based learning, which is clearly recognised as an area of ongoing development for programme teams. The FDL section of the Course Developers' Guide notes that 'there is real variety and scope in the range of understandings of FDL, and e-learning within the institution' and that 'these must be addressed via a unified, clear institutional approach to the issue which all stakeholders can work with'. Given the ambitious and key nature of blended and distributed learning to the University's future and the current variable practice across its provision, the audit team recommends that the University strengthen its management of blended learning to achieve its strategic objective to provide high-quality distributed learning and realise the potential of the investment and good work already underway in this area.

80 Placements are characteristic of many of the University's programmes, not only in the faculties of Education and Health and Wellbeing but also in the faculty of Arts, Business and Science. Each arrangement has a clear and helpful Placement Handbook and staff and students spoke positively of the way the experience enhances student employability. Central guidance is given on placement management, although the relevant section in the Course Developers' Guide is still under development.

81 There is, however, partly because of the University's success with its programmes and partly because of the rural nature of the region, an ongoing and acknowledged problem by staff and students with capacity issues related to the timely securing of sufficient placements on Education programmes. The University is continuing to try to address these issues by extending its placement area outside the region, by encouraging schools to offer more placements through stronger partnership strategies, and through annual monitoring, which has led to plans for closer liaison between subject tutors and the School Placement Office and for student representation on the Secondary Partnership Committee. Nonetheless, this remains a significant ongoing issue and the audit team recommends as advisable that the University ensure the effectiveness of the planned actions for the timely securing of sufficient Education placements.

82 Overall, the University remains committed to investing in and further developing distributed learning, and the audit team recommends that it strengthen its management of blended learning as part of this strategy and ensure the effectiveness of planned actions to resolve ongoing capacity issues related to the timely securing of sufficient Education placements.

## **Resources for learning**

83 Resource allocation is currently fairly centralised, involving an annual meeting between deans and the Head of LISS, which includes external benchmarking, to ensure the

alignment of resources to the strategic plan, and with some funds set aside for strategic development. A new, more sophisticated approach to resource planning is being developed.

84 The University is aware that the distributed nature of its campuses means that careful planning of its learning resources is needed. The winding down of the Ambleside campus and its resources, the decision to close the Brampton Road library and relocate its resources, the delivery of library services across the five locations in Carlisle and the need to use the Schools Library Service in Tower Hamlets have all caused students some concern, which is reflected in the lower than average NSS results for library resources. The University has actively managed these changes to protect learner interests as much as possible and continues to monitor their impact. Students appreciate the recent major investment in books in the arts and funding has been provided to support the institutional strategy to move to a greater proportion of e-resources, which are of benefit to students on all campuses. Generally, students find library staff helpful, including when students are on placement. The University is working with other libraries on an enhancement project and benchmarks itself against other providers. Module guides seen by the audit team include some guidance on resources, predominantly books, although some have little reference to e-resources. Validation ensures library and IT resource implications are thoroughly considered through the completion of a Resource Audit Form, with a special form for collaborative provision.

85 Specialist facilities are generally located on campuses where relevant courses are based, although some external examiners and Programme Quality Committees note a need for updating, which programme teams have addressed through the AER process. Validation considers specialist resources and facilities where appropriate. The biggest concern raised by students was about facilities at the Tower Hamlets site, where there has until now been only one permanent study space, with the University renting facilities as needed from local providers. The University is aware of these long-term issues, has recently secured a second permanent study space and continues to support students on this campus through a local core team of tutors, visiting lecturers from Cumbria and the VLE. Given the level of student concern, the audit team encourages the University to continue to work to improve these facilities, particularly as the Greenwich campus students are to be transferred to Tower Hamlets.

86 Although the back-room IT systems are currently receiving what staff and students note is a much-needed upgrade to align the heritage institutions' systems and to upgrade the VLE, which has caused some operational difficulties, these problems are expected to be resolved shortly, and the investment in ICT has resulted in a range of technologies available for supporting teaching and learning, which are up to date and fit for purpose (online registration, a VLE, e-library account, self-issue machines, single password sign on, on-line assessment submission, an e-portfolio tool, videoconferencing and web-enabled technologies including remote file access).

87 The closure of facilities and the relocation of courses on different campuses have caused the affected students significant concern, although they acknowledge and appreciate that the University has put in place measures to facilitate the transition to new facilities. Staff and students believe that this may be one of the main reasons behind the NSS results for organisation and management, which were well below the sector average.

88 Programme handbooks and module guides are important resources for students, although they comment that their quality varies, particularly in their advice about resources and assessment-related matters, as handbook and guide templates are not consistently followed by programme teams, particularly in the advice provided on resources and assessment.

89 Overall, although managing distributed physical library holdings within a restricted budget and synthesising the online learning resource systems of the heritage institutions has been challenging, LISS (and, before this year, LIS) has actively managed resources in the best interests of students and has strengthened the e-resource provision in accordance with the University's strategic objective to deliver distributed learning.

## **Admissions policy**

90 The University's admissions policy and practice are designed to be fair, consistent and to enable equal opportunity. Working with administrators in External Relations, each programme team has an admissions tutor. Admissions are discussed in the AERs, drawing on appropriate statistical data, although they do not always discuss the potential link between poor progression rates and entry qualifications, even though the admissions process requires there to be a reasonable expectation that applicants should be able to achieve the required standard to be able to complete their chosen course of study successfully. Validation panels consider entry requirements and some admissions issues. They also ensure that entry requirements for stand-alone modules are clear in the documentation.

91 Training on admissions is managed locally within the faculties, although central staff development is available annually on matters relating to equality and diversity. Accredited Prior Learning (APL) procedures are monitored by a standing APL panel. The University is committed to attracting mature students, many of whom are on part-time routes, and admissions for those with non-standard entry requirements is by interview and APL or APEL processes. The Student Recruitment Working Group monitors and reviews admissions. The Academic Board regularly reviews criteria for the admission of students.

92 Students planning to study full-time on the main campuses generally find the prospectus clear, although students needed to talk to staff at open days and interview days to get an accurate understanding of the experience on offer. Information sent prior to enrolment was informative. The InReach project offered an HE information portal for all students proposing to study higher education in Cumbria.

93 Students found enrolment to be well-organised for residential students, but less good for those with other commitments. There is a move to improve enrolment and induction by making it more faculty and programme-based, with administration done centrally in order to meet the needs of part-time, working or remote students and to avoid conflicts such as those experienced by some students with regard to library induction. A recent JISC-funded project has been developing induction support materials. Induction is reviewed annually.

