

**Annex to the report****Contents**

<b>Introduction</b>	<b>3</b>
Outcomes of the Institutional audit	3
Institutional approach to quality enhancement	3
Institutional arrangements for postgraduate students	3
Published information	3
Features of good practice	3
Recommendations for action	4
<b>Section 1: Introduction and background</b>	<b>4</b>
The institution and its mission	4
The information base for the audit	5
Developments since the last audit	5
Institutional framework for the management of academic standards and the quality of learning opportunities	7
<b>Section 2: Institutional management of academic standards</b>	<b>10</b>
Approval, monitoring and review of award standards	10
External examiners	12
Academic Infrastructure and other external reference points	12
Assessment policies and regulations	13
Management information - statistics	14
<b>Section 3: Institutional management of learning opportunities</b>	<b>15</b>
Academic Infrastructure and other external reference points	15
Approval, monitoring and review of programmes	15
Management information - feedback from students	16
Role of students in quality assurance	17
Links between research or scholarly activity and learning opportunities	18
Other modes of study	18
Resources for learning	19

Admissions policy	19
Student support	20
Staff support (including staff development)	20
<b>Section 4: Institutional approach to quality enhancement</b>	<b>22</b>
<b>Section 5: Collaborative arrangements</b>	<b>23</b>
<b>Section 6: Institutional arrangements for postgraduate research students</b>	<b>29</b>
<b>Section 7: Published information</b>	<b>34</b>

## Introduction

A team of auditors from the Quality Assurance Agency for Higher Education (QAA) visited the University of Huddersfield (the University) from 15 to 19 March 2010 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.

On this occasion the team carried out a hybrid Institutional audit. The hybrid process is used where QAA considers that it is not practicable to consider an institution's collaborative provision as part of standard Institutional audit, or that a separate audit activity focusing solely on this provision is not necessary.

As part of the process, the team visited two of the University's partner organisations in the UK, where it met with staff and students, and conducted by videoconference equivalent meetings with staff and students from one further overseas partner.

## Outcomes of the Institutional audit

As a result of its investigations, the audit team's view of the University of Huddersfield 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 found that the University has structures in place to ensure there is quality enhancement at an institutional level, driven through the University's Strategy Map and associated Teaching and Learning Strategy.

## Institutional arrangements for postgraduate research students

The audit team found that the institutional framework for postgraduate research students provided an appropriate research environment and student experience. The institutional arrangements, including those for support, supervision and assessment, were rigorous and effective and met the requirements of the *Code of practice for the assurance of academic quality and standards in higher education (Code of practice), Section 1: Postgraduate research programmes*.

## Published information

The audit team found that, overall, reliance could 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.

## Features of good practice

The audit team identified the following areas of good practice:

- the use of the Strategy Map to drive and coordinate change across the University (paragraphs 13, 89, 117 and 124)
- the proactive approach taken by Computing and Library Services to ensure that it meets the needs of a diverse student body (paragraphs 90 and 117)
- the comprehensive and systematic support the University provides for its students (paragraphs 99, 101 and 103)

- the contribution to quality enhancement made by the various ways of recognising staff and student achievements (paragraph 118).

### **Recommendations for action**

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

Recommendations for action that the team considers advisable:

- review the University's committee arrangements to ensure that Senate has full oversight of academic matters as specified in its terms of reference (paragraph 24)
- review regulations and policies with respect to assessment in order to eliminate potential inconsistencies of practice (paragraphs 55-58)
- take steps to ensure full adherence to University policies with respect to public information regarding courses offered by partner organisations (paragraphs 157, 158 and 195)
- formalise the University's processes for the ethical approval of research projects and the appropriate reporting of such approvals (paragraph 184)
- ensure that all postgraduate research students receive appropriate training before they undertake teaching duties (paragraph 185).

Recommendations for action that the team considers desirable:

- use experts external to the University in all validation panels (paragraphs 37 and 42).

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

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

1 The University of Huddersfield traces its roots back to the 1825 Huddersfield Scientific and Mechanical Institute, through the 1884 Technical School and Mechanics Institute, the designation as a Polytechnic in 1970, to the granting of degree awarding powers and University designation in 1992. The University is based on three campuses: Queensgate, in the centre of Huddersfield, and two smaller campuses established in 2005 at Barnsley and Oldham.

2 The University's vision is 'To be an inspiring, innovative University of international renown'. This vision underlies the University's mission, which is:

- 'To deliver an accessible and inspirational learning experience
- To undertake pioneering research and professional practice
- To engage fully with employers and the community.'

3 As of December 2009, the University had a total of 20,836 students studying on its three campuses. Queensgate, the largest campus, had 10,111 full-time and 3,522 part-time undergraduates; 589 full-time and 2,186 part-time postgraduate taught students; 658 postgraduate research students; 682 overseas students, of which 241 were postgraduate; and 558 sandwich students on placement. Barnsley was base to a total of 1,326 students, which comprised 745 full-time and 381 part-time undergraduates; 20 full-time and 177 part-time taught postgraduates; and three overseas undergraduate students. Oldham had a total of 1,206 students, composed of 712 full-time and 391 part-time undergraduates; 18 full-time and 78 part-time taught postgraduates; and seven overseas undergraduate students.

4 At the same date, the University collaborated with seven international partners and 30 partners in the UK, of which 27 participated in a national Consortium for Post Compulsory Education and Training. In all, 5,025 students over and above the on-campus numbers were studying under collaborative arrangements. Collaborative provision in the United Kingdom supported 238 full-time and 2,975 part-time undergraduates, and 11 full-time and 62 part-time postgraduates. Overseas provision comprised 1,069 full-time and 661 part-time undergraduates, and four full-time and five part-time taught postgraduates.

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

5 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 all documents referenced in the Briefing Paper; in addition, the team had access to the institution's intranet and an electronic repository of documents.

6 The Students' Union produced a student written submission (SWS) 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.

7 In addition, the audit team had access to:

- the report of the previous Institutional audit (December 2004)
- the report of the Collaborative provision audit (March 2007)
- Integrated quality and enhancement review reports published by QAA since the previous Institutional audit
- the report of QAA's Review of postgraduate research programmes (2006)
- the report of the Major Review of Healthcare Programmes (December 2005)
- an audit of overseas provision provided in collaboration with the Institute of Hotel Management, Aurangabad (India), (June 2009)
- reports produced by other relevant bodies (including Ofsted and professional, statutory or regulatory bodies)
- the University's internal documents
- the notes of audit team meetings with staff and students.

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

8 The 2004 Institutional audit report identified good practice in the steps taken to support students; the use made of the University's Applicant and Student Information System (ASIS); the robustness and apparent effectiveness of annual evaluation and responses to external examiners; arrangements for thematic and service reviews; the links made between formative and summative assessments in some areas; and the University's draft e-learning strategy. Three advisable recommendations related to; defining criteria about the use of discretion in degree classification; the incorporation of professional body activities into annual and periodic monitoring and review; and the development of the process for the confirmation and recording of module marks by pathway assessment boards. Six desirable recommendations concerned the development of policies related to disseminating and embedding good practice; developing quality assurance arrangements for e-learning; considering the more strategic use of ASIS in managing quality and standards; keeping under review the student evaluation system; taking steps to ensure that the moderation of marks takes place and is recorded; and clarifying

regulations to ensure that requirements with respect to the participation of external peers in all validations and approvals are unambiguously stated.

9 From its study of documentation and its meetings with staff and students, the audit team was largely satisfied that the University had responded positively and effectively to the recommendations of the 2004 audit. As three of the recommendations focused on aspects of regulations and their application, and as the University had been recently engaged in significant changes to regulations, including those in relation to classification, the use of discretion and the transparent recording of assessment decisions, the team looked carefully at University practice in those areas. The team concluded that there remained some potential for inconsistencies in assessment practice, especially in the use of discretion (see paragraphs 53-58).

10 The 2006 Review of research degree programmes concluded that the University's ability to secure and enhance the quality and standards of its research degree provision was appropriate and satisfactory, and suggested the University might reflect upon the potential for variation in the implementation of training, the consistency of local induction at school level, and the introduction of staff-student liaison committees at school level for postgraduate research students. The review also noted good practice in the way the University supported its part-time research students. The audit team confirmed that the University had taken steps to respond to the review's recommendations, though it identified inconsistencies relating to the training of postgraduate research students who undertake teaching (see paragraph 185).

11 The 2007 Collaborative provision audit report identified good practice with respect to the role of the Designated Academic Liaison Officer (DALO) in supporting standards and quality; the Consortium for Post Compulsory Education and Training (CPCET); the annual Executive meeting with partners; and the action planning process in responding to external examiners. Two recommendations advised the University to review and develop further institutional oversight of standards and quality, and adhere to and consistently implement the University's procedures for checking publicity and certificates. Five desirable recommendations suggested the University give a stronger central direction to emerging teaching and learning strategies in relation to collaborative provision; review its classification (typology) of collaborative arrangements; revise the external examiner reporting form so that comments relating to partners might be better identified; strengthen oversight and analysis of statistical information relating to collaborative provision and ensure that all students studying at partner institutions have appropriate learning resources and are aware of their entitlements to them. The audit team was satisfied that the University had, in the main, responded positively and sufficiently to the recommendations of the audit of its collaborative provision, though there remained some concern about the accuracy of public information relating to partners (see paragraphs 157, 158 and 195).

12 The University's Briefing Paper drew attention to a number of institutional developments, which included the substantial and continuing development of the estate and the establishment of the two new campuses at Barnsley and Oldham; the establishment of the International Study Centre; the review of its classification and assessment regulations and new and modified quality assurance processes, such as quality appraisals.

13 The most significant developments have been strategic ones, following the appointment of a new Vice-Chancellor in January 2007. Major strategic objectives are encapsulated in the Strategy Map, which was introduced and strongly promoted by the new Vice-Chancellor. The Strategy Map has associated key performance indicators and a clear relationship with component strategies, especially those for teaching and learning and research. The audit team found that the Strategy Map had been widely disseminated to the University community and that it was being used as a major reference point with respect to the University's values and strategic intentions. The Strategy Map was also found to inform the provision of resources for learning and student support. The team concluded that the use of the Strategy Map to drive and coordinate change across the University was a feature of good practice.

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

14 The audit team found that the organisational structure of the University was very similar to that which had been in place during the previous audit, as there had been little restructuring and only minor changes in the governance structure. The number of council meetings had been reduced, as had the size of membership. Also, Deans had become part of the University's Senior Management Team (SMT), which also includes the Vice-Chancellor, the Deputy Vice-Chancellor (DVC) with responsibility for Planning and Resources, two Pro Vice-Chancellors (PVCs, one for Teaching and Learning, the other for Research and Enterprise), Service Directors, the University Secretary and the Legal Officer. SMT oversees the University's strategic planning functions and monitors the operation of individual schools and services by consideration of their performance against the objectives set out in their operational plans. It also keeps under review the University's mission, strategic plan, budgets and financial forecasts and the methods for the allocation of human and physical resources to support them.

15 The University is organised into seven academic schools, each led by a Dean. At the time of the audit, the schools were: Applied Sciences; Art, Design and Architecture; Business; Computing and Engineering; Education and Professional Development; Human and Health Sciences; and Music, Humanities and Media. Schools are themselves organised into departments.

16 The Briefing Paper stated that 'much of the responsibility for the assurance of quality and standards is devolved to schools'. Within schools, academic roles particularly important for the management of quality and standards include: Associate Dean, Head of Department, course leader, module leader, academic skills tutor, personal tutor and year tutor.

