

The Manchester Metropolitan University

November 2009

Annex to the report

Contents

Introduction	3
Outcomes of the Institutional audit	3
Institutional approach to quality enhancement	3
Institutional arrangements for postgraduate research students	3
Published information	3
Features of good practice	3
Recommendations for action	4
Section 1: Introduction and background	4
The institution and its mission	4
The information base for the audit	4
Developments since the last audit	5
Institutional framework for the management of academic standards and the quality of learning opportunities	6
Section 2: Institutional management of academic standards	8
Approval, monitoring and review of award standards	8
External examiners	10
Academic Infrastructure and other external reference points	11
Assessment policies and regulations	12
Management information - statistics	14
Section 3: Institutional management of learning opportunities	15
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)	21
Section 4: Institutional approach to quality enhancement	23
Section 5: Collaborative arrangements	24
Section 6: Institutional arrangements for postgraduate research students	28
Section 7: Published information	31

Introduction

A team of auditors from the Quality Assurance Agency for Higher Education (QAA) visited The Manchester Metropolitan University (MMU, or the University) from the 16 to 20 November 2009 to carry out an Institutional audit. The purpose of the audit was to provide public information on the quality of the learning opportunities available to students and on the academic standards of the awards that the University offers.

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 Manchester Metropolitan University 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 considered that the University's approach to quality enhancement was characterised by a commitment to improve the quality of students' learning opportunities. The team saw examples of how the University takes deliberate steps to enhance the quality of learning opportunities for its students.

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 fully 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 found that reliance could reasonably be placed on the accuracy and completeness of the information that 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 introduction of the MMU Professional Passport as a means of helping students to develop their employability skills (paragraph 104)
- the contribution of the Senior Fellows in Learning and Teaching, the Fellows in Academic Practice and the Communities of Practice, and the Fellows in Public Engagement, to the quality of the student learning experience (paragraph 112)

- the proactive approach of the Centre for Learning and Teaching to disseminating and supporting good practice in learning and teaching, including the development and use of the academic database (paragraph 120)
- the comprehensive training and development opportunities provided by Research Enterprise and Development for postgraduate research students (paragraph 163).

Recommendations for action

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

Recommendations for action that the team considers advisable:

- establish a set of comprehensive university-wide assessment criteria to help maintain consistent standards across all provision, both on and off-campus (paragraphs 25, 28, 50, 60 and 144)
- the University should identify those features of the student learning experience (such as feedback on assessment, assessment information, access to personal tutoring, and handbook content) for which unambiguous requirements must be defined and implemented for the benefit of all students (paragraphs 51-53, 62, 63, 67, 101-103, 105, 118 and 173)
- ensure that the name of the partner and the location of study are stated on the transcripts and/or parchments for all the University's collaborative provision (paragraph 132).

Recommendations for action that the team considers desirable:

- make more systematic, effective and evident the analysis and use of data in annual monitoring processes (paragraphs 9, 30, 31, 58, and 59)
- expedite the introduction of a single university-wide peer support system (paragraphs 9, 110)
- as the University reviews its committee structures, particular attention should be given to the means of securing more effective discharge of the responsibilities of those committees, including maximising attendance at their meetings (paragraphs 21 and 23).

Section 1: Introduction and background

The institution and its mission

1 The University's roots can be traced back to the early nineteenth century as a centre of Technology, Art and Design, which was formed from Manchester Mechanics' Institution (founded in 1824) and Manchester School of Design (1838). Subsequently, schools of Commerce (1889), Education (1878) and Domestic Science (1880) were added along with colleges at Didsbury, Crewe, Alsager and the former Domestic and Trades College (1911), latterly Hollings College. The institution became Manchester Polytechnic in 1970 and was designated a university with its own degree awarding powers in 1992.

2 In 2008-09, the University offered around 200 programmes which incorporated some 1,000 courses. The University had around 37,000 students, most of whom were studying on full-time undergraduate programmes. In addition to its undergraduate programmes, the University offers foundation-level programmes, Foundation Degrees, taught postgraduate, doctoral and professional doctorate programmes. The great majority of MMU's students are domiciled in the UK and a high percentage of those come from the north-west. Some 3,000 students study at a collaborative partner, either in the UK or overseas.

3 The University's mission is 'to be the UK's leading university for world class professionals', which underlines MMU's commitment to provide vocational, professional and employment-related learning opportunities for its students.

The information base for the audit

4 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 institution'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 and was given access to the University's intranet.

5 The Students' Union produced a student written submission (SWS), which set out the students' views on the accuracy of information provided to them, the experience of students as learners and their role in quality management.