94 International students have pre-registration support from the International Recruitment Office, but once registered they are embraced within mainstream support services, an approach which international students report works well. A task and finish group is reviewing the international student journey and will report to the Pro Vice-Chancellor (Academic Enterprise and External Relations).

95 Overall, the University has secure admissions procedures.

## **Student support**

96 The LISS offers 'advice, information, financial help, services for students with a disability or specific learning difficulties, recreational opportunities, employability, counselling and childcare advice and support'. Services are delivered in an effective partnership between central services, including SaMIS, and named faculty contacts, and students report

broad satisfaction with their support. A one-stop shop approach is being implemented, with teething problems being addressed in an ongoing manner. LISS explicitly offers support for the diverse range of students at the University including part-time, those with disabilities, international students and those studying off campus.

97 LISS includes a team for Academic Liaison, Employability and Wellbeing (Disability), which is centrally organised. Students found the support they received for specific learning difficulties particularly helpful. Guidance on extenuating circumstances is clear, including that for staff on making adjustments to assessment. Employability is managed by the University through the Learning and Teaching Strategy and the Employability Strategy (under review). The audit team saw evidence to suggest that employment for graduates is good.

The careers service, which secured the Matrix quality standard for information, advice and guidance (2007), offers an effective range of services to students, graduates and staff. Validation processes ensure appropriate employer engagement and effective systems for the preparation of students for the world of work. Panels' consideration of student support or learning advice matters in relation to programmes using distributed or work-based learning was variable, but support for international students was discussed where appropriate.

98 Student support is monitored by the Academic Board, through the broad-based University Management Team and through routine annual monitoring processes. The University remains committed to monitoring the impact on students of the recent changes to the organisation's structure for student support.

99 There is a Personal Academic Tutor (PAT) system in place, which is flexible enough to respond to student and course needs, meets minimum institutional requirements and which is supplemented by the advice of module tutors. Students generally found it to be a helpful system, although there was some variability in their experience. The University is already committed to improving support for part-time and geographically remote students. Personal Development Planning (PDP) is normally undertaken through the PAT system, although it is sometimes embedded in the curriculum and some programmes are trialling an e-portfolio system. The support students receive from individual staff members is highly valued.

100 Progression and achievement statistics form part of the AER process and are discussed during (re)validation, but there are inconsistencies in the accuracy and thoroughness of the interrogation of the data. There is a well-developed student progress review system, which can be triggered by staff or students and through which an action plan identifying appropriate support will be developed.

101 Students have raised a number of concerns about inconsistencies regarding the timeliness and quality of assessment feedback, although the NSS results were better than the sector average in this area. One key issue relates to the timeliness of hand-back, because not all tutors return work within the 25 days required. A second issue relates to the helpfulness of the feedback, because, although there is an institutional template for feedback on assignments, some is perceived to be excessively brief, to use comments used in other feedback, referred to by students as 'cloning', or to use Turnitin inappropriately as a vehicle for feedback. The University has good guidance available for its staff and is addressing both matters.

102 Students suggested in their SWS that there is a lack of clarity about how to complain, and the University is aware that the number of complaints about value for money is increasing. Therefore, it is currently reviewing its policies and procedures in this area. There is a full range of other policies and procedures for dealing with other matters related to student support and progression.

103 The University has systems for the management of health and safety in relation to its academic provision, including those for students on field trips and placements, although minor health and safety issues continue to cause concerns for some programme teams.

104 Overall, the University, despite undergoing significant structural changes, has generally well-developed systems for student support, which are appreciated by students.

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

105 The University has recently changed the way it manages staff support, with the CDEPP now responsible for staff development, supported by a Human Resource Strategy. The CDEPP manages professional development in partnership with the faculties, with some central and some devolved budgets and acting in both a proactive and reactive way. In addition to the CDEPP, AQS offers some staff development on quality-related matters such as the Annual Standing Validation Panel Training Day.

106 Students expressed some concerns about the performance management of staff, because of inconsistencies in the quality of teaching and personal support; however, evidence provided to the audit team demonstrated that secure systems are in place. There are procedures and guidance on staff appointments, induction and appraisal, although the latter is under review. There is an annual reciprocal peer review of teaching-related activities. This review can be used in appraisal and is fed into the quality system to ultimately form an annual report to LTQEC.

107 The CDEPP leads the academic staff conferences and offers accredited and more varied and flexible continuing professional development to staff. The University is committed to engaging a wider range of staff with the programme and has been developing the use of an e-portfolio for recording personal development activities. Validation panels also consider staff development, including whether new staff undertake the Postgraduate Certificate in Learning and Teaching in HE. The CDEPP seeks opportunities to engage in funded projects to support staff and enhance teaching and learning. Support on matters relating to diversity and equality is provided by LISS. A Vice-Chancellor's Teaching Excellence Award can be given for good practice in this area.

108 The University realises the challenging nature of the scale of change that staff have and will continue to experience for some time to come and so it has committed itself to supporting staff through a variety of mechanisms. A staff survey identified communication and change management as key issues. The CDEPP has developed resources and holds events for staff involved in change processes. The Vice-Chancellor's Awards reward good practice, and systems for human resource management have been endorsed through the Investors in People kitemark.

109 The audit team found that StaffNet provided staff with easy and efficient access to a range of advice and documentation, including material provided by new service departments, as well as all policies, procedures and other documentation.

110 Overall, the University has generally well-developed systems for staff support, which it has maintained and strengthened as it has passed through a period of change.

## Section 4: Institutional approach to quality enhancement

### Management information - quality enhancement

111 The University states in the Briefing Paper that it has a 'comprehensive approach to quality enhancement which is designed to address current issues, academic developments and sectoral (sic) advances and ensure improvements to our [their] students' experience'. The University has no published or written strategy on enhancement. Enhancement is seen as being embedded rather than requiring a separate strategy or policy. The Briefing Paper points to a range of processes that support enhancement activity, including engaging in systematic evaluation and programme approval processes, and responding to national policy developments and published research on learning teaching and assessment.