17 The academic work of the University is supported by 10 services: Computing and Library Services; Estates and Facilities; Financial Services; Human Resources; International Office; Marketing and Public Relations; Planning and Information Service (incorporating the Admissions and Records Office); Registry; Research and Enterprise; and Student Services.

18 The University describes its governance structure as one that 'reflects its academic diversity, relatively devolved nature and responsibility' combined with a 'strong central coordinating and regulatory function'. Senate is the 'supreme academic decision-making body in the University' and has responsibility for assuring the standards of the University's awards. Senate shares two committees with the governing body (the University Council), Governance and Membership, and Honorary Awards. Senate is supported by two central sub committees: the University Teaching and Learning Committee (UTLC) and the University Research Committee (URC), together with seven school boards.

19 UTLC, which is chaired by the PVC (Teaching and Learning), has four sub committees that report directly to it: Student Council, the Quality and Standards Advisory Group (QSAG), the Standing Committee for Collaborative Provision (SCCP), and Equality and Diversity. Seven school teaching and learning committees (STLCs) report into UTLC and into relevant school boards.

20 The PVC (Research and Enterprise) chairs URC, which is the parent committee for the Graduate Education Group (GEG), and the University Research Group (URG). School research committees (SRCs) report into URC and into relevant school boards.

21 As the senior committee of each school responsible to Senate, school boards not only oversee STLCs and SRCs, but are responsible for course committees with their associated course assessment boards (CABs), school accreditation and validation panels (SAVPs) and extenuating circumstances panels. Individual schools may have additional committees and groups, such as a Subject Leaders' Forum, or a Marketing and Admissions Group.

22 The Briefing Paper also stated that 'Deans have lead responsibility for [the assurance of quality and standards] and exercise it through their school boards and particularly their school teaching and learning committees'. The audit team therefore studied the operation of school committees and their interaction with central committees, specifically school boards and STLCs, UTLC, QSAG and Senate. The team's consideration of committee effectiveness was further supported by investigations carried out by the University itself during the year prior to the audit as part of its schedule of quality appraisals.

23 A study of the minutes of four Senate meetings (November 08 to November 09) revealed strong attendance, with informative briefings on such issues as admissions, estates and financial matters and on University news. It was clear that Senate also discussed and approved changes to regulations and approved the University's Teaching and Learning Strategy, though it was not clear from the minutes how much deliberation occurred. Senate received full minutes from University Council. From UTLC and URC (its major sub committees, along with school boards) it received sets of summary decisions, in all cases noted by Senate without recorded discussion. Senate receives from its school boards neither minutes nor summary outcomes. The audit team was informed that Senate decided in March 2007 that it would receive from school boards only issues selected by those boards, and that minutes of school boards would continue to be sent to Registry. The team was told that Deans decide what is sent to Senate.

24 Although Senate minutes did evince some interaction with its major sub committees, the audit team concluded that there was a risk to Senate's ability to maintain full oversight of the work of its own committees and could therefore not see how it completely fulfilled its published terms of reference. This manifested itself in three ways. First, the selective presentation of school board matters prevents Senate from having direct oversight, which the team felt constituted a potential risk. Also, the minutes largely reflect the reporting of information or the noting of summary decisions as stated in paragraph 23. For example, the minutes of the meeting of 12 November 2008 state that 'Members noted the outcome from last year's National Student Survey, and activities to address any underperforming areas prior to the next survey'. Finally, in the absence of any formal 'consideration of the academic plan [which term usually indicates the academic portfolio] of the University', it was not clear to the team how Senate can advise the Vice-Chancellor and University Council on that plan's 'associated academic activities and the resources needed to support them', as required by the first of Senate's terms of reference. Consequently, the team advises that the University review its committee arrangements to ensure that Senate has full oversight of academic matters as specified in its terms of reference.

25 UTLC carries a large weight of responsibility for 'overseeing all matters relating to the development and delivery of taught courses of study and for ensuring the maintenance of appropriate academic standards', with a wide range of powers directly delegated from Senate. In order to accommodate this wide range of responsibilities, UTLC normally meets six times a year. Senate receives UTLC summary reports but does not, on the evidence of its minutes, discuss them, as noted above. While quoracy for Senate requires 18 members, UTLC, which takes more decisions, requires only six. Although, in practice, the number and variety of members present at UTLC is always good, the University might wish to reconsider the quoracy requirements for UTLC.

26 A study of the minutes of nine consecutive meetings of UTLC indicated that agendas are long but relate clearly to the committee's terms of reference, balancing considerations of the management of academic standards with an overview of the student experience. Much of its agenda is taken up with regulatory decisions, for which it has authority from Senate. Meetings are preceded by brief presentations on developing aspects of teaching and learning. Management information presented to the committee is considerable, including reports from relevant committees and working groups. There is clear evidence of levels of consideration appropriate to individual items. For example, substantial items such as the University's draft Teaching and Learning Strategy are discussed in detail, and issues from previous meetings are clearly followed up. UTLC meetings appear to be well managed and recorded.



27 QSAG normally meets every three weeks, or as required. It is 'responsible to the UTLC for overseeing all matters relating to the University's quality assurance framework and external audit'. As QSAG's terms of reference make clear its importance to its parent committee, the audit team sought to establish the effectiveness of the working relationship between the two. A study of the minutes of 12 consecutive meetings over 12 months indicated that QSAG meetings are well attended, agendas are long but clearly focused, and there is a clear follow-through of actions. The balance between advice and recommendations to UTLC and decision-making in its own terms (for example, in consulting with schools on emerging issues or in the operational details of quality assurance processes) was, in the audit team's view, well judged. The committee clearly serves as a 'workhorse' for UTLC in monitoring evidence of quality and standards and in prior considerations of reports and proposals, thus helping its parent committee to manage its own business more effectively. Although the team found instances where important items appeared to have been noted rather than discussed, such as in the case of quality appraisal reports (see paragraphs 114 and 119), other evidence indicated that the length of debate was proportional to the importance of the item under discussion.

28 The audit team studied in detail the operation of school boards in two of the seven schools in order to judge their effectiveness. The team found large variations in attendance patterns. The business is, essentially, the presentation of important information (the Dean's report), including updates on the school's progress against financial, recruitment and other targets and the academic plan, consultation on strategic and operational issues, and receipt of reports and minutes of its subcommittees and central committees, with exhortations and discussions as required. Management information presented at the boards, including data, is regular and relevant. In relation to academic planning activity, one school used the board as a decision-making forum, the other as more of a briefing opportunity. Given this variable practice, it was not clear to the audit team how the University would know that all school boards had addressed an issue of central importance.

29 The quality appraisal of school boards in February 2009 produced a report that supported the audit team's findings from its sampling. For example, the report identified that different boards met between three and nine times a year, that membership can be a problem (partly owing to the difficulty of finding student representatives), and it recommended that QSAG review this. The report also stated that all but one of the school boards do not formally agree membership of their assessment boards and it recommended that QSAG review this, too. The University introduced a standard template for school board agendas for 2009-10 in order to address variability of practice. The team was reassured by this development.

30 The audit team studied 13 sets of STLC minutes. STLCs, like UTLC, are busy committees with full, well-balanced agendas suitable to their terms of reference. The team found that actions are clearly followed up and that substantive items progress and develop through sequenced committees, often in an iterative dialogue with UTLC, to whom it offers advice, responds to consultation and makes recommendations. Registry presence is effective in offering guidance on regulatory matters. It was not always clear from the minutes at what point a committee made a final decision. For example, when considering regulatory matters or external examiner appointments, the term 'approved' appears to be used in the sense as 'agreeing with' or 'recommended for approval by a senior committee'. On the whole, however, the team concluded that STLCs are active, productive committees with evident interactions with UTLC and other school-based committees. It is clear from the minutes of more recent meetings that STLCs, as with other committees, are benefitting from the new templates produced by Registry, which are leading to a more systematic coverage of relevant items.

31 The University has a range of policy, strategy and procedural documents that inform its management of standards and quality. Key documents will be identified when appropriate in the following sections of this document.

32 The audit team concluded that the University's framework for managing academic standards and the quality of learning opportunities is generally well designed to fit with its academic and executive organisational structures and is regularly monitored. The University's committees, with the partial exception of Senate as noted in paragraph 24, act effectively to oversee the University's management of academic standards and quality of learning opportunities. Agendas are appropriate to terms of reference, a sufficient evidence base is drawn upon, and actions are followed through. The committees employ an appropriate balance of monitoring, consultation and decision making, with good interactions between central and school-based committees.

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

### **Approval, monitoring and review of award standards**

33 The University has a variety of approaches to new course approval and modification, which are described in various sections of the Quality Assurance Procedures for Taught Courses. New titles are approved as part of the annual planning cycle and are included on the annual validation schedule produced by Registry. The particular validation process an approval follows, which is determined by Registry on behalf of the University Teaching and Learning Committee (UTLC), depends on the amount of new credit to be validated as part of the new title as well as other factors, such as the risk presented by the change.

34 Undergraduate degree courses, where 100 credits or fewer are new or substantially revised, are handled by a school accreditation and validation panel (SAVP) with no external involvement. Undergraduate courses with between 100 and 120 credits of new or revised modules are handled by an Enhanced SAVP that includes a UTLC representative from another school. New courses with a greater volume of new or revised modules are dealt with by a University event, where there is a requirement for two external members, one from industry or the professions, and one from the higher education sector. External members are approved by Registry prior to an invitation being issued. The credit requirements for other types of awards are pro-rated, such that a new master's award with 90 credits of new or revised modules can be validated without involving anyone external to the University, provided that there is an independent and objective review that standards are appropriate.

35 The documentation required for validation panels is comprehensive and includes a full programme specification, module descriptors, a map of learning outcomes against relevant subject benchmark statements, staff curriculum vitae, confirmation of resources from Estates and Facilities and Computing and Library Services, and a validation pro forma to aid scrutiny. An innovative feature of the process is the compliance check of the documentation prior to the event by an independent school panel. Training is provided annually for chairs. Panels are fully minuted and, once checked for accuracy, the minutes are either received directly by UTLC for University panels or via school boards for SAVPs and Enhanced SAVPs. The report is considered by the course team and a response to any conditions or recommendations is determined and actioned. The chair of the validation panel is responsible for approving the response and actions on behalf of the panel and reporting on the outcome to Registry. The implementation of any conditions and recommendations is reported in the subsequent Annual Evaluation Report.

36 Modifications to existing courses follow a similar process as validations, such that changes impacting on less than around a third of the modules at undergraduate level or less than around half the modules at postgraduate level are normally approved by the school's SAVP. Where the changes do not impact on the assessment of modules, the chair of the school teaching and learning committee (STLC) may approve them through chair's action. The process is monitored by Registry, which checks that the changes do not raise issues that should have been referred to the UTLC, and the changes are then confirmed. The change history of a course is not presented to a validation panel, but the audit team was assured that Registry closely monitors changes over

a three-year period to ensure the degree of change approved at school level stays within the prescribed limits. While not a formal part of the change process, some schools encourage course leaders to consult with external examiners on module changes and their impact on the programme as a whole.