6 In addition, the audit team had access to:

- the report of the previous Institutional audit (June 2004)
- the report of the Collaborative provision audit (March 2006)
- the report of the Major review of healthcare programmes (May-June 2005)
- reports produced by other relevant bodies (for example, Ofsted and professional, statutory and regulatory bodies)
- the report of QAA's Review of postgraduate research programmes (2006)
- the University's internal documents
- the notes of audit team meetings with staff and students.

Developments since the last audit

7 The University's previous Institutional audit in 2004 identified seven features of good practice, which included the University's commitment to the enhancement of the student learning experience and the provision of a supportive and high quality learning environment. The report also made five desirable recommendations for action: to review the policies for the late submission of undergraduate coursework and internal moderation of assessments; to enhance the support mechanisms for part-time students; to continue the development of a more systematic means of obtaining student feedback; to make more effective and systematic use of statistical data in annual monitoring; and to extend the adoption of effective peer support across the University.

8 Several major developments have subsequently, and to some extent consequently, taken place. Principal among these has been the University's Change Agenda, an initiative designed to modernise the University through revising its strategies and frameworks and launching a series of interconnected projects (such as the Student Voice Project and the Embedding Employability Project). Student and Academic Services have been reconfigured to incorporate previous divisions and, significantly, most campuses now provide student information points as a focal point for student information and enquiry. International Affairs has also been restructured to enable the University to progress its internationalisation agenda. The University was also part way through its plan to move from multiple campuses to two, one in Manchester, the other in Crewe.

9 While the University has met most of the recommendations of the 2004 audit, the present audit team noted that its progress in doing so had been variable. The University has clarified its policy on the late submission of coursework and the process for internal moderation (see paragraph 48). Additionally, library hours have been made more flexible for part-time students and the introduction of a variety of initiatives, such as the formation of a National Student Survey Results Working Group and the Student Voice Project, has provided a more systematic means of obtaining and responding to student feedback. The team felt that the introduction in 2008 of an

online student data system, MMUniview, provided the potential to improve considerably the use of data in programme-level annual monitoring, but found that the depth of analysis applied to the data could be more extensive and evident within programme level reports (see paragraph 59). While the team noted the imminent reporting of a task-and-finish group on peer support, it found that the University had yet to achieve the 2004 audit's recommendation for the adoption of effective peer support across the University (see paragraph 110). Thus, in these two respects, further work will be needed to ensure that all recommendations of the 2004 audit are implemented fully and successfully.

10 Collaborative provision was subject to a separate audit in 2006. Eight areas of good practice were identified, including the recognition of a culture of learning from collaborative provision; the consortia of networks working in close collaboration; the effectiveness of link tutors; the enhancement opportunity provided by link tutor and partner forums; the programme log as a provision of a detailed evidence base; and the thoroughness of the annual monitoring process. Three desirable recommendations related to the development of its enhancement strategy in relation to collaborative provision; the need to distinguish institutional-level approval from programme-level approval, and improving student feedback at the unit level.

11 The introduction of the Collaborative Partnerships Office has taken forward and improved strategic coordination between the University and its partners. The audit team noted the revision of the institutional-level partner approval and review process and saw evidence of unit-level feedback forms contained within the annual monitoring exercise data (see paragraphs 133 and 146). Consequently, the team considered that the University has responded appropriately to the recommendations contained in the Collaborative provision audit report.

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

12 As the senior academic committee of the University, Academic Board has ultimate responsibility for the standards and quality of all MMU's educational provision. It has a range of responsibilities relating to the organisation of learning and teaching, research and scholarship, and advises the Vice-Chancellor on academic matters. Academic Board meets five times a year, receives reports from faculties, and makes decisions on recommendations forwarded to it from its subcommittees.

13 The membership of Academic Board, which is usually chaired by the Vice-Chancellor, includes all senior staff including the two deputy vice-chancellors (DVCs), pro-vice-chancellors (PVCs, who are also deans) and representatives from heads of department, teaching staff and the Students' Union. On behalf of Academic Board, the Centre for Academic Standards and Quality Enhancement (CASQE) is responsible for academic policies, procedures and regulations, all of which are clearly set out in the Academic Regulations and Procedures Handbook. Academic Board executes its responsibilities for the standards and quality of educational provision for taught programmes via the Academic Development Committee (ADC) and for research programmes via the Research and Enterprise Committee.

14 ADC, which is chaired by the DVC Student Experience, is the key body that oversees the management of academic standards of taught programmes, the development and support of learning, teaching and assessment and of student learning opportunities. CASQE is responsible for providing support to ADC and its subcommittees.