112 The University stated that the 'committee structure provides a clear framework for instigating, monitoring and concluding enhancement activities which may be actioned across any part of the University'. As a result of a review of committees, the University Learning, Teaching and Quality Enhancement Committee (LTQEC) has replaced and taken over the functions of several previous committees: the Learning, Teaching and Assessment Committee; Academic Standards Committee and the Student Experience Committee. LTQEC now has responsibility for the development, implementation and evaluation of the Learning, Teaching and Assessment Strategy and is also charged with disseminating good practice in course operation; monitoring, review and validation; and learning, teaching and assessment. Faculty LTQEC's (FLTQECs) terms of reference include responsibility for ensuring 'that the Faculty's policies and procedures on academic standards enhance the quality of the student experience, learning, teaching, assessment and employability...'. In reviewing the minutes of both the University LTQEC and samples of FLTQEC minutes, the audit team concluded that, while there were many instances of the committees considering what was considered good or best practice, there were few examples of the committees considering what aspects of good practice should be prioritised and how such practice could be disseminated and implemented effectively.

113 The University LTQEC has a strategic overview of annual monitoring through the Annual Evaluatory Review (AER) process, the annual summary of external examiner reports and consideration of National Student Survey (NSS) results, and makes recommendations for enhancement on these to the Academic Board. The University uses a variety of data for analysis, including the programme-level recruitment, progression and achievement data, Faculty AERs, Annual Review of Validation and an Overview of Periodic Review, student module evaluations, the NSS results, external examiner reports, and reports on professional, statutory and regulatory body visits. In the academic year 2010-11, LTQEC reviewed, among other matters, the interim review of the student representative system, student recruitment, retention and achievement reports, peer review of teaching, and the outcomes of the NSS.

114 The audit team determined that the University gathered evidence from students from a number of sources with the intention of informing enhancement. Students contribute through the feedback that they give in formal representation on committees and through evaluations of modules and courses, which subsequently feed into annual monitoring, review and validation (see paragraphs 60 to 65). Students confirmed both in the student written submission and in meetings with auditors that their opinions and views are sought, although they were not always fully aware of how their opinions had influenced the improvement of their learning experience.

115 The audit team noted that the requirements for validation panels had recently been revised and that panels are asked to identify enhancements rather than make recommendations at both the first and second stages of validation and revalidation.

However, the Guide for Validation Panel Members makes it clear in explaining 'enhancements', that these are in fact recommendations. In scrutinising validation and revalidation reports, the audit team was satisfied that panels were identifying appropriate improvements or enhancements that could be made and that the chairs of panels had to be satisfied of a course team's rationale for not carrying through a suggested enhancement.

## Good practice

116 Some examples of good practice were reported to the audit team in meetings with staff. Many related to the projects managed by the Centre for the Development and Enhancement of Professional Practice (CDEPP). The Briefing Paper also drew attention to dissemination activities such as Faculty Away Days, online materials for staff, individual support meetings with CDEPP staff for new members of staff and the University's Learning and Teaching Journal. The team found few examples in practice of such dissemination: the main means of disseminating good practice systematically throughout the University appeared to the team to be through professional development courses. Similarly, the team found many examples of opportunities for enhancement being identified, for example through validation, but little evidence that these opportunities are being systematically captured, prioritised and supported through to implementation in a structured and managed way.

## Staff development and reward

117 The CDEPP (see paragraphs 105 and 107) has recently been established to support staff and faculties in improving learning and teaching. It has brought together the former Staff Development section and the Centre for Development of Learning and Teaching with the aim of supporting excellence in professional practice and acting as a key change agent in quality enhancement. The audit team heard in meetings with staff and from consulting the CDEPP webpages that the CDEPP had a key role in supporting the development of flexible and distributed learning and that the service encourages change in learning and teaching practice. The CDEPP is responsible for ensuring the continuing professional development of University staff and the service directs the Leadership and Management Framework.

118 The CDEPP has a member of staff dedicated to each faculty as a first point of contact for questions and support requests. These faculty links advise on any learning and teaching development issues that faculty staff may be interested in. The CDEPP has a wide range of downloadable resources available from its webpages and through StaffNet and also provides staff development courses, which focus on a wide range of topics, including, among many, sessions or courses on e-learning, management and leadership, effective doctoral supervision, equality and diversity, professional and personal effectiveness and research training.

119 The CDEPP also provides the management locus for a number of externally funded projects. The centre bids for projects which relate to University interests. At the time of the audit, the centre was managing five projects, some of which were joint projects with other universities. One, a JISC-funded project entitled the Digital Enhanced Patchwork Text Assessment Project (DePTA) has been designed to develop the use and effectiveness of digitally supported patchwork text assessments in a range of traditional academic subjects within different HEIs. The University, through the CDEPP, is the lead institution for this project and is undertaking a number of dissemination activities such as seminars and conference presentations both within the University and beyond. A significant dissemination tool for the project is the DePTA blog, which provides a running update on project activity. Another project managed by the CDEPP is called 'Capturing the Student Experience' or

'CAPTCHA', a JISC-funded project, which will develop support mechanisms for students from when they are offered a place at the University to the end of their first full year of study. A range of already available technologies, including Blackboard and PebblePad, are being used. CAPTCHA uses learner-generated content to provide students with a varied range of materials about starting life at the University. The audit team saw evidence that information was being disseminated widely across the University using, for example, the University newsletter, 'Connect'.

120 Overall, the audit team came to the view that the CDEPP, although only recently formed, was offering a comprehensive programme of staff development and was working with faculties to improve the quality of the student learning experience utilising a range of approaches. Given that in its new format the centre is still clarifying its direction and purpose, the team was, at this juncture, unable to make any evaluation of its overall effectiveness in terms of impact on enhancement.

121 The audit team concluded that the University had systems for the identification of enhancement opportunities in several areas, but that there were weaknesses in the systems for dissemination. In the view of the team, it would be desirable for the University to fully realise the potential of enhancement opportunities at all levels by developing a more systematic approach to their identification, dissemination and implementation.

## **Section 5: Collaborative arrangements**

122 The University considers that engaging in collaborative provision promotes its mission and supports a key aim of its Business Plan (2010-20) 'to be one of the most admired universities in the country for working with partners to regenerate our region and beyond'. The University states that it retains full overall responsibility for the academic standard of its collaborative programmes and awards, which are expected to be the same as that for a corresponding or comparable qualification in the University, should have student learning opportunities that are appropriate and 'broadly consistent' with comparable programmes, and meet the expectations of QAA's Academic Infrastructure.