37 The single subject review and course revalidation process introduced from 2008-09 provides a comprehensive consideration of the past and current performance of a number of courses in an area and whether the curriculum remains current. External involvement in the panel is considered desirable. All courses should be subject to a review every five years and the schedule is approved by UTLC. A scrupulous compliance check of the provision's adherence to the University's quality procedures is undertaken prior to the event. The panel is provided with the outcomes of the compliance check and the course team's response, as well as a self-evaluation document reviewing the curriculum, areas of development and improvement, and a full set of programme and module specifications. Based on the sample of reports seen by the audit team, the broad nature of the review event, with its emphasis on the continuing validity and relevance of the programmes, can be confirmed. However, this event, which covers all the provision in a Joint Academic Coding System (JACS) subject group, including foundation years as well as undergraduate and postgraduate provision (taught and research), is undertaken in a single day and the amount of time dedicated to the detailed scrutiny of each course is therefore quite limited. The outcome of the process, in addition to any conditions or recommendations of the panel, is the revalidation of all the courses, from which point the change history of all courses and modules starts again. Given that significant changes may have been made to a course without the involvement of external experts (see paragraph 34), the team concluded that broad subject review could lead to not reaping the potential benefits of having detailed external scrutiny at the course level in confirming the appropriateness of standards and quality (see paragraph 42). The report of the panel and the subject area action plans are submitted to UTLC for consideration.

38 The process for annual evaluation is thorough and comprehensive, as demonstrated by the documentation seen by the audit team. The University uses a standard template, which covers the usual standards indicators like external reports, student performance data, and comparison to subject benchmarks, together with indicators of the quality of student learning opportunities such as the results of student questionnaires, the outcomes of student panels and personal development planning, as well as reflections on the curriculum, course management, resources and good practice. Completed action plans from the previous year and plans for the next year are also included.

39 From the samples seen by the audit team, the reports are thorough and show an appropriate amount of reflection, and they are considered thoroughly by course committees and schools boards. The Deans, or their nominees, prepare a report of the outcomes of annual monitoring for UTLC, which is complemented by an independent UTLC representative's report. At its March meeting, UTLC considers a summary of Annual Evaluation Reports (AERs) and recommendations, the minutes of school annual evaluation committees (SAECs), together with the Deans' and the UTLC representatives' reports. The process was subject to a recent Quality Appraisal, which noted some inconsistencies, but identified no significant failings in the process.

40 The University does not have a specific process for identifying and supporting 'under-performing' or 'at-risk' courses, but the audit team was assured that, if there were concerns about a course, the internal quality audit process would be invoked. Internal quality audits are designed to address areas of concerns that may arise from time to time. Over the four years prior to the Institutional audit, the University had undertaken three such audits involving courses at collaborative partners. There is no standard approach, as the model and approach depend on the nature of the issue, but, from the samples it examined, the audit team found these audits to be comprehensive and thorough, and the team saw how they identified a number of actions that were followed through.

41 While the University does not have a clearly articulated process for course closures, the audit team was able to review the process followed for the closure of a Foundation Degree. This closure was undertaken in an orderly manner, with due regard to protecting the interests of students.

42 The audit team was able to conclude that the University's processes for programme approval, annual monitoring and review are carried out in line with the stated procedures and in accordance with the precepts of the *Code of practice, Section 7: Programme design, approval, mentoring and review*. However, the team felt that the process for the validation of existing courses could be enhanced by the greater use of external members, so that the independence and objectivity this would bring would provide further confidence that standards and the quality of programmes are appropriate. Consequently, the team recommends that the University use experts external to the University in all validation panels.

### **External examiners**

43 The rights and responsibilities of external examiners are clearly articulated in the Regulations for Awards. It was clear from the sample of external examiners' reports seen by the audit team that external examiners were clear about the University's processes and their own roles and responsibilities. School boards are responsible for the nomination and detailed scrutiny of external examiners against a common set of criteria and guidance approved by UTLC. Recommendations are sent to UTLC for approval under delegated authority from Senate.

44 The University organises an annual external examiner induction day, hosted by the Pro Vice-Chancellor (PVC) (Teaching and Learning), where the roles of external examiners are described along with the University's regulations and processes. Specific school and course-related information is targeted at the appropriate examiners.

45 External examiners are associated with all intermediate, honours and postgraduate modules, and with foundation modules where they form the majority of an award. Agreement should be reached at the start of each academic year between the module team and the external examiner as to which of the proposed assessment briefs will be sent for approval. This could be all assessments or a sample. Each school has its own process for tracking the approval status of assessments, but it was unclear to the audit team how the status of assessments was monitored by the University and the consistency of the approval process was assured.

46 To ensure consistency of approach in reporting, pro formas are provided for external examiners' reports and for course leaders to record both an interim action plan and a final action plan confirming actions taken by course teams in response to external examiners' comments. External examiners send their reports to Registry for an initial scrutiny and identification of issues, before they are passed on to course teams for actions. Registry produces an annual summary that includes issues raised by external examiners for consideration by UTLC. In addition, external examiners' reports and responses form a key part of the annual course evaluation process.

47 External examiners play an active role in ensuring that the standards of the University's awards are set and maintained at an appropriate level, and the University closely adheres to the *Code of practice, Section 4: External Examining*. The audit team found that the University makes strong and scrupulous use of external examiners' reports.

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

48 The audit team saw a number of examples of the way the University had taken into account the Academic Infrastructure in the development of its awards and the maintenance of standards. The relevant internal group is assigned to benchmark University policy and practice against any revised sections of the *Code of practice* and a report is submitted to the Quality and Standards Advisory Group (QSAG). Any required changes to regulations or processes are progressed through the relevant committee. The University undertook a review of all the sections

of the *Code of practice* in 2009, the outcomes of which were presented to UTLC for Sections 2 to 10 of the *Code of practice*, and the University Research Committee (URC) for Section 1. This review resulted in a small number of amendments to internal processes.

49 The University has a standard template for programme specifications, which are an integral part of the curriculum design and approval process. The specifications are comprehensive and cover intended learning outcomes and curriculum organisation as well as support and evaluation mechanisms. Course learning outcomes are mapped against relevant subject benchmark statements as part of the validation process. Benchmark statements are also considered as part of annual course evaluation.

50 The University makes use of *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ), but has an unusual naming convention for level 4 which is potentially confusing. The University has not adopted the revised nomenclature of levels 4-8, as recommended in the August 2008 version of the FHEQ, rather it uses a variant of the previous version, such that levels 5, 6, 7 and 8 are aligned with the previous naming conventions of I, H, M and D, respectively. However, for level 4, the University uses the code 'F' for foundation rather than 'C' for certificate, as was specified in the earlier version of the FHEQ. To compound this confusion, the University also has 'foundation' provision at level 3 or level P on the University's scheme. In addition, certificates of higher education are described as intermediate (that is, level I in the previous nomenclature) awards, whereas the FHEQ regards them as equivalent to level 4 not level 5. The audit team encourages the University to eliminate the potential for confusion with respect to its nomenclature for levels of study.

51 One of the goals of the Teaching and Learning Strategy is the accreditation of courses by professional bodies where relevant. The University works with a number of professional, statutory and regulatory bodies (PSRBs). Its relationships with PSRBs are monitored through annual course evaluation and validation.

52 The University keeps a watching brief on the Standards and Guidelines for Quality Assurance in the European Higher Education Area and other quality assurances initiatives within the European Higher Education Area. To exemplify this, the University provided the audit team with details of the revision of its integrated master's degree regulations in 2007 to bring them in line with both the FHEQ and the Bologna framework.

### **Assessment policies and regulations**

53 The university-wide regulations are set out in the Regulations for Awards, which are reviewed and revised regularly. Through examining the minutes of various committees, the audit team could clearly see how assessment issues are kept under review at all levels of the University's deliberative structures. For example, the recent changes to the assessment regulations introduced a new classification system based on the best 100 credits at levels I and H (5 and 6, respectively, in the revised FHEQ). The new regulations also saw a reduction in the discretionary band from 2 per cent to 1 per cent, and the greater use of condonement. These changes had been subject to thorough review through annual course evaluation, school boards, QSAG and UTLC. Care was taken during the introduction of the new regulations to ensure that students were not disadvantaged by the changes.

54 One of the objectives of the Teaching and Learning Strategy is for '2/3 of students to achieve first and upper second degrees by 2012-13'. While the statistics indicate that there has been an increase in good honours degrees over the last few years, and the changes to the assessment regulations may have facilitated this, the audit team found no evidence to suggest that standards had been put at risk as a result of this aspiration or the associated regulatory changes.

55 Unusually, the University allows 'tutor reassessment'; that is, where a student achieves between 0-39 per cent for the first attempt at an assignment, the work can be resubmitted for

marking prior to the Course Assessment Board for a capped mark of 40 per cent. The audit team was told that when the capped mark is entered into the student record system the failed mark is overwritten, and, from the sample of course assessment board information seen by the audit team, there is no indication to the board that the mark is a 'capped tutor-reassessed mark'. What is more, the student record system cannot report on the number of tutor reassessments. The use of tutor reassessment is at the discretion of the module leader and there is no University process to determine which assignments will be eligible for tutor reassessment. Tutor reassessments do have to be completed by the end of the examination period. While the concept and constraints are described clearly in student documentation, it was less clear how students are informed as to which assignments are eligible and what the hand-in dates are. One student met by the team clearly did understand tutor reassessment, but other students did not. Given the students' confusion, the local determination of tutor reassessment opportunities, the overwriting of marks presented to the course assessment board and the inability to monitor its use across the institution, the team felt there was no clear University oversight of this aspect of the assessment process and that there was considerable scope for inconsistent practice (see paragraph 58).

56 Guidance on how to make a claim for extenuating circumstances is well publicised in the Students' Handbook of Regulations and in some course and module handbooks. Although there is a standard university-wide pro forma, easily available on the website, there is no common University process, and no set membership or common remit for panels, as each school has its own approach. Students suffering from short-term illness can apply to a module leader or year tutor for an extension, if they have a valid reason. Although students reported being clear about the processes that applied to their course, there is no University monitoring of extensions and extenuating circumstances to ensure consistency and parity between courses and schools, rather the University relies on the lack of appeals and complaints as an indication that the systems are transparent and fair (see paragraph 58).

57 The procedures and guidance relating to the conduct of assessment boards are comprehensive, with examiners appearing to be given a considerable degree of discretion and judgement. The regulations clearly state that 'marks, grades and percentages are not absolute values but symbols used by examiners to communicate their judgement of different aspects of a student's work, in order to provide information on which the final decision on a student's fulfilment of course learning outcomes may be based'. The audit team found that the inconsistency in practice and poor minuting of decisions by course assessment boards that was highlighted in the 2009 course assessment board (CAB) quality appraisal could potentially lead to inconsistent judgement between boards. However, from the evidence seen by the team, combined with the regulations for progression and award, the guidance issued for the use of discretion and the training provided to chairs, the outcomes of the boards appear to be consistent, and the audit team found no evidence that standards were at risk. Nonetheless, the University might wish to monitor this as its new minutes template is applied from 2009-2010 (see paragraph 58).

58 Overall, the audit team found that the University's assessment policies and regulations make an effective contribution to its management of standards, and they take into account the precepts of the *Code of practice, Section 4: External examining, Section 5: Academic appeals and student complaints on academic matter* and *Section 6: Assessment of Students*. However, the team identified a number of features of the regulations and University practice which could, if not addressed, lead to inconsistencies that could potentially put the University's standards at risk. The team therefore advises that the University review its regulations and policies with respect to assessment in order to eliminate potential inconsistencies of practice.

### **Management information - statistics**

59 The audit team found that the data used for application monitoring was current, but that the data for other purposes, such as the 'UCAS Information List' and 'analysis by diversity' strand, was dated, giving the impression that the management information system is primarily for application monitoring. Course data is used in the annual course evaluation cycle and looks at

such things as progression and achievement. However, the presentation of the statistical information varies between reports, which makes it difficult to compare directly the performance of courses. The team was told that the University plans to address this variability through a revised pro forma. UTLC receives an annual report on course assessment board activity, which summarises progression, awards and the application of discretion. The University also claims that data underlie central policy discussions, quoting the review of the assessment regulations. The team did find other examples of the use of data, such as part of the rationale for the closure of the Foundation Degree in Sports Coaching, and as a means of monitoring the numerical key performance indicators for the delivery of the targets in the Strategy Map.