15 ADC has three subcommittees, each of which is chaired by a dean in their cross-university PVC role. The Student Experience Sub-Committee considers the quality of the student experience, along with issues such as student support, retention and feedback. The Learning, Teaching and Assessment Sub-Committee (LTASC) addresses support for learning, teaching and assessment, regulatory issues, University processes and strategy for academic partnership. The Academic Quality and Standards Sub-Committee (AQSSC) deliberates on programme approval,

review, modification, discontinuation and external examining and annual reporting. A review of committee structures had been initiated at the time of audit in order to ascertain how well the extant structures were working.

16 Faculties oversee quality and standards via a common committee structure of the Faculty Academic Development Committee (FADC) and Faculty Research and Enterprise Committee (FREC), each of which has common terms of reference across the faculties. Some faculties have incorporated the Faculty Research Degrees Sub-Committee within the main FREC. Faculty-level committees report to the appropriate subcommittee of ADC, as well as to the relevant faculty board. AQSSC operates and monitors the systems for programme approval, the cycle of periodic reviews, and reviews collaborative arrangements within faculty overview reports and action plans in order to assure ADC, and thereby Academic Board, of the maintenance of academic standards and enhancement of the quality of learning opportunities within programmes of study.

17 All ADC's subcommittees, including FADCs, report their activities and priorities for action to ADC annually on a common reporting form. ADC receives these annual reports and constructs an overview report that draws together an evaluation of progress on actions from previous years, a summary of issues to be addressed and recommendations for enhancement. These actions inform subsequent priorities within ADC and its subcommittees in the following year. ADC is an operational bridge between Academic Board and its own subcommittees (including the FADCs) and is a forum for the debate and consideration of new policy initiatives that are then forwarded to Academic Board and may result in change. A typical example of this was the development of the Strategic Framework for Learning, Teaching and Assessment that was reported by ADC to Academic Board in 2009. ADC reviews the appropriateness of initiatives from subcommittees and faculties and recommends changes, such as any alignment necessitated by changes to the Academic Infrastructure.

18 AQSSC has responsibility for overseeing the approval and monitoring process for taught programmes, including those within collaborative provision. Although LTASC is responsible for advising ADC on the development of collaborative strategy, it is AQSSC that monitors the health of collaborative programmes via the annual monitoring exercise that is undertaken at programme level.

19 Below faculty level, the committee structure focuses on the enhancement of learning opportunities. Practice between faculties varies to some degree to reflect local requirements. However, all faculties have a faculty executive group, faculty board, FADC and a programme committee for each programme of study, and an additional staff/student liaison committee. These programme committees monitor the standards and quality at programme level and produce an annual quality action plan, which feeds into the quality improvement plan at the subject or department level, and then a faculty overview report and action plan (see paragraphs 30 to 32). Although these plans incorporate and identify collaborative provision, the audit team noted that gaining an oversight of all collaborative provision performance from the annual monitoring exercise would require disaggregating relevant responses from faculty overview and action plans wherever collaborative provision is noted (see paragraph 138).

20 The audit team's scrutiny of recent minutes of Academic Board and associated committees showed resolutions being forwarded to Academic Board for approval, which suggested to the team that, while ADC is the key committee as far as standards and quality are concerned, Academic Board retains appropriate oversight. A similar scrutiny of minutes to triangulate explanations provided in the Briefing Paper showed activities consistent with the terms of reference and reporting mechanisms between ADC, its subcommittees and faculty committees.

21 The audit team did note, however, that attendance at many University committees was variable, often below 50 per cent, and that some faculty boards were not quorate when they met. Where members were not able to attend, apologies were generally sent, but no alternate deputy routinely attended such meetings on behalf of senior staff. Consequently, it was not clear

to the team how actions and information from meetings with low attendance and incomplete representation were able to be acted upon effectively.

22 The audit team also noted that in the academic year 2009-10, an additional agenda item had been introduced within Academic Board to focus on actions arising from the minutes, by noting the minute, subject, action, responsibility for action and status. However, the team found that other University committees do not adopt this practice, although it is specified in the guidance for committees. Consequently, the team concluded that current processes for the transmission of reporting through committees could be obscure.

23 The audit team's scrutiny of documentation and its discussions with key staff yielded considerable evidence of the effectiveness and comprehensiveness of the University's framework for the management of academic standards and the quality of learning opportunities. There is a clear and comprehensive regulatory framework with academic regulations for undergraduate awards, taught postgraduate awards and research degrees programmes. Appropriate documentation on this framework is readily available to staff and students. The University's central committees are, on the whole, effective in ensuring the standards of awards and the quality of learning opportunities, and generally they operate in a manner which is successful in monitoring, reviewing and enhancing practice. However, the team concluded that it would be desirable, as the University reviews its committee structures, that particular attention be given to means of securing the more effective discharge of the responsibilities of those committees, including maximising attendance at their meetings. As part of this, the guidance in terms of the specification of responsibility for action, as adopted recently within Academic Board, should be applied more consistently across all committees.