123 Initially collaborative activity was focused on a close working relationship with four local FE colleges, primarily delivering Foundation Degrees, but following the end of Cumbria Higher Learning (a Lifelong Learning Network), the University has developed a federation of academic partners based on a tiered structure with different partner entitlements for each level. Tier 1 status applies to key non-HEI partners who deliver HE in Cumbria; Tier 2 includes other broader education and training providers with Cumbria or north Lancashire FE colleges; and Tier 3 includes other education and training providers within north Lancashire and other regional, national and international partners. In the past year, four new partnerships have been approved across the UK and in Europe. The audit team was shown a draft version of the forthcoming revised Strategic Plan, which broadens the University's previous mission to the surrounding region by 'expanding regional, national and international horizons for ourselves and our graduates'. The team was also informed that an international strategy was forthcoming. Several new partnership proposals are currently under discussion. Although there have been increased enquiries from prospective partners, because collaborative activity is still relatively new to the University and a potentially high risk area, it has been decided not to accept further requests until after 2012, but instead to focus efforts on embedding arrangements with current partners and those in development.

124 Approximately five per cent of students (576 out of 10,228) are registered on collaborative programmes, a proportion that has more than doubled since 2009-10 due to approval of new partnerships at a time when the University's home recruitment has fallen. The University currently operates collaborative arrangements with eight associate colleges,

seven in the UK and one overseas, although the audit team noted that, of the 71 programmes in approval, the great majority had never run; only 22 (30 per cent) had recruited in 2010-11, most with student numbers of under twenty. The team was informed that this was due to over ambitious plans at the University's foundation and that the University was considering how best to rationalise provision to reflect current strategic priorities.

125 New arrangements developed for collaborative provision were identified as a key issue in the mid cycle follow-up of 2008. Following their subsequent review in 2009-10, a revised framework, the Collaborative Provision Policy, Procedures and Processes (CPPPP), mapped against the *Code of practice, Section 2*, was implemented in October 2010. The audit team considered this to be a comprehensive document covering strategic context, typology, establishment and management of collaborative arrangements, accompanied by a full set of templates. Activity is overseen by Academic Collaboration and Partnership Sub-Committee (ACPSC), chaired by the Pro Vice-Chancellor (PVC) (Academic Enterprise and External Relations). The responsibilities of the sub-committee encompass strategic development and scrutiny of quality management, and take account of sector developments such as the amplified version of the *Code of practice, Section 2*, and QAA outcomes papers. Membership includes the heads of relevant central units and an associate dean from each faculty. The sub-committee has no partner or student representation. At faculty level collaborative provision is monitored by the Faculty Learning, Teaching and Quality Enhancement Committee (FLTQEC). The University is currently considering allocating formal oversight to an associate dean.

126 Since September 2010 central support and oversight is shared between the Academic Quality and Standards Service (AQS) and an Academic Partnerships Team (APT) based in External Relations (ER), which has become the main contact for partners. The APT also coordinates regular HE managers' meetings for local further education college partners, although there is no equivalent mechanism for more recently approved associate partners based further away. Roles and responsibilities of key central and faculty staff are specified in the CPPPP. AQS maintains the collaborative provision register. The publicly available version on the University's website lists the names of associate partners but does not include the collaborative programmes operated through those partnerships. This does not fully engage with the *Code of practice, Section 2* (precept A4) or with the University's own requirement.

127 The Briefing Paper stated that collaborative provision takes the form of franchised and validated programmes. The CPPPP's typology also includes articulation, accreditation, shared programmes and offsite delivery, but the majority of programmes in approval are validated Foundation Degrees, with a small number of franchised arrangements. The University applies its definition of collaborative provision only to cases where an arrangement is for more than one third of a University award or more than forty credits at any level within an academic year. The very limited amount of provision falling below that threshold is managed by standard quality assurance processes. Faculties also have a small number of partnership arrangements, some of which include joint delivery, that predate the introduction of formal institutional approval. ACPSC has audited this provision and intends to include it within its scrutiny, adding such activities to the partner register. There are no accreditation arrangements in place at present. Articulation agreements are held on a separate register maintained by ER.

### **Approval and review of collaborative arrangements**

128 The CPPPP specifies separate procedures for the approval of institutional partnership and collaborative programme delivery. Proposals for associate partnership are coordinated by APT in liaison with the relevant faculty, and must meet at least two of six

partnership criteria to ensure alignment with the University's mission and Strategic Plan. Initial consideration is followed by an informal visit to the potential partner. To proceed further, the faculty must draw up an academic case and business plan approved by the Executive Dean. Legal and financial due diligence is undertaken by the Faculty Business Manager and signed off by central officers. These documents ('the case for collaboration') are then submitted to ACPSC for consideration using the University's Threshold Criteria for Institutional Approval for Validation and Franchise, which are mapped against the *Code of practice, Section 2*. If approval to proceed is granted, a formal visit to the partner is undertaken by a University panel that includes representatives from AQS, APT, the owning faculty and from another faculty to provide an independent perspective. There is no external involvement. During its visit, the panel considers documentation, meets staff and students, and conducts an audit of resources. The panel's report to ACPSC is rated against compliance with the threshold criteria and, if satisfactory, ACPSC recommends approval to Academic Board. Following approval, which is normally for five years, AQS drafts an Associate Partner Institutional Agreement based on a standard template, which is signed by the PVC (Academic) and an appropriate counterpart at the partner institution. Although none have yet taken place, the CPPPP specifies arrangements for institutional re-approval, which includes a formal visit and new agreement.

129 Delivery of a University programme may only proceed after institutional approval and the grant of associate partner status. It may take the form of the franchise of part of the University's home provision or the validation of a programme only delivered by the partner(s). Programme approval and periodic review follow the University's standard procedures specified in the Quality Handbook supplemented by additional requirements described in the CPPPP. These include: retaining a formal review meeting at phase one; a programme level audit of resources; a student programme handbook (including programme specification); the scrutiny of partner staff; and a draft Memorandum of Cooperation. The programme validation/franchise event normally takes place at the partner or, with permission, by video conference. Two follow-up reviews are conducted at three month and six month intervals after commencement, generating reports that feed in to Annual Evaluatory Review (AER) and are submitted to ACPSC. No collaborative programme periodic reviews have yet taken place, but the outcomes of approval and forthcoming review events are included with those for home provision in the annual overview reports. Following approval, a memorandum of agreement must be agreed and signed before delivery commences. The CPPPP provide a template for each type of programme memorandum, which becomes an appendix to the institutional agreement. Signed agreements and memoranda are held by AQS, which circulates copies as appropriate. Both fully align with precept A10 of the *Code of practice, Section 2*. The audit team scrutinised examples provided by the University and found the processes for partner and collaborative programme approval to be thorough and well managed.