60 In summary, the audit team felt the University had made good progress in starting to collect and use data but had some way to go before it could be said to be making systematic use of data. The team encourages the University to continue its efforts in this area.

61 Overall, the audit found that the University's management of academic standards is operating as intended. The application of the University's regulations and policies is largely consistent and the associated guidance reflects consideration of the elements of the Academic Infrastructure, although the audit team concluded that there is scope for inconsistencies of practice with respect to some aspects of assessment. The University's approval and review processes align with the *Code of practice*, although the use made of external experts could be more widespread. Management information is used in the establishment and maintenance of the academic standards of awards, and the University is making good progress in the systematic use of data. There is also strong and scrupulous use of external examiners in the summative assessment of provision. All of these features support a judgement of confidence in the soundness of the University's current and likely future management of the academic standards of its awards.

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

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

62 The audit team found clear evidence of widespread engagement with the Academic Infrastructure and other relevant external reference points, which inform the University's management of the quality of learning opportunities. In particular, the University's approval and review processes use the Academic Infrastructure as a key reference point. It was also apparent to the team that the *Code of practice* and any changes made to it inform discussion and policy within the University at all levels.

63 The University engages with a wide range of professional, statutory and regulatory bodies (PSRBs), which provide important external benchmarks for a number of discipline areas. This engagement is effective in ensuring that relevant professional standards, curricula and requirements inform programmes of study.

64 The audit team concluded that the University was making careful and consistent use of those elements of the Academic Infrastructure and other external reference points relevant to its stewardship of the quality of the learning opportunities available to students.

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

65 As noted in paragraph 35, the course approval process involves the consideration of market demand and the resource needs of the programme, including formal consideration by Computing and Library Services and, where the course cannot be accommodated within existing space, Estates and Facilities. The formal approval event reflects further on curriculum design and resourcing, and provides a mechanism for evaluating learning opportunities by using a range of information sources, including PSRB requirements, the inclusion and progression of personal development planning (PDP), mapping the learning outcomes to subject benchmark statements, and feedback from the course team.

66 The evaluation of learning opportunities is a key part of the annual course evaluation process. The course evaluation template requires consideration of the student experience, including National Student Survey (NSS) results, and teaching, learning assessment and curriculum developments, as well as student retention and performance. Through the summary reports, the issues and examples of good practice are brought together across courses for consideration at school and university level. Revalidation and subject review is a further process that enables reflection on the learning opportunities and their management at course, school and institutional level. This is effected through consideration of the self-evaluation document, annual course evaluations, student panels, module evaluations, peer observation of teaching, and the outcomes of meetings with students.

67 The audit team was able to confirm that the University makes effective use of the processes of programme approval, monitoring and review to assure the provision of learning opportunities in existing and proposed programmes.

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

68 There is a range of opportunities for student feedback to be gathered across the University. The University's Partnership Statement (contained within the Student's Handbook of Regulations), which sets out the University's commitment to its students and its expectations of them, encourages students to participate in feedback. As the students met by the audit team were not familiar with the Partnership Statement, the team felt that the University might wish to consider ways in which it can make students more aware of it.

69 The University's Code of Conduct on Student Feedback contains institutional procedures for student feedback in relation to enhancement, monitoring and review of quality and standards. Feedback is gathered via student representation on University committees, school boards, course committees and student panels, and through the University course evaluation survey, module evaluation surveys and informal mechanisms. Data is also gathered from final-year students via the NSS.

70 The University Student Council is a joint committee of the Senate and University Council. Officers of the Students' Union and student representatives from each of the schools and campuses participate. The Council's membership and terms of reference were revised in 2009 to ensure a responsive and inclusive approach. A quality appraisal in September 2009 indicated that the Council met regularly and was well supported by students. However, the student written submission (SWS) indicated that the remit of this Council is not clearly understood by students, which was confirmed by students who met the audit team. The University may find it helpful to publicise the terms of reference of the University Student Council more widely across the student body.

71 School boards take place regularly, although the team found differing practice across schools, as noted in paragraph 28. The audit team also noted issues with quoracy, sometimes where fewer staff attend than students, or where there is difficulty in getting student representation. The University might consider how it might ensure adequate student representation and also consider more standardised agendas, in order to reduce variability of practice in each school.

72 The audit team found clear evidence that staff engage with gathering feedback and are responsive to student concerns. While the Students' Union reported some lack of consistency in the operation of student panels and variability between the approaches of schools, it was clear to the team that action did result from issues reported. The University has identified actions to be taken to improve consistency across the schools, including the development of a new 'rolling record' system to record actions.

73 Some students reported to the audit team that they were unsure of who their course representatives were and that the selection/election process was not consistent between schools.



The Students' Union also expressed concerns about this, while also acknowledging some very good practice. The University Teaching and Learning Committee (UTLC) had taken this matter seriously and there had been positive discussions on improvements to student representation.

74 The audit team met a wide range of students, all of whom confirmed that they were aware of and positive about the student feedback mechanisms available to them. Postgraduate students were positive about their opportunities to give feedback and part-time students felt that tutors consider their needs in ensuring that course committees and other feedback sessions are organised at times to suit them. Students at the Oldham and Barnsley campuses were positive about their contact with lecturers and programme leaders, and students from collaborative partners reported their full engagement with student panels and course committees.

75 The Students' Union has a Democratic and Student Representation Co-ordinator, who provides personal development for incoming Students' Union sabbatical officers. Student representatives are provided with support and training from the Students' Union.

76 The VOICE08 and VOICE09 Student Representatives' Conferences were regarded by students and the audit team as a positive vehicle for ensuring student representatives are supported in their role. The conferences addressed a range of issues, including the processes through which student representatives gather the views of students, how issues can be raised effectively, and assessment and feedback.

77 The audit team found that the University responds proactively and thoroughly to NSS results. Results are analysed by the Deputy Vice-Chancellor and Pro Vice-Chancellor (Teaching and Learning) and reported to Senate and UTLC. NSS data are used to inform a range of committees and action plans are produced to ensure appropriate action is taken. Action plans are reviewed on a regular basis by the Senior Management Team (SMT), the Quality and Standards Advisory Group (QSAG) and UTLC. At school level, NSS results and other statistical information such as retention achievement and destinations data are considered. A new format for annual course evaluation piloted in 2009-10 includes a specific prompt to course teams to consider and respond to NSS results. The team concluded that the degree of attention given to the NSS outcomes is noteworthy and indicates a robust approach to student feedback.

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

78 In addition to the wide range of feedback mechanisms available to students, there are clearly specified opportunities for students to engage with quality assurance matters across the University. Students play an active role on key committees of the University, including the University Student Council, UTLC and Senate. Within schools, they are represented on school boards, course committees and student panels. The University periodically reviews the effectiveness of student representation on such committees. The Students' Union meets regularly with a designated member of the University's Senior Management Team. The Union reported a very good working relationship with the University and feels that it is consulted on a regular basis.

79 The University regularly commissions thematic reviews on a range of topics. Students are involved in these, both as members of review panels and as participants in meetings. It is clear that students' views are taken seriously. Thematic reviews have all identified issues relevant to the overall student experience and have identified improvement strategies, such as changes to the facilities available in the evening and concentration of teaching into main buildings to improve safety, security and access to facilities for part-time students in particular.

80 The annual evaluation process is described in the University's Quality Assurance Processes for Taught Courses. Student evaluation and an analysis of the student questionnaire feedback is a required element of this process. The quality appraisal of annual evaluation and thematic review of student evaluation, feedback and assessment both identified a lack of consistency between schools in relation to annual evaluation, indicating that perhaps some further work to address this is needed. The audit team encourages the University to complete that work.

81 It was clear to the audit team that the University values and facilitates student participation in a wide range of quality assurance matters. The team was therefore satisfied that the University's arrangements for student involvement in quality management processes were sound.

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

82 The University's Strategy Map and Teaching and Learning Strategy state the intention to ensure that students are able to 'learn from staff at the leading edge of knowledge and application'. The audit team found clear links between research and scholarly activity and student learning opportunities. A particularly visible way that the University promotes its research activity is through the University Repository, which holds a digital collection of postgraduate theses, together with research outputs of staff and students.

83 The University supports pedagogically-orientated research activity that contributes to the student experience and is introducing an Institution of Teaching and Learning to provide coordination, evaluation and dissemination of pedagogically-oriented research. The audit team found that the University had recently created an innovative online Teaching and Learning Innovation Park that brings together best practice in teaching and learning and creates a resource for staff that includes staff publications, journal articles, research, achievements of staff and Teaching Quality Enhancement Fund (TQEF) projects, plus tools for the development of good practice and innovation.

84 The staff research degree scheme is open to all staff, providing fee waivers and time allowances to encourage completion. Staff are encouraged to seek formal recognition of their research and pedagogic expertise, including National Teaching Fellowship, the conferment of Professor, Reader and University Teaching Fellows, and engagement with Joint Information Systems Committee (JISC) and Higher Education Academy (HEA) Subject Centres.

85 In 2007, the University was awarded Centre for Excellence in Teacher Training status by the then Department for Education and Skills (DfES), which coincided with the establishment of the Huddersfield University Distributed Centre for Excellence in Teacher Training (HUDCETT). HUDCETT is actively involved in research, training and the dissemination of good practice.

86 Students reported to the audit team that they were aware of the research activity of tutors and were satisfied with the opportunities provided to engage with research.

### **Other modes of study**

87 The University has a wide range of students on a variety of modes of study, spread across three campuses and in partner institutions in the UK and abroad. Part-time students form a large proportion of the student body at the University. The University recognises the need for flexible access to learning resources and support, and a range of initiatives has been implemented to ensure this. In 2009, a thematic review of part-time provision noted high levels of student satisfaction, which was reflected by students in meetings with the audit team. In line with the *Code of practice*, the University clearly distinguishes in its procedures between flexible and distance learning and more traditional 'taught' provision. Additional requirements must be met in the validation, revalidation and annual course evaluation of such courses.

88 The University has an active approach to work-based learning, which it defines as direct work-based learning (for example, as experienced by Foundation Degree students or part-time professional students), placement learning, or self-employment as an alternative placement year. A range of monitoring and support activity is in place to ensure students are able to benefit fully from such experiences.

## Resources for learning

89 The University's Strategy Map provides the focus for the activities of Computing and Library Services. The service provides an annual plan that identifies development priorities. The Director of Computing and Library Services and Heads of Computing Services and Library are members of key University committees and strategy groups, thus ensuring awareness of the needs of a wide range of stakeholders.

90 The SWS expressed high levels of satisfaction with library and IT facilities. The Library and Computing Centre and its associated Learning Resource Centres in Barnsley and Oldham were awarded the Cabinet Office Customer Service Excellence Standard, and a variety of other quality benchmarking and testing schemes are implemented to ensure an excellent level of service. The audit team identified the proactive approach taken by Computing and Library Services to ensure that it meets the needs of a diverse student body as a feature of good practice (see paragraph 117).

91 The University's principal library resources are on the Queensgate campus. Students at other sites can access a wide range of provision online and there is a daily delivery of requested items. The University has invested significantly in online journals and e-textbooks and has acquired a new information resources access system to enhance provision. Research students and part-time students were particularly positive about library provision, although some reported difficulties in finding space to work. Research students were appreciative of the 'Convivium' resource recently provided (see paragraph 162).