Section 2: Institutional management of academic standards

Approval, monitoring and review of award standards

24 The University has well-documented processes in place for the approval, annual monitoring and review of taught programmes, whether delivered by the University or through collaborative arrangements. These processes, which are clearly set out in flowcharts for the different types of provision, address the precepts identified in the *Code of practice*. Procedures take account of the need to protect and maintain academic standards by aligning with *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ), relevant subject benchmark statements and professional, statutory and regulatory body (PSRB) requirements, as well as institutional codes of practice and regulations. Externality is achieved through the use of independent external assessors in programme approval and review.

25 There are two stages to programme approval. The first of these, which had recently been introduced at the time of the audit, assesses the strategic fit and viability of the programme, and also maps the proposal against the University's regulations and credit framework, the FHEQ and relevant subject benchmark statements. Approval at this stage is given by the Deputy Vice-Chancellor (DVC) Student Experience, who reports annually to Academic Board on approvals given. The second stage involves academic scrutiny of the detailed proposal by a panel, which includes PSRB representation, where appropriate, based on documentation and discussion with the course team. This process is managed by the faculty with Centre for Academic Standards and Quality Enhancement (CASQE) checking the documentation in advance for adherence to regulations and alignment with the Academic Infrastructure. Key elements of the documentation are the programme specification and unit specifications, which form part of the Definitive Document. The audit team found variability in the specification of assessment criteria, with some programmes and units being well-defined while others were not well developed. The guidance in the unit specification requires assessment criteria to specify how different levels of performance are distinguished and rewarded so that they form the basis of the unit's marking scheme and feedback comments. However, some unit specifications seen by the team did not include this level of detail (see paragraph 50).

26 CASQE receives the Event Report from this second stage panel. The team saw evidence that demonstrated CASQE effectively tracks responses to conditions of approval. In order to ensure that full approval is in place prior to students embarking on the programme, the University requires events to be completed by the end of May. However, it recognises the need to be more responsive to external opportunities, including those with employers, which increasingly involve cross-faculty developments. It is aware that its quality processes need to remain sufficiently robust in future as it meets these needs.

27 The periodic review of University-based and collaborative programmes takes place every five years, following a two-stage process that mirrors that for programme approval. For review, academic scrutiny also involves the production by the programme team of a self-evaluation document and a meeting of the panel with student representatives.

28 The outcomes of approval and review events, including the fulfilment of conditions, are reported to Academic Quality and Standards Sub-Committee (AQSSC) and Academic Development Committee (ADC). The audit team found that programme approval and review processes were operating as defined and that they made an effective contribution to the setting of standards. However, the team concluded that more consistency was needed in the setting of assessment criteria as noted in paragraph 25 and paragraph 50.

29 Modifications to programmes can be made following a range of approaches dependent on the degree of change proposed, with criteria for the different approaches being clearly communicated. The level of approval ranges from minor modifications being made at a local level, with the Faculty Academic Development Committee (FADC) approval, through to a full review event requiring ADC approval where significant changes are proposed, such as a change to programme learning outcomes with associated change of content.

30 For each University-based or collaborative programme, the University's process for annual monitoring starts with a quality action plan (QAP) that must be agreed by the Programme Committee. Programme leaders are expected to identify issues arising over the year and draw on evidence from external examiners' reports, student feedback (including the National Student Survey (NSS)), and a range of data on admission, performance, progression, retention and achievement. An action plan is a key element of the QAP. The audit team saw that QAP action plans are tracked throughout the year by programme committees. A review of the previous year's action plan is included in the following year's QAP. The team found that the use made of data to be variable and under-developed, which is discussed further in paragraphs 56-59. In relation to other aspects of the QAP, the team concluded that this stage of the annual monitoring exercise (AME) process is appropriately action-oriented and contributes to enhancement.

31 The head of department (or equivalent) confirms or amends the QAP and pulls together issues from across their programmes into a quality improvement plan (QIP). QAPs and QIPs are submitted together to FADCs. The audit team concluded that scrutiny of the QAPs by the programme committee and the head could be enhanced, as both steps failed to identify the need for improved data analysis in a range of reports seen by the team. A faculty overview report, including a faculty action plan, is then created by the chair of FADC, following discussions involving the dean and heads, which is then agreed by FADC. Neither the QIPs nor the faculty overview reports seen by the team included a review of the previous year's actions, although the team was assured by staff that actions were followed up by, for example, being remitted to the Faculty Executive Group or FADC. It was evident from the AME guidance for 2009-10 that an action plan review had now been added to the faculty action plan following a recommendation from the 2008-09 exercise.

32 The faculty overview reports, together with service department and Students' Union reports, are then considered at a special meeting of AQSSC augmented by others involved in the AME process, following which