### **Monitoring of collaborative arrangements**

130 Once approved, collaborative programmes are managed at faculty level and are the formal responsibility of the Executive Dean. A University Programme Leader (UPL), for franchise normally the home programme leader or, for a validated arrangement, from the relevant Quality Group, and a Partner Programme Leader (PPL) are jointly responsible for day to day management. Their roles and responsibilities are listed in the CPPPP and include ensuring compliance with University regulations and procedures, regular meetings, and exchange of information and data. The audit team saw evidence of the close working relationship between UPLs and PPLs. AER mirrors that for the University's home provision, with variations specified in the CPPPP. A collaborative programme AER is completed by the PPL with the support of the UPL, based on the standard evidence base. It either feeds directly into the home programme AER (for franchise) or the Quality Group AER (for a validated arrangement), and thus contributes to faculty and institutional overviews. Academic

Board has asked that collaborative data included in the University's annual Student Recruitment, Retention and Achievement Report be collated and shared with partners. From 2010-11, the University has introduced Annual Partnership Review (APR) involving senior staff from both parties, which has enhanced critical appraisal by reviewing the provision of each partnership as a whole, scrutinising documentation (including reports from UPLs) and meeting staff and students. Each APR report and its action plan is considered by FLTQEC and ACPSC, and fulfilment of any recommendations tracked. The first APRs have already taken place and have identified a number of issues, including access to resources and the University's virtual learning environment (VLE), and some communication challenges, which are now being addressed. An annual overall summary of APRs is submitted to LTQEC. The audit team noticed reference to a variety of teething troubles in the operation of newly established partnership arrangements, but was satisfied that the University's systems had successfully picked these up and responded in an appropriate and timely manner. The University is aware of the need to develop its management of information for collaborative activities as the provision grows.

131 In recognition of the need to strengthen its procedures for approving the quality of partner staff who deliver its programmes, the University has established detailed criteria for the expected qualifications and experience of such staff, which are used to scrutinise CVs at validation. The UPL is responsible for approving any subsequent staff changes which, from 2011-12, will be reported as part of the APR. The APT has recently developed a VLE site to provide information, resources and non-academic support for UPLs, PPLs, HE managers and other relevant staff managing collaborative activities. Partner staff are kept informed of changes to University regulations and procedures through regular communication and face-to-face meetings, and supported by events such as an annual conference. They are also encouraged to participate in a wide range of the University's own professional development activities and programmes, for example a number are registered on the Postgraduate Certificate Learning and Teaching in HE and the MBA. The audit team found that partners were aware of, and valued, the good level of support provided.

### **Assessment and external examining of collaborative arrangements**

132 Assessment must comply with the University's Academic Regulations, Procedures and Processes. An assessment strategy is specified in all approved programme specifications and module descriptors. The University sets assessment for franchise, the partner for validated arrangements. In all cases, the partner is responsible for marking and the University for moderation. Standard processes apply for the appointment, role and responsibilities of external examiners, with the same examiners used for franchise and home programmes. External examiners receive additional guidance, are asked to visit partners, to sample from all delivery sites, and to comment specifically on collaborative provision in their reports, which use the University's standard template. Reports scrutinised by the audit team made some reference to performance at different delivery locations, but the team noted that the University is considering the review of its guidance on this to determine whether it is sufficient. Reports are circulated to the partner and, where appropriate, the partner may be requested to respond. As with its home provision, the University was unable to satisfy the team that external examiner reports are routinely shared with student representatives. Reports covering collaborative provision contribute to the summary of external examiner reports considered by LTQEC. The University is encouraged to consider the desirability of ensuring compliance with HEFCE 2006/45 by sharing external examiner reports with student representatives, including those studying through collaborative arrangements.

133 The formal consideration of assessment and its outcomes for collaborative provision is the responsibility of the University's Module Assessment Boards and the University Assessment Board, following standard regulations and procedures, including chairing and servicing arrangements. Attendance is open to appropriate partner academic

staff, and performance data provided by SaMIS from the University's student record system. All certificates and transcripts are issued by the University. The audit team found that the name and location of the partner organisation was recorded on the transcript, taking account of precept 24 of the *Code of practice, Section 2*.

134 Learning and teaching strategies and assessment criteria are published in the programme handbook, programme specification and module descriptors, which are approved at validation. Admission of students must conform with the University's procedures and general entry requirements. Unless agreed otherwise, application is made to the partner, and selection decided in liaison with the relevant University admissions tutor. Students are enrolled with the partner and registered for an award of the University. All students are entered onto the University's student record system, with variations depending on funding category. Induction information and guidance is provided by the University, including a new guide for students at partner colleges. Just as for home programmes, the UPL is required regularly to monitor the accuracy of information issued to partner students, for example concerning access to University resources, and appeal procedures. The partner must issue students with a programme handbook, the programme specification and module guides, each following the standard template, and submit updated versions to the University annually. The audit team scrutinised an example of a collaborative programme handbook and found it to be comprehensive, incorporating information about the relationship with the University and complaints, appeals, and academic malpractice procedures. In addition to an annual review of templates, LTQEC recently required the audit of all collaborative programme handbooks and a sample of module guides to monitor their accuracy. One outcome is the decision to design a specific module guide for use by collaborative partners.

135 Learning and support resources are provided by the partner in accordance with the arrangements agreed at institutional approval and programme validation, specified in the Memorandum of Cooperation, explained to students in the programme handbook, and monitored by AER. All students have some access to the University's learning resources, the level depending on their funding category. The University is currently developing a student entitlement model to provide further guidance on this, and the audit team was initially concerned to discover that this could result in students studying the same programme at different collaborative partners having different levels of access, but was assured that the validation procedure took account of this to confirm that resources were always sufficient and comparable, whatever the delivery location. The team also learned that specific problems relating to student and staff access to the VLE have been fully resolved.