92 Students expressed to the audit team their satisfaction with the University's virtual learning environment (VLE). In particular, the provision of resources for part-time students was appreciated. The University's commitment to flexible access is demonstrated by 24-hour library opening hours for 10 weeks before exam periods, an online 'ask a librarian' service, 24-hour computing access with help desk support seven days a week, and a books-by-post service. The thematic review of part-time provision focused on the experience of part-time students across all courses operated at all campuses. This commended the proactive approach taken by the library to ensure that part-time students can access facilities.

93 The resourcing of programmes is systematically addressed by the University's annual planning process and its processes for programme approval, monitoring and review. Each school has a designated academic librarian and a client consultant for computing services. Schools are able to identify resource issues within annual evaluation processes and school plans. The audit team concluded that the University was adopting an effective strategic approach to the provision of learning resources.

## Admissions policy

94 The University has clearly articulated admissions and widening participation policies, which are published on its website. The Student Admissions and Records Office (ARO) has responsibility for processing applications to full-time courses and for managing student records through the University's Applicant and Student Information System (ASIS).

95 The thematic review of admissions in November 2007 identified variability in practice across schools. Schools responded to this through the annual evaluation processes. The admissions policy was further reviewed in 2009. The audit team found that schools had responded appropriately; nonetheless, the team found some examples of inconsistency in the application of the University's admissions criteria (see paragraph 155). The University may wish to re-emphasise its admissions policies and criteria to schools to ensure future consistency. Students were generally positive about their admissions experience and confirmed that they had received clear advice about entry criteria.

96 The University has a widening participation strategic assessment provided to the Higher Education Funding Council for England (HEFCE) and the Office for Fair Access (OFFA). The University's commitment to widening participation is clearly expressed in its Strategy Map, its mission and Teaching and Learning Strategy. The audit team considered that the University had taken positive steps to develop, implement and monitor a comprehensive admissions policy but that this needed further consistency in its application across schools.

### **Student support**

97 Students receive detailed information on their programmes and on general support mechanisms through induction. A comprehensive range of information is also provided in the form of handbooks and information on the University's website. All students are offered induction and information skills sessions, where support services are introduced. The SWS acknowledged the comprehensive nature of the information provided but expressed concern about 'information overload'. Students were critical of accommodation information and support but the audit team was satisfied that action had been taken to address this issue at university level.

98 All students receive a copy of the Students' Handbook of Regulations in paper or electronic form. Students were familiar with this and recognised that it contained useful and important information. Students can access a web guide, 'The Basics', which provides online information on key services and facilities.

99 All students have a personal tutor, who is an academic member of staff. Tutors provide guidance, assistance and support in helping to manage the student's academic experience, and refer students to support services as necessary. The audit team formed the view that the personal tutor system was excellent. The team found clear evidence of PDP taking place and was able to confirm that the University has a comprehensive policy on PDP. All schools have at least one academic skills tutor, who students can see for one-to-one support or small-group support. The SWS expressed concerns about the difference between personal tutors, PDP and dissertation tutors, but this did not appear to be problematic for the students who met with the team.

100 The 'Back on Track' programme offers support to students who may be struggling to engage with their programme. Students can self-refer or may be referred by staff. This has been identified by teaching teams as a useful resource which has led to improved retention.

101 Student Services provides an excellent range of central support services, which are accredited with the Matrix Quality Standard. The services provided include a comprehensive induction; a general enquiry service; the Careers and Employability Service; Business Mine; the Employer Services team; a Job Shop; the Counselling Service and Disability Support Team; the Faith Centre; The Looked After Young People Co-ordinator; a Welfare and Immigration Support Team; and specific support for international students. Students were aware of the wide range of services and were very appreciative of them.

102 The University benefits from an active Students' Union. The students met by the audit team were clearly engaged with Students' Union activities and aware of its support functions. The Students' Union Executive and officers reported an excellent working relationship with University management and felt that communication channels were good.

103 In the view of the audit team the University has a comprehensive and systematic framework for academic and personal student support which operates very effectively. The team concluded that the comprehensive and systematic support the University provides for its students was a feature of good practice.

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

104 Human resources (HR) management is overseen by the Deputy Vice-Chancellor (DVC), supported by the HR department. The University has a clearly articulated HR strategy, underpinned by a comprehensive range of HR policies and procedures. Its HR department was

awarded Investors in People status in 2008. Staff are supported by handbooks and web resources, including a Staff Handbook that contains general information and policies; an Academic Staff Handbook relevant to teaching staff; Guidance for Managers; and a handbook on Other Policies and Procedures.

105 Staff development is coordinated and organised by HR following the annual planning cycle and staff appraisals. Staff development encompasses personal development, management development, development on University processes and procedures, job role development, and academic and research development, and is delivered through formal provision, workshops and online resources.

106 UTLC receives monitoring reports from the Continuing Professional Development Forum, Equality and Diversity Group and Enhancement Groups. UTLC consults with school teaching and learning committees (STLCs) and annual course evaluation committees to identify staff development needs, while periodic thematic reviews identify matters relating to staff development and the dissemination of good practice.

107 Lecturers are involved in a scheme for the peer observation of teaching and there is an established annual appraisal system with supporting documentation. Reflection and forward planning are incorporated into appraisal discussions. Staff met by the audit team were positive about how the appraisal system makes clear their development needs and confirmed that support for this development was forthcoming.

108 The University has adopted the UK Professional Standards Framework for teaching and supporting learning in higher education and has a Postgraduate Certificate in Professional Development (PGCD) to support this. Staff are expected to seek recognition through becoming Associates or Fellows of the Higher Education Academy.

109 As noted in paragraph 84, the staff research degree scheme is open to all staff. Research-active staff and those supporting research students are supported by relevant staff development opportunities. The University has supported the development of pedagogic research by enabling the development of multi-disciplinary research groups in enterprise education, technology supporting pedagogy and learning development. The Institute of Teaching and Learning, when it is established (see paragraphs 83 and 116), will enhance the dissemination of good practice. The University used Teaching Quality Enhancement Fund (TQEF) allocations for the promotion of innovative teaching and learning around stated enhancement themes and there is an internal teaching and learning grant scheme for staff to support the implementation of the Teaching and Learning Strategy. The Annual Teaching and Learning Conference and the termly Teaching and Learning Matters publication serve to update staff on teaching and learning innovations and projects. The 'Extra Mile' awards recognise staff that have made a significant difference to a student's experience of university life.

110 The University has a promotions policy with clear criteria for the conferment of the title of Professor (for both research excellence and distinction in teaching), Reader and University Teaching Fellow. Staff are regularly surveyed to ascertain levels of engagement. The most recent survey showed that levels of satisfaction were generally high, with most categories exceeding scores of benchmark comparator groups. Overall, the audit team found that the University's arrangements for staff support were comprehensive and effective.

111 The audit team found that the University's systems for the management of learning opportunities were fit for purpose and largely operating as intended. The University engages well with the Academic Infrastructure and other external reference points. There is an extensive framework for student participation in quality assurance and students are involved in policy development. The team found that students are well provided with resources for learning and that the University's arrangements for student support are highly effective. The arrangements for staff development and support are also effective. These features support a judgement of confidence in the soundness of the University's current and likely future management of learning opportunities.

## Section 4: Institutional approach to quality enhancement

112 The University defines quality enhancement activities as those which 'ensure the learning and teaching strategies are subject to reflection and critique in ways that secure continuous improvement and provide a range of experiences to support individual learning needs and personal plans'. Through the structures described in Section 1, the University is able to effect enhancements of the quality of learning opportunities at an institutional level. Enhancement is driven through the University's Strategy Map and Teaching and Learning Strategy. Institutional oversight and direction of quality enhancement is provided through the University Teaching and Learning Committee (UTLC).

113 The University has for some years conducted thematic reviews, which enable it to evaluate thoroughly the theme in question and to identify strengths and weaknesses. These reviews, which are reported to UTLC, have covered themes such as student evaluation, assessment and feedback, and the part-time student experience. Thematic reviews also involve external members, not current external examiners, who are approved by the Quality and Standards Advisory Group (QSAG). This externality adds weight to any recommendations and highlights areas of weakness or good practice.

114 The quality appraisal process should 'provide evidence to assist the University in ensuring that its policies and quality appraisals procedures operate effectively and are being implemented consistently across the institution', and are determined by and presented to QSAG. The audit team concluded that quality appraisals are a useful tool for monitoring and enhancing practices, however, in the team's view, more consideration could be given by QSAG and UTLC to the useful recommendations made in quality appraisals, rather than simply leaving them as 'received and noted' (see paragraph 119).

115 Internal quality audits scrutinise rapid areas of development, or report on issues of concern. Although internal quality audits have been used rarely, they have had a significant effect. For example, after a rigorous internal quality audit, the relationship with a collaborative partner was terminated, as it was deemed to be a threat to the University's academic standards.

116 The University has used its Teaching Quality Enhancement Fund (TQEF) allocation to support developments in learning and teaching however; with the cessation of this funding, the University is setting up an Institute for Teaching and Learning to ensure future enhancement opportunities (see paragraphs 83 and 109).

117 The University is committed to improving standards through benchmarking exercises and 'mystery shoppers', and is continuously entering for awards as part of commitment to ensuring an excellent service for students, as expressed in the Computing and Library Services annual plan, which also links to the University's Strategy Map. The library also considers student opinion through its attendance at student panel meetings and evaluation processes. Following complaints from students about the University's online electronic journal resource, Computing and Library Services switched to another system, and monitored student perceptions of the new service. This reinforces the service's commitment to enhancement. The University's Computing and Library Services has received high scores in the National Student Survey (NSS) and contributes to enhancement activity through continuous improvement to services and access to learning opportunities (see paragraph 92).

118 It was clear to the audit team, throughout its meetings with staff and students, that the University has a culture of celebrating student and staff achievements and sharing best practice. This was evinced through institutional events such as the Research Festival, the annual Teaching and Learning Conference, the TQEF Celebration event, Literature Festivals, the Extra Mile awards and also school-based activities such as the Festival of Teaching and Learning in the School of Human and Health Sciences. The team found that staff and students are aware of, contribute to, and appreciate the range of celebratory activities on offer and the benefits it has on learning and

teaching. The students met by the team had nominated staff for awards, and appreciated how such an initiative impacted positively on their student experience. The team concluded that the contribution to quality enhancement made by the various ways of recognising staff and student achievements was a feature of good practice, which is well established within the University.

119 The audit team found thematic reviews, quality appraisals and internal quality audits to be rigorous tools for internal evaluation, with great potential for enhancement. However, it found that their contribution to enhancement was diminished by not always following up recommendations with appropriate actions. The audit team would encourage the University to ensure that such processes identify appropriate subsequent actions, and that progress on these is reviewed.

120 The audit team found that the University has structures in place to ensure there is quality enhancement at an institutional level, driven through the University's Strategy Map and associated Teaching and Learning Strategy.

## **Section 5: Collaborative arrangements**

121 The University has been engaged since 2007 in a process of rationalising the number and scope of its collaborative partnerships. The policy was the result of a strategic initiative by the Executive to give more focus to the University's approach to collaborative arrangements. At the same time, the intention was to enable better alignment with the developing Strategy Map, and the stated aims of the University as a provider of accessible education that is of relevance to employers and the local community.

122 As noted in paragraph 4, in December 2009 there were some 37 collaborative partnerships, of which all but seven were with partners based in the UK. At the time of the audit, the total number of registered students with collaborative partners was reducing further, as the rationalisations continued. Additionally, the University had withdrawn from some of its collaborative arrangements because of academic concerns identified by internal and external reviews. At the same time, it had recently validated a small number of new collaborations, including the external provision of access programmes delivered on-campus, that enable international students to prepare for entry to on-campus University courses via a number of different routes.

123 Other UK-based collaborations are predominantly arrangements with partners as members of a well-established network for the delivery of courses and in-service professional development in teacher training for the post-compulsory education sector. The network has developed into a more formal consortium of partners, the Consortium for Post Compulsory Education and Training, (CPCET), that was set up to 'exploit the benefits of collaboration'. In parallel with this, the University has been instrumental in the formation of a broader Huddersfield University Distributed Centre for Excellence in Teacher Training, for the lifelong learning sector (HUDCETT, see paragraph 85) with a specific remit to identify and disseminate good practice and pedagogical innovation.

124 Meetings with staff from a selection of both UK-based and international partner institutions confirmed to the audit team that there was a good match between the partners' strategic intentions and the University's mission statement. Partners recognised the shared values of widening access and providing educational opportunity for late and mature-age entrants, for professional development throughout a career, and the pivotal importance of the vocational relevance of courses. The team formed the view that the process of rationalisation of collaborations had made significant progress since the last audit, and that it demonstrated a clear commitment to implementing the Strategy Map across all of the University's academic activities.

125 The broad approach to managing academic standards within partner institutions is identical to that for on-campus provision and comprises the regulatory framework and policies laid out in the various handbooks for the assessment and quality assurance of courses leading to

the University's awards. This includes the approach to classifying and awarding degrees, external examining, and the moderation of marks and grades. This overall framework is supplemented by a number of arrangements that are specific to collaborative partnerships, including a specific Handbook for Collaborative Provision.

126 The key responsibility for managing collaborative provision is vested in the Standing Committee on Collaborative Provision (SCCP), a sub committee of the University Teaching and Learning Committee (UTLC) that has the remit of developing policy and strategy with respect to collaborations, the validation of new partnerships and course delivery, and the monitoring, review and quality assurance of collaborative provision. The Committee, which is chaired by a senior member of staff nominated by UTLC, has a broad cross-school membership along with relevant members of the University Executive, namely the Deputy Vice-Chancellor (DVC) and Pro Vice-Chancellor (PVC Teaching and Learning), and heads of service departments. The Consortium for Post Compulsory Education and Training (CPCET) has additional arrangements in the form of a board which meets annually, with operational oversight exercised by a Board Steering Group that meets some six times a year.

127 The audit team's scrutiny of the terms of reference of SCCP and a sample of the agendas and minutes of its meetings confirmed its central role in exercising operational oversight of both UK and overseas collaborations. This finding was reinforced by meetings with committee members and staff from partner institutions and was consistent with the findings from previous QAA audits of collaborative provision, which identified a coherent and robust framework that promotes consistent practice, and which was a positive feature of the University's approach.

128 At the time of the audit, the University identified three types of collaboration that it would routinely validate. The audit team noted that there was a small number of course validations where the programme had been designed by the partner institutions and was being delivered by their staff, which included some access courses delivered by a partner on campus. The University also franchises its on-campus courses to partners, and offers courses at partner institutions that are designed and assessed by University staff and delivered by them at the off-campus location (referred to by the University as ODUPLUS). In a number of cases, ODUPLUS and franchising are combined within a course.

129 Every course delivered in collaboration is owned by the nominated school that initiated the process of validation and approval of the link. The school has overall responsibility for the quality management of the partnership and the courses delivered within it. Staff from the partner institutions who will be involved in teaching and assessment of a course must seek formal approval from the University to gain the status of University Tutor on the basis of the submission of a curriculum vitae. The audit team saw examples that confirmed that staff CVs are scrutinised for approval as part of the initial validation event, with any subsequent approval being the responsibility of the relevant school board. Each course is required as part of the contractual arrangements to have a course committee and for each partnership there is an Executive that meets annually and reports to SCCP.

130 Each course has a University Designated Academic Liaison Officer (DALO), and, in the case of a partnership where the provision is complex or extends beyond the delivery of a single course, there is also usually an Institutional Liaison Officer (ILO). The two posts are distinct, with the DALO having responsibility for the day-to-day operation of the courses, and the ILO (who is usually a senior member of University staff) maintaining responsibility for strategic development. The integrity of the business case is overseen by SCCP. The partner institution is also required to have a DALO, and the link between the two respective individuals forms the primary communication link at the operational level. In the case of many partner institutions, the role of DALO is assumed as part of the broader responsibilities of a Head of Department or similar, who may also adopt the additional roles that are contractually required, such as Academic Conduct Officer.



131 The audit team met with a representative sample of DALOs from partner institutions and DALOs from the University, who confirmed that the role is pivotal to the successful operation of the collaboration. Communication between the University and its partners was found to be effective and regular, and based on a mutual understanding and commitment to the DALO role and to maintaining the quality of the course and the partnership. The team concurred with the findings of the Collaboration provision audit of 2007, which identified the role of DALO as a feature of good practice, and noted that it had consolidated its approach to the quality management of its collaborations more generally by increasing the prominence given to the responsibilities carried by this post.

132 The CPCET consortium has implemented a number of enhancement initiatives to extend the quality of learning opportunities and promote pedagogy and good practice. These include a conference for partner librarians, a biennial partner conference and a forum for partner DALOs. The University may wish to consider how it might make these positive developments more accessible to its international partners and to partners who are not within the Consortium.

133 As noted in paragraph 62, the various elements of the Academic Infrastructure such as subject benchmark statements, the *Code of practice*, programme specifications and the FHEQ form an integral part of the University's approval process. Courses offered by the CPCET have additionally to meet professional requirements and are subject to Ofsted inspections.

134 The audit team considered in some detail a number of courses delivered by partners in the Far East, all of which were 'top-up' degrees forming the final year of study of an honours programme. In these cases, the preparatory years of study comprised diploma-level work that had been mapped to the appropriate levels of the FHEQ, which had been confirmed at the point of validation. The team found that staff at the partner institution were aware of the underlying philosophy of the FHEQ and its relevance to courses delivered under the partnership.

135 In the case of the majority of the courses offered in collaboration with external partners, the University was found to make good use of the Academic Infrastructure to guide the design of, and calibrate academic standards of, its awards.

136 The audit team considered the relevance of the FHEQ terminology to the external access courses for international students offered on-campus and found a number of ambiguities that had the potential to confuse prospective students. This is discussed more fully in paragraph 50.

137 The audit team also considered the validation of an access course that would allow direct entry into the second year of study. The validation panel approved the course under the title of Certificate Studies in Business with a specific recommendation that the course should not use the diploma title. This recommendation was subsequently overturned by chair's action on the advice of the Executive to permit the course to be called an International Diploma for 'marketing purposes'. This contrasts with the University's own regulatory framework regarding undergraduate diplomas, which sets out clear criteria for their award based on the distribution of credits obtained at second and third-year undergraduate levels (5 and 6).

138 Staff from the partner institution concerned were clear about the level of the courses offered with respect to the FHEQ, and those students met by the audit team who were studying on the access courses were also clear that successful completion of the programme would permit entry to the University and not lead to an exit award. Nevertheless, the team noted publicity materials for the International Diploma that might be taken to suggest that the course led to an exit award at diploma level, and the University will wish to consider the future use of such titles to ensure consistency and to avoid the potential for confusion on the part of prospective students.

139 The Handbook for Collaborative Provision sets out a clearly defined procedure that must be followed for the approval of a new partnership, and the validation of any courses that will be delivered through the collaboration. The procedures follow those laid down for validation of

courses on-campus in the handbook on Quality Assurance Procedures for Taught Courses, with additional processes required for institutional approval of the partner, and approval of the business case. The business case is scrutinised by Registry and financial details are confirmed by the Finance Office. Computing and Library Services and, where appropriate, the International Office provide commentaries. A report of the scrutiny is forwarded to SCCP. Approval for delivery of a course at a partner institution is given for an initial period of five years, after which a revalidation event is required.

140 Partner approval requires scrutiny by a panel chaired by a senior member of the University and usually also involves a site visit from a representative from Computing and Library Services to confirm that the appropriate learning infrastructure is in place. Validation of the course itself requires scrutiny by a validation panel convened by SCCP on behalf of UTLC. The panel is required to have external membership with a balance between internal and external members and representation of any relevant vocations or professions, although there is not a similar requirement for externality for partner approval (see paragraph 42).

141 Validation panel reports, which are forwarded to SCCP and UTLC, may set a number of conditions that have to be met for the approval to be complete. Documentation made available to the audit team from a number of different validations and partner approvals provided examples of the types of conditions that had to be satisfied. There was clear evidence from the minutes of school boards and SCCP that progress on meeting these requirements was monitored closely, and meetings with staff at partner institutions indicated that the conditions that had been set were regarded as a binding requirement and that some urgency was expected of their institutions in addressing them. The completion of the validation results in a collaborative contract drawn up between the University and the partner for each course that has been validated. Contracts that were studied by the team showed them to be comprehensive and detailed, with useful appendices that defined the terminology of the contract and set out the key course details.

142 The University states that the change from the previous practice of validation for three years to the present five-year term was made in the interests of increased efficiency. The University simultaneously introduced a 'mid-point review' of collaborations, a paper-based exercise conducted by Registry to ensure that the University's quality assurance processes and the regulatory framework, such as engagement with external examiners and the conduct of course boards, are being adhered to. The review results in a report that is forwarded to the relevant school board and requires detailed responses to any issues that have been raised. Examples of mid-point reviews made available to the audit team showed this to be a thorough and probing process that would provide the necessary reassurances as part of a broader framework of quality management.

143 The University has put in place mechanisms for winding up collaborative arrangements, either in response to internal or external quality concerns; as a result of a divergence of strategic direction between the University and the partner; as a part of the overall rationalisation process; or by mutual consent. Detailed consideration has to be given to each case, and the intention to terminate the collaboration has to be submitted to the PVC (Teaching and Learning). There is a formal requirement for an exit strategy to be developed that protects the interests of any registered students and that offers suitable opportunities for them to complete their studies and graduate. The exit strategy has to be approved by SCCP and its execution is monitored by the DALO. The audit team noted that in some cases a range of strategies was designed that might be followed depending on the extent of collaboration that might be received from the partner during the winding-up stage.

144 Overall, the audit team concluded that the processes of partner approval and course validation, the approach to contractual arrangements and the mechanisms in place to support the process of rationalisation of collaborations through the winding up of a partnership were robust and well designed and met the expectations of the *Code of practice*.

145 In common with on-campus provision, each course offered by a partner must submit an annual evaluation report (AER). The form and structure of the report, which is written by the relevant partner DALO, is standard and the report enters the normal cycle of scrutiny by the annual evaluation committee of the relevant school annual evaluation committee (SAEC) (see paragraphs 38-39). Along with evaluation by the SAEC, Registry reviews all AERs from partners and provides to SCCP a summary report, which is accompanied by a separate summary from the relevant Dean in the form of a Dean's report on collaborative provision. These reports are received by SCCP and UTLC.

146 As noted in paragraph 119, the University has also in place mechanisms for occasional special review in the form of internal quality audits, which are deployed where concerns have been raised by external reviews, for example, and may lead to an action point for the implementing of an additional review at a later date, or in some circumstances to the termination of a partnership.

147 The audit team considered that the annual evaluation process, with the additional annual scrutiny afforded by Registry and the Dean's report, provided a suitable check of the continuing health of courses offered in collaboration and that the availability of the internal quality audit provided a rigorous method of evaluating the continuing validity of any contractual obligations.