### **Role of students in collaborative arrangements**

136 Partner programmes are not required to establish a formally constituted Programme Quality Committee (PQC) on the University's model, but 'an appropriate forum(s) for programme-level discussion (such as a committee structure), that shall include student representation'. In all cases, for both franchised and validated provision, these forums report to the relevant University PQC. Similarly, the University does not require the use of its own student satisfaction survey mechanisms, but that there must be comparable formal opportunities for staff and students to evaluate modules and programmes, and an appropriate student representative system. It acknowledges the need to improve the training and support of student representatives for collaborative programmes and is considering the review of partner representation activity.

### **Publicity and marketing materials**

137 Collaborative provision is not included in the University prospectus or online All Courses search engine. The UPL approves annual updates to publicity and promotional material relating to the collaborative link. The audit team was informed that ER is responsible for approving information on partner websites and that AQS undertakes spot checks to ensure accuracy. However, the team noted a number of cases where programme details published on partner sites were at variance with the authoritative record held by the University. The University confirmed that collaborative programme specifications are not currently published on either its own or its partners' websites, which does not engage with precept 25 of the *Code of practice, Section 2*.

138 With the exceptions noted above, the audit team considered that the University has robust and effective procedures in place to manage its collaborative provision. The management has been enhanced by the recently revised CPPPP, for example through the introduction of APR at partner level. Although the University has broadened its strategic plan to encompass the consideration of partnership beyond the region, it is taking a deliberately cautious and measured approach to such activities because it recognises the potential risk associated with collaborative provision, and in the short term is focusing on embedding organisational changes. As part of that exercise, the University will no doubt wish to keep its monitoring processes under review, particularly to ensure that the discrete but interlinked functions of APT and AQS remain well coordinated and that, as the provision expands, clear and effective liaison and communication with all partners is retained. The team advises the University to engage fully with the precepts relating to the content of its publicly available register of collaborative provision and the information and publicity provided to students in the *Code of practice, Section 2: Collaborative provision and flexible and distributed learning (including e-learning)*.

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

139 Through a formal agreement with Lancaster University, the University of Cumbria is accredited to offer research degree programmes leading to the awards of MPhil and PhD. The agreement is due to be renegotiated in 2011. Lancaster University is ultimately responsible for: maintaining the Regulations for Postgraduate Students; registering candidates and ensuring that admissions standards are maintained; checking that the University of Cumbria Graduate School is monitoring candidates and dealing with complaints and problems; approving recommendations for transferring candidates from MPhil to PhD or confirming Probationary PhD to PhD registration; appointing examiners; recording the submission date of theses and sending them to the examiners; approving examiners' recommendations and awarding degrees; handling reviews and appeals; and maintaining an overview of all postgraduate activities. It delegates the management of quality and some aspects of the operational management of academic standards to the University of Cumbria, as specified in the agreement. Arrangements are a composite of Lancaster University regulations and procedures supplemented by additional University of Cumbria regulations and practices. As these complement, rather than replace, awarding body requirements, they are not approved by Lancaster University. The University of Cumbria annually reviews alignment with the *Code of practice, Section 1: Postgraduate research programmes*, although its own code of practice for research degree programmes has not itself been revised since 2005. The audit team heard that this is planned to take place in the near future.

140 The University received a QAA special review of its research degree programmes in 2009 to ensure that its arrangements were aligned with the expectations of the *Code of practice, Section 1*. The judgement of the review was that, overall, the University's ability to secure and enhance the quality and standards of its provision was appropriate and

satisfactory. Two examples of good practice were noted and four areas for improvement identified for the University to consider. The audit team viewed the University's formal response and learned that outstanding issues are currently being addressed.

141 The University's research degree provision is centrally managed through the Graduate School (a discrete unit within the Academic Quality and Standards Service (AQS)) based at the Lancaster campus, headed by the Director of Research and Graduate Studies, who reports to the Pro Vice-Chancellor (PVC) (Academic). Both posts are recently established. The Director is the main point of contact with Lancaster University, although liaison arrangements have changed following restructuring at Lancaster. All research students are members of the School, which predates the University and is a legacy of St Martin's College. Its role is to 'administer, integrate and nurture' research degree provision across the University through its programmes and systems, the School virtual learning environment (VLE), and the Graduate School Office. In the revised deliberative structure, Academic Board's Research and Enterprise Committee (REC) is responsible for the oversight of 'all matters related to research students in the University, including enhancing the student experience, registration, supervision, support, progression, submission, liaison with Lancaster University and the work of the Graduate School'. Following the 2009-10 review, REC delegates operational responsibilities to the Graduate School Advisory Group (GSAG), chaired by the Director, which reports to the committee, and also to the Learning, Teaching and Quality Enhancement Committee (LTQEC) on quality matters. Its membership includes the PVC (Academic), faculty staff with research programme responsibilities, student representatives, and the Dean of Graduate Studies at Lancaster University. Initial concern expressed by Group members of the danger that the Graduate School was being marginalised within the University's new structure has eased, particularly following the new senior appointments.

142 The GSAG's remit includes: the management and development of the School; the management and quality assurance of research degree programmes; the consideration and approval of proposals for research degree programmes; the consideration of the Annual Evaluatory Review (AER) for research degrees and for proposing and monitoring any action arising; the oversight of the student experience of research degree programmes, including interview, admission and registration, progress, transfers and final examinations; and the oversight of liaison with Lancaster University on all matters relating to postgraduate research students. REC, LTQEC and the GSAG all monitor student progress, primarily through the research degree programme AER, which analyses internal statistical data on admissions, transfer and completion, and includes an action plan. The QAA special review recommended that, in light of precept 4 of the *Code of practice, Section 1*, the University may wish to consider the use of benchmarking and performance measurements in the near future. The University's response to the special review confirmed that it would consider this, and the latest AER (2009-10) stated that the Graduate School is currently reflecting on how to address the issue. The audit team learned that this was still under discussion and has yet to be resolved. The AER also acts as the annual institutional reporting mechanism to Lancaster University, where it is submitted to the Dean of Graduate Studies. The team heard that the two universities are currently considering how to formalise the response to the AER as part of discussions following the Lancaster University restructure.

143 There is no remit for the formal oversight of postgraduate research student performance in the terms of reference for Faculty Research and Enterprise Committees (and thus no student representation) or in the job description of the newly established post of Faculty Research Coordinator, although the audit team heard that coordinators play an important part in liaising with the Graduate School to identify and support appropriate supervisors, and with their Associate Dean with responsibility for research over issues of supervisor workload management. The team heard that devolution of further responsibilities may evolve in future.