148 Processes for assessment closely follow those for on-campus provision. All award-bearing courses are required to have external examiners who must attend course assessment boards (CABs). External examiners are appointed by the University in exactly the same manner as those for on-campus provision (see paragraphs 43-47), and in many cases serve both on-campus and off-campus courses wherever a parallel arrangement exists. All marks assigned to assessed work must be presented at CABs whose conduct is governed by the University regulations. In many cases the CAB is held on-campus for both the on and off-campus courses. In others the CAB may be held at the partner institution and, in that case, is chaired by the relevant University DALO, unless the provision is 'designed and delivered', in which case the DALO is required to be present.

149 Assessment of franchised courses is conducted by the partner, with moderation of grades being carried out by University staff. Where there is a significant number of partner institutions offering the same franchise (as in CPCET), additional arrangements have been put in place in the form of an annual moderation event with the aim of promoting consistency of practice and standards.

150 Staff at partner institutions who met the audit team commented positively on the effectiveness of the moderation process and the interaction with the DALO during the assessment cycle, expressing the view that this was an important aspect of their professional development. The team noted the close match between the approach to assessment for courses delivered at partner sites and that of on-campus courses, and noted also the clear requirements regarding external examining. In the view of the team, this represented a robust and reliable approach to the maintenance of academic standards within collaborative provision.

151 The role of students in quality assurance within collaborations was found to be somewhat limited, as, in the case of overseas collaborations in particular, the students lacked the opportunity to participate in the broader range of quality activities offered on campus. All partners are contractually required to implement student panels for each course or group of cognate courses. In addition, students are offered the opportunity to provide formal feedback at module level, and the AER is required to provide an analysis of student views and a commentary on the operation of the student panel.

152 Students studying on collaborative courses who met the audit team emphasised the close links that existed with staff at the partner delivering or supporting the course. They all valued the informal routes for support, and were clear about who they would turn to if they had difficulties.

153 Course-specific information is provided to the same pattern and standard as on-campus courses, with a range of course and module handbooks supported by web-based materials.

Students who met the audit team indicated that the materials they had been given were sufficient and appropriate, and that their courses were accurately described to them prior to registration.

154 Admission to courses offered at partner institutions is devolved to the partners when the University is confident in such delegation. In those cases studied by the audit team, the criteria for entry to the course were clear and well understood by students. Some partners had particularly robust policies and requirements for entry, with annual evaluation of admissions decisions and mapping of these against course performance and outcomes.

155 In the case of one access course, the audit team found that the conditions for progression to the University were both explicit and clear, and understood unambiguously by the students it met. Nevertheless, documentation made available to the team indicated that, in at least two cases, the University's own admissions policy had not been adhered to and that considerable discretion had been exercised in permitting the students to enrol on a University course. The team, while recognising that the University Regulations permit 'The admission of a student [will be] based on a reasonable expectation that the student will be able to fulfill the learning outcomes of the course of study and achieve the standard required for the award', at the same time noted that there was a considerable discrepancy between the grades obtained in these cases in certain areas of study, and those stated as a progression requirement. The University is encouraged to revisit the regulatory aspects of the exercise of discretion for admission from collaborating partners to ensure equity and parity of treatment for progressing students.

156 Contracts governing collaborative courses contain an explicit requirement that all publicity and advertising materials referring to the course must be offered for scrutiny and receive formal approval before they may be used. Some partners have linked their website into that of the University, which presents the user with a uniform 'look and feel' to their web presence. Those partners visited by the audit team were clear about the requirement of University approval for their materials and confirmed to the team that this was a matter of routine that was expedited by the DALO for approval by the school board.

157 Through exploring the University's website, the audit team noted a weakness in the approach taken to assuring the quality of course publicity for collaborations. Part of the University's own website contained material specific to a number of partnerships that was out of date, contained inaccurate information about the mode of delivery, or referred to courses that had been approved but had never run. This material was beyond the control of the partner, and while senior University staff were able to delineate the lines of responsibility for maintaining these pages in an up-to-date and accurate form, it was clear that the University's own policies in this regard were not being followed.

158 As noted in paragraph 195, the audit team also identified a potential problem with respect to the website of a partner institution. One of the recommendations from the QAA Collaborative provision audit of 2007 advised the University to 'adhere to, and ensure consistent implementation of, its procedures in relation to publicity materials...across all partners'. The team felt that more still needs to be done with respect to monitoring systematically publicity relating to collaborative provision on its own website as well as that of partners. Consequently, the team advises the University to take steps to ensure full adherence to University policies with respect to public information regarding courses offered by partner institutions.

159 From its analysis of documentation and meetings with staff and students at the University and selected partners, the audit team concluded that the University's arrangements for managing its collaborative provision are largely effective and fit for purpose.

## Section 6: Institutional arrangements for postgraduate research students

160 The Pro Vice-Chancellor (PVC, Research and Enterprise) is responsible for overseeing and maintaining the University's policies relating to postgraduate research (PGR) students. At the time of the audit, a person had recently been appointed to this new role, which figures prominently in the University's Strategy Map. The PVC (Research and Enterprise) chairs the University Research Committee (URC) and associated committees and groups and represents the interests of research and research students at the Senior Management Team (SMT).

161 Each school has a Director of Graduate Education to whom significant responsibility for the management of the PGR provision falls. The duties of this person are spelt out in the University's Code of Practice for Research Degrees. Notwithstanding the significant level of responsibility for PGR students that lies at school level, it was evident to the audit team that the University has structures and reporting mechanisms that ensure that there is broad parity of expectation and experience across schools. For example, school-based committees and groups report through to central bodies (URC, Senate and the University Teaching and Learning Committee (UTLC)) while the Research Office logs and monitors school-based procedures and decisions. There is also significant university-level input into aspects of the PGR experience, for example the provision and/or monitoring of student feedback and provision of induction and PGR skills training.

162 At the time of the audit, there were over 600 PGR students enrolled at the University. In addition to the PhD, the University offers higher doctorates, professional doctorates, the degree of MPhil, an MEnt and an MA and MSc by research. Central to the way in which PGR students are informed is the Virtual Graduate Centre, which provides ready access to key documentation relating to PGR students at the University. The University's G:R:A:D:PG folder also contains much of the relevant information and is given to students at induction. The University has moved to a system whereby there are four specific start dates per year. Shortly before the audit, the University had launched the 'Convivium', which is a dedicated physical social space for PGR students located in the central services building. It is described by the University as a place where postgraduate students may 'sit, think and discuss'. Although there had been limited opportunity for students to experience this new facility by the time of the audit, students met by the team welcomed the initiative.

163 In the 2006 QAA Review of research degree programmes, the University was invited to consider three specific points. Two of these related to issues of consistency of the student experience, while the third related to the possible introduction of staff-student liaison committees at school level for PGR students.

164 Consistency of the University's expectations of the student experience across schools was evident from the audit team's consideration of the documentation provided. Induction, for example, while differing in format between schools, and in some schools being somewhat informal, was found to be broadly similar in scope. The oversight of the Research Office ensures that there is a high degree of consistency of experience between schools in matters such as admissions and progression. The team also saw evidence that, where appropriate, URC seeks to address any issues, such as a perceived difference in response time to applications received, in order to ensure university-wide consistency.

165 Overall, the audit team formed the view that there was an appropriate level of consistency of experience of PGR students across schools and that the University had appropriate mechanisms for ensuring such consistency.

166 PGR student representatives are included on URC and school-based research and enterprise committees. A PGR representatives' committee was due to meet for the first time in June 2010. This will be a high-level committee, the membership of which will include the PVC

(Research and Enterprise), the school PGR representatives, the Director of Research and Enterprise, the Head of Research and Graduate Education and the school directors of graduate education. Student representative training is provided by the Students' Union and the roles and responsibilities of the PGR student representatives are clearly spelt out in the relevant documentation. The audit team found that there was adequate opportunity for the PGR student voice to be heard and acted upon at both school and University level.

167 The University is strategically developing its research environment. 103 staff were entered across 12 units of assessment in the 2008 Research Assessment Exercise (RAE). At the time of the audit, the University had more than 30 research centres and groups, which ranged across the schools. There is a policy of focusing the recruitment of research students to these areas of established research strength. The research pages of the University's website are informative and up to date, giving students a clear sense of those areas in which PhD registrations will be considered. The audit team found that staff are aware of the University's policy of admitting PGR students only to specific areas of study where there is the necessary supervisory and research expertise.

168 The Strategy Map provides a clear steer towards enhancing further the research environment within the University. The audit team found this development to be well understood by staff. As part of this enhancement, the University has created 375 fee-waiver PGR studentships, together with the opportunity for University staff to register at the University for a research degree free of charge.

169 Normal entry requirements are set out in the Regulations. Responsibility for the admission of students lies at school level. There is a clear statement of English language proficiency requirements. The pre-enrolment form (PEF) reflects succinctly the principles that underpin University admission requirements for admission to PGR studies, including the requirement for proficiency in English.

170 The University's policy reflects very closely the wording from precept eight of QAA's *Code of practice, Section 1: Postgraduate research programmes* that admissions decisions should involve at least two members of staff who have received instruction, advice and guidance in respect of selection and admissions procedures. Staff confirmed that normally up to four members of staff were involved in making decisions regarding the admission of PGR students (the Head of School, the Director of Graduate Education and the two supervisors). This is reflected in the PEF, which requires the signatures of the main supervisor, the Head of Department and the Director of Graduate Education. The audit team came to the view that the systems governing the selection and admission of PGR students to the University were appropriate, consistent with the University's Code of Practice and with QAA's *Code of practice*.

171 All new students are expected to attend the central Postgraduate Researcher Welcome and Induction event and related events at school level. This is a substantial event spread over three days for the main admission date at the beginning of the academic year and one day for later admission points (in January, March and April). There is a follow-up to this event approximately three months after the main session. Although it was confirmed that attendance at induction is compulsory, the University recognised that in practice it is not always possible to insist upon this. Those who do not attend are sent the relevant documentation, including the extensive G:R:A:D:PG folder. Students expressed their satisfaction with the induction process and stated that the recent changes to it had resulted in it becoming 'more systematic'.

172 The University's Code of Practice sets out clear guidelines on the nature and extent of supervision for PGR students. All students can expect to have a minimum of two supervisors, at least one of whom will be research active in the area of the student's own thesis. The audit team noted a slight inconsistency on this point between the University's Code of Practice and its regulations, which has some potential to misinform a student. The Code of Practice stipulates that supervision of a PGR student 'should be provided by staff who themselves have undertaken research and have a research interest related to that of the student's proposed research degree',

whereas the Regulations state that 'At least one member of the supervisory team will be currently engaged in research in the relevant discipline'. The University may wish to rectify this slight ambiguity. One member of the supervisory team will either have experience of relevant-level supervision or have completed 'accredited training in research supervision'. One supervisor is appointed as the 'main supervisor' and has the responsibility of supervising the candidate 'on a regular and frequent' basis. The team saw some evidence that suggested that the precise meaning of 'regular and frequent' is not understood as being specifically prescribed at school level. Student comments reflected these policies and indicated that, while there was some variation in practice, all students had a supervisory team consisting of no fewer than two members and had supervisory sessions at a frequency appropriate to their needs.

173 The minutes of the School Research Co-ordinators' Committee held in 2008 included the statement 'The University does not have a written rule about the amount of supervision time given per student' but takes as a general principle one hour every two weeks for a full-time student and one hour per month for a part-time student. According to the University's Code of Practice, all main supervisors are encouraged to produce a statement of expectations, which is provided to students. The purpose of the statement is to provide students with more detailed guidance about what they can expect as a research student. It sets out the realistic commitments a supervisor can make on such matters as frequency of meetings and feedback on written material. The audit team examined samples of such statements of expectation and came to the view that there was broad consistency of practice. Students expressed satisfaction with supervisory arrangements, while reflecting that there was some variation between schools. Students expressed the view that, in addition to regular and pre-arranged sessions, supervisors were available for additional guidance as the need arose.

174 The University appears not to have a precise maximum number of PGR students for which a supervisor may have responsibility, however its Code of Practice clearly acknowledges precept 14 of QAA's *Code of practice, Section 1* relating to this matter. The audit team saw evidence of concerns having been raised at URC regarding the 'relatively small number of staff [that] were responsible for a large number of the successes reported'. It was reported that the PVC and Deputy Vice-Chancellor (DVC) were addressing this issue with a view to devising 'a sensible work allocation model for Senior Management Team's (SMT's) approval by September 2010. This should ensure that academic staff are deployed to best effect.' The team was given to understand that such a workload allocation model was still under active development at the time of the audit.

175 The University's Code of Practice also has provision for change of supervisor and for arranging the continuation of supervision of students in the event of a member of staff leaving the University. The audit team noted that only an existing member of full or part-time staff may act as a primary supervisor and that, in the event of a primary supervisor leaving the employment of the University, a new primary supervisor would be appointed, with the previous primary supervisor being allowed to continue in a co-supervisory role.

176 Given the University's ambitious plans for the expansion of PGR numbers (see paragraph 168), the audit team sought to understand how these plans were being supported by ensuring the requisite complement of supervisors. Two particular issues were addressed in this context: the arrangements for the allocation of supervisors to PGR students (particularly the mechanisms by which the research standing and general preparedness of a staff member potentially or actually to undertake research degree supervision are assessed and by whom), and the arrangements for the training of supervisors, both more experienced staff and those new to PGR supervision.

177 The audit team was given to understand that supervisor allocation is formally the responsibility of the Dean but in practice much is delegated to the school-level Director of Graduate Education. Supervisors are approved on the basis of track record and research expertise. Staff who are themselves only newly qualified at PhD level cannot take the role of main supervisor but may work in a team with a more experienced supervisor. Decisions relating to supervisors are taken at school level but documentation is lodged at university level. The University is currently

seeking to increase the number of staff who are able to supervise research students through the provision of appropriate training.

178 The University provides skills development and training for supervisors. The audit team noted, for example, the provision of a Postgraduate Certificate: Higher Education Practice (Research Supervision). It noted also the workshops on 'Skills development for academic staff/ research supervisors' and 'Internal and External Viva Examiner Training' listed in the Staff Development Programme. The team observed, however, that, while the undertaking of such training is strongly encouraged, at the time of the audit it was not compulsory. The team considered that this could potentially compromise the student experience and might potentially result in a conflict with QAA's *Code of practice, Section 1*. The significance of this emerged during a meeting in which it became apparent that one newly-appointed supervisor, who had in fact undertaken some training, had felt no compulsion so to do. However, URC confirmed in January 2010 that the University is moving towards making research supervisor skills training compulsory. The team supports that move.

179 The arrangements for monitoring progress of research students are supported by a set of clear forms that provide unambiguous guidance and a clear time frame. Documentation begins with the Outline Programme of Research (to be completed within one month of enrolment) to the Application to Enrol for Submission Pending Period. The audit team took the view that these forms, and the underlying processes to which they give highly focused expression, were fit for purpose. The process of moving from MPhil to PhD is spelt out in the Code of Practice. The University keeps track of its completion rates for PGR, which it has benchmarked against national averages.

180 Skills training for students is provided centrally through the University's Research Skills Development Programme, information concerning which is found on the University's virtual learning environment (VLE). The University has a Graduate Skills Co-ordinator, who has specific responsibility for developing research degree support. PGR students undertake a training needs analysis soon after registration. This is discussed with the supervisor and a personal development plan drawn up. Students confirmed their awareness of these arrangements, though not all had taken full advantage of their provision. Some students expressed the view that the university-level training was too general and stated a desire for more subject-specific training at school level.

181 Two Research Ethics modules, which provide a basic grounding in ethical issues, are available to PGR students. The audit team found somewhat unclear the means by which ethical clearance for PGR projects is granted and the extent to which such approval, and the process by which it is given, is recorded by the University. Occasional references to a research ethics committee were found in the documentation examined by the team. At the time of the audit, however, this committee had become defunct.

182 It was apparent from the minutes of the University Teaching and Learning Committee (UTLC) and URC that the University has engaged in discussion around the creation of robust ethics policies at school level and has been doing so for some time. The audit team noted that, although ethical issues were a standing item on URC, no such issues were being brought forward. Further, at a meeting of URC in 2009, 'The Pro Vice-Chancellor for Learning and Teaching reported that no ethical issues were being reported at UTLC either, which could imply that a redefinition or re-examination of processes was required. The PVC volunteered to look into this further and to report back to the Committee'. However, the minutes of the following meeting indicate that there were no matters arising from that meeting and the specific matter discussed did not feature at later meetings during the 2009 calendar year. PGR students told the team that there was evidence of some lack of clarity regarding how (or indeed, in one case, if) ethical clearance for research projects was to be gained.

183 There is evidence in the Regulations that the University requires each school to have procedures for ethical clearance and the audit team asked for copies of such policies as they related to PGR students. Policies were provided for two schools. It was confirmed at a meeting that, in the past, PGR research ethics matters had largely been dealt with via the mechanisms operating in Human and Health Sciences but that there had now been a recognition that, given



the significant strategic growth in PGR numbers, this system was in need of revision. In January 2010 the chair of URC reported 'that a group had been established to review existing arrangements [for dealing with ethical issues] and that their recommendations would be available in due course'. Discussions on this at an appropriate level were in evidence but, at the time of the audit, no final outcomes had been agreed.

184 The audit team concluded that the lack of a clear ethics policy could put PGR students at risk. Given the significant strategic investment in PGR student numbers at the University, both the number and range of PGR research projects will increase significantly. Consequently, the team advises that the University formalise its processes for the ethical approval of research projects and the appropriate reporting of such approvals.

185 It was stated in the Summary Report of Career Development and Skills Training (funded by the Roberts Initiative) that all PGR students who intend to teach while they are registered for research degrees 'are obliged to undertake a period of training through the University's Teaching and Learning Academic Programme'. The audit team found, however, a distinct lack of clarity on this point, since some PGR students who support learning had not received training before they embarked on this role. Also, staff told the team in one meeting that such training, while available, was not mandatory (but was about to become so). At another meeting, however, it was stated that such training for PGR students who teach was already compulsory but that the University did not currently have a mechanism for ensuring that such training had been undertaken. This suggested to the team that, at a minimum, a level of confusion on this issue existed that could lead to inconsistency in the operation of a university-wide policy in an area where student learning could potentially be compromised. Consequently, the team advises the University to ensure that all PGR students receive appropriate training before they undertake teaching duties.

186 As noted above, there is ample opportunity for the PGR student voice to be listened to and acted upon by the University, which PGR students confirmed was the case. It was also evident to the audit team that the University takes other steps to examine critically feedback on provision. For example, under a revised framework for the annual evaluation of research degrees, reports on PGR provision are reviewed both at school board and school research committee and also by school management teams. An overview report is compiled by Research and Enterprise and considered at URC. The University participates in the Postgraduate Research Experience Survey (PRES), which returned a satisfaction rate of 78 per cent. PRES results are analysed by the PVC and reported to URC and Senate. An action plan is considered by URC and Graduate Education Group (GEG).

187 Assessment procedures and required learning outcomes of research degrees are clearly spelt out and communicated to PGR students. For example, at PhD level all students are examined by a minimum of two examiners, at least one of whom will be external to the University. Where the candidate is a member of staff and/or the PhD is by publication, a second external examiner will be appointed.

188 The systems in place for students to lodge complaints and appeals are clearly spelt out in the University's Code of Practice. One of the 10 progression forms which punctuate the experience of the PGR student is a confidential feedback form which goes straight to the Research Office and may be used at any point and as often as necessary to express any concerns about progression and supervisory arrangements. The University also has a procedure for making a change in the supervisory team.

189 In addition to the support offered through induction, the University has a PGR student support tutor system. Such tutors complement the members of the supervisory team and are in place to support the student in the case of any particular difficulty (for example, one that has arisen with the supervisory process itself). Schools are largely responsible for ensuring that PGR students have access to a personal tutor, which is often the research co-ordinators (except where the research co-ordinator is a member of the supervisory team). Students, including those registered part-time, expressed satisfaction with the arrangements for the support of students and spoke positively of the processes in place for accessing articles and books. The ability to pick up

materials at other centres (such as Barnsley) was seen as a significant benefit, as was the provision made through enabling PGR students to use materials at other libraries, such as that of the University of Sheffield.

190 The audit team found that the institutional framework for postgraduate research students provided an appropriate research environment and student experience. The institutional arrangements, including those for support, supervision and assessment, were rigorous and effective and met the requirements of *Code of practice, Section 1: Postgraduate research programmes*. However, the team advises the University to note its recommendations in paragraphs 184 and 185.

## **Section 7: Published information**

191 Students met by the audit team confirmed the view expressed in the student written submission (SWS) that the quality of information provided about courses in the prospectus is broadly good. The team learned that the Students' Union writes relevant sections of the prospectus. With respect to the University's regulations, students confirmed that, although they may not have a paper copy of the relevant documents, they were given a CD-ROM at induction and knew where and how to access the regulations and Registry when needed.

192 Students receive course handbooks and module handbooks, copies of which the audit team received for the audit trails. The students met by the audit team had received module and course handbooks and were satisfied with their content, although upon investigation the team recognised that there was some inconsistency between and within schools with regard to the emphasis on and information provided on procedures such as extenuating circumstances and academic misconduct. This lack of parity in content could, in the team's view, lead to inconsistent understanding of processes amongst students.

193 In the University's thematic review of admissions in 2007, the panel examined published information provided about courses and had some concerns over the lack of conformity and branding. The audit team was provided with a selection of publicity materials from all schools and postgraduate courses, and was satisfied with the consistency of information, which reflected the diversity of courses without compromising on content and information for students.

194 The information required by *HEFCE 06/45 Annex F* is publicly available through Registry's teaching and learning pages on the University's website. The list of collaborative provision partners is also publicly available on the website. Accurate information is also provided on the Unistats website and is generally complete. The students met by the audit team were generally satisfied with the University's website, although some of them found it difficult to navigate and used the search bar to find relevant information.

195 The audit team found some inaccuracies of content on the University's website, notably on the pages of the International Office. The International Study Centre web pages were found to refer to a 'Diploma' rather than the approved title of 'International Diploma', which could mislead students, especially international ones. In a meeting with staff, the audit team pointed out this inaccuracy and noted that the University had been responsive to this and had swiftly amended the error. The team also questioned the website of an overseas collaborative partner, where the content was entirely in Chinese, although the courses are taught in English. Staff reassured the audit team that the website was also available in English but was under construction at the time of audit. The team felt that the University should periodically check the partner's website as a matter of routine (see paragraphs 157 and 158).

196 The audit team found that, overall, 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.

**RG 625a 08/10**

© The Quality Assurance Agency for Higher Education 2010

ISBN 978 1 84979 153 3

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

Tel 01425 557000

Fax 01452 557070

Email [comms@qaa.ac.uk](mailto:comms@qaa.ac.uk)

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

Registered charity numbers 1062746 and SC037786