## The research environment

144 Seventy postgraduate research students are registered in 2010-11; 80 per cent study part-time and 30 per cent are University of Cumbria staff. Registration is spread somewhat unevenly across the three faculties. The audit team learned that the recently approved Research, Scholarship and Academic Enterprise Strategy has not set a specific target for an increase in research students because the University is prioritising capacity building among its staff following the loss of some well qualified supervisors. The relatively small number of postgraduate research students, many of whom are in full-time employment conducting research related to their professional practice, means that the University has a research profile untypical for the sector. It improved its performance in the 2008 Research Assessment Exercise (despite being only three months old) compared to that of its legacy institutions in 2001, but recognised that it should develop a more vibrant research environment. The new strategy aims to promote more research degree programmes undertaken by University staff, while recognising that staff involvement in research may vary significantly, so one of its key objectives is to concentrate in designated 'niche' areas, to present the best chance for external funding. Under Lancaster University regulations, staff may apply for the award of PhD by published work or by alternate format. The University encourages research through initiatives such as its sabbatical scheme, staff development opportunities and funded studentships, and participates in a number of national and international research projects. It holds an annual Research and Scholarship Fest and a Doctoral Colloquium, which were identified as good practice by the special review. The University provides researchers with online access to research databases, journals and collections. Postgraduate research students may join Lancaster University Library as associate borrowers but are not entitled to access its electronic resources.

## Selection, admission and induction of students

145 There is no prospectus for research degree programmes, but the Graduate School website provides a brief introduction, specifying minimum entrance requirements and offering an indicative list of potential fields of study. The audit team heard that applications are encouraged in those niche areas identified in the Research, Scholarship and Academic Enterprise Strategy. All enquiries are directed to the Graduate School Office, as applicants are dealt with centrally. Application follows the procedures of Lancaster University and is described in the Graduate School Handbook. It requires the submission of an admissions form and research proposal, and normally (unless the applicant is a member of staff) a formal interview. All applications are considered by an admissions panel comprising the potential supervisor, a resource holder from the appropriate faculty, and the Director of Research and Graduate Studies (or a 'suitably qualified' alternative who is a member of REC or the Graduate School Advisory Group). Some variation is permitted, but the panel must comprise a minimum of two staff. Briefing and guidance is provided for panel members. Successful applicants are admitted by Lancaster University on the recommendation of the Director, initially either for MPhil or Probationary PhD. The QAA special review recommended that, in light of precept 8 of the *Code of practice, Section 1*, the University may wish to consider ensuring that all members of interview panels have received instruction, advice and guidance in respect of selection and admissions procedures. This matter has been addressed in the current edition of the Graduate School Handbook.

146 Registration may be in either October or April, with induction provided by the Graduate School and the main supervisor according to set guidelines. Students are issued with the Lancaster University Postgraduate Handbook, Postgraduate Regulations and University Rules. In addition, they receive the University of Cumbria's comprehensive and annually revised Graduate School Handbook, which is circulated electronically to students

and supervisors. This includes the University's own code of practice for research degree programmes, which outlines the entitlements and responsibilities of both student and supervisor, and is informed by and mapped against each precept of the *Code of practice, Section 1: Postgraduate research programmes*.

## **Supervision**

147 A supervisory team normally comprises up to three staff. The main supervisor, who is the primary point of contact, must be a member of staff not under probation, hold a qualification at least at the level that the student is working towards, and should already have supervised to completion, or be mentored by another member of the team who is an experienced supervisor. One member of the supervisory team is identified as support tutor, with whom the student can discuss matters that may be difficult to take to the main supervisor. This arrangement was identified as good practice by the QAA special review. New supervisors are mentored and apprenticed to ensure they develop appropriate expertise.

148 Supervisors are offered guidance and development opportunities, for example on effective doctoral supervision, and on the processes for transfer or confirmation registration. The University has a policy that no member of staff should normally be the main supervisor for more than six research students (whether full-time or part-time), and many existing supervisors have reached capacity. There is no limit to the overall supervisory load, but this is discussed at annual staff appraisal. The University is aware that it needs to build supervision capacity, especially after the recent loss of experienced staff due to voluntary severance. Over 40 per cent (30 out of the then 67) of MPhil and PhD candidates were affected by members of academic staff leaving post at the time of the University's restructure. Special measures were required to ensure that all research students retained full supervisory teams, for example by employing emeritus readers and professors on a temporary basis. A small number of students were left without supervision at the end of 2009-10, but this was resolved before the start of the new academic year. All students were contacted in September 2010 to explain the University's restructure and to notify them of their full supervisory team. This was followed up in January 2011 to confirm that new arrangements were running smoothly. The audit team considered that the operation of this process to address such a potentially high risk situation was handled very effectively and great care taken to support the students concerned.

## **Progress and review arrangements**

149 The University's code of practice specifies requirements for progress and review, in compliance with Lancaster University regulations. A full-time student is entitled to supervision of at least one hour a fortnight, part-time to at least an hour a month, supplemented by online and telephone support. There is also a Graduate School VLE. Supervisors are expected to keep brief accounts of supervisory sessions. An initial draft programme, based on the research proposal, is drawn up and approved by the supervisory team. Annual assessment of progress, including a recommendation whether to approve continuation, normally consists of a presentation to the supervisory team and the completion of Lancaster University appraisal forms by both student and main supervisor. Sharing of content is encouraged. Supervisors and students are also requested to complete University of Cumbria mid-year questionnaires. Both sets of forms are evaluated by the Graduate School and used to inform the AER, which monitors response rates (over 80 per cent for 2008-09 and 2009-10) and issues raised. Annual appraisal forms are submitted to Lancaster University.

150 A major progress review is held to consider a student's transfer from MPhil to PhD or from probationary to confirmed PhD status. This takes the form of scrutiny of a substantial proposal by a transfer panel, usually comprising the main supervisor, a subject specialist to provide independent expertise, and the Director of Research and Graduate Studies to ensure parity of standards and practice. A recommendation is submitted to Lancaster University, which circulates notification of the decision.

### **Development of research and other skills**

151 The University expects research students to undertake an appropriate range of generic and transferable skills training, selected in consultation with their supervisory team, for example through participation in the research skills development programme or the research degree summer school, and by presentations to the annual Doctoral Colloquium, the Research and Scholarship Fest, and faculty research seminars. A Personal Development Plan (PDP) is used to chart development and plan future needs. The Plan recommends keeping a reflective journal, recording meetings with the main supervisor, and expects the completion of a skills log based on the Research Council's research skills statement, although the audit team found that this was not always complied with. The attainment of each skill is signed off by a supervisor and the log copied annually to the Graduate School Office. A full-time student must undertake an average of two weeks' skills development for each year of registration, and the achievement of appropriate development activities is a condition of transfer. The University has ethical and lone worker policies in place for both research staff and students. Research students are required to be trained before undertaking any teaching activities, for example by completing the University's Postgraduate Certificate in Academic Practice.

### **Feedback mechanisms**

152 Both Universities utilise formal feedback mechanisms, primarily through the annual review and mid-year questionnaire, with outcomes analysed in the AER. The University of Cumbria also participates in the Postgraduate Research Experience Survey (PRES), achieving very positive results, and undertakes internal surveys to monitor the quality of provision. Research students also have the opportunity to contribute opinion through their representation on REC, and the GSAG, which has formal responsibility for considering feedback and for appropriate communication of findings. A member of the Library staff responsible for research, including research students, sits on REC and is thus able to provide liaison with Learning Information and Student Services (LISS). The Director of Research and Graduate Studies regularly attends the research skills development programme, enabling students to offer informal feedback.

### **Assessment**

153 All arrangements and regulations for the assessment of research students, including the criteria for awards, preparation for, and administration of, the process are determined and/or approved by Lancaster University, and are issued to staff and students in the Graduate School Handbook. Examiners, at least one of whom must be external (two in the case of a staff candidate), are provisionally appointed by the Director of Research and Graduate Studies and formally approved by the Dean of Graduate Studies at Lancaster University. Lancaster University regulations state that the main supervisor 'where practicable' should not act as an examiner, but when that is the case, an additional examiner (internal or external) is appointed. The QAA special review recommended that, in light of precept 23 of the *Code of practice, Section 1*, the University may wish to consider clarifying the circumstances in which an internal examiner is part of the examination panel for a candidate who is also a member of staff and/or a supervisor is part of the examination panel.

The audit team heard that this had never occurred at the University, and the intention remains to avoid it. The Director of Research and Graduate Studies (or an appropriately experienced alternative) normally acts as independent chair of the oral examination, to observe and manage the meeting, and to ensure consistency of practice across the University. The roles and responsibilities of the chair and examiners are set out in the regulations and guidance contained in the Graduate School Handbook. Before the examination the supervisor is encouraged to arrange a practice oral. Each examiner submits an independent report on the thesis to Lancaster University before the oral examination, and a further report and recommendation afterwards. Lancaster University informs the student, the examiners and the University of the outcome.

## **Representations, complaints and appeals procedures**

154 Research students are represented on REC and the GSAG. Informal representation includes involvement in faculty meetings, the provision of discussion boards on the Graduate School VLE and access to the Director of Research and Graduate Studies. Information on complaints and appeals is contained in the Graduate School Handbook. A formal complaints procedure is available for issues that cannot be resolved informally, but the Briefing Paper noted that, to date, no research student has requested to invoke it. An appeal against a transfer decision is dealt with by the University of Cumbria, through a committee specially convened for the purpose. Appeal against a final examination decision falls within the remit of Lancaster University's regulations for postgraduate research students. Two appeals have been made by students during the fifteen years of delivery of research degree provision at the University and its legacy institutions, both of which found in favour of the student. The QAA special review found that no timescales were provided for either process. In the light of precept 27 of the *Code of practice, Section 1*, it recommended that the University of Cumbria should consider making clear the timescales for the various stages in the appeals processes.

155 Students who met the audit team confirmed that what was expected of them was clear, and were satisfied with the information, supervision, training and learning resources provided for their support. The team considered that the University's arrangements, on behalf Lancaster University as the awarding institution, formed an effective framework for the management of the academic standards of the research awards in question and the quality of learning opportunities available to its research students. In general, those arrangements are aligned with the *Code of practice, Section 1*, although the team considers it desirable that the University expedites its action in response to the recommendation of the special review to introduce benchmarking and performance measurements.

## **Section 7: Published information**

156 The Vice-Chancellor's office (VCO) has ultimate responsibility for all corporate information, both internal and external. The University currently has three communications strategies:

- the Student Communications Strategy (SCS): this is currently in draft form and the audit team was informed that work, in collaboration with the Students' Union, is ongoing
- the Internal Communications and Engagement Strategy (ICES): the ICES was implemented in 2009 and is accessible to all staff via StaffNet
- the Communication and Stakeholder Strategy (CSS): the CSS is intended to enhance and improve the reputation of the University so as to support the delivery of the business and recovery plans.

157 The External Relations office is responsible for all published material, including the website and prospectuses. It liaises with faculties so as to assemble and disseminate all relevant programme information. At meetings with staff, the audit team learned that programme specifications were written for prospective students. It would advise compliance with HEFCE 2006/45 to ensure that programme specifications are made publicly available. The External Relations office is also responsible for overseeing the information published on the websites of the University's collaborative partners. The team saw evidence to suggest that not all of this information adheres to the *Code of practice, Section 2* (see para 145).

158 The University stated in its Briefing Paper that the website is a critical means of communication and is working on further enhancement of the site. The audit team learned that a two-phase project is in place, commencing in spring 2011, to update the current website and then to improve accessibility for all stakeholders. The new website is to be launched in May 2011.

159 Global emails are used to inform staff and students about a variety of University activities and news. However, the audit team learned from staff that it met that there is no clear remit for these emails. Information is also provided to staff through StaffNet and to students via the respective faculty's virtual learning environment (VLE), although students told the team that this information varied between faculties.

160 In conclusion, staff and students whom the audit team met indicated that the information, ranging from the prospectus through to module guides, provided by the University was accurate and reliable. However, despite the various strategies that are in place, and the various means of communicating with staff and students discussed in paragraphs 165-167, the team found inconsistencies in communication and was unable to find a clear, cohesive strategy for communicating information (see also paragraphs 48, 72, 96 and 100). It therefore advises the University to devise, implement and embed an overarching and integrated approach to the communication of accurate, comprehensive and reliable information to prospective and current students.

161 With the exception of the recommendation above, the audit team concluded that reliance can reasonably be placed on the accuracy and completeness of the information that the University publishes about the quality of its education provision and the standards of its awards.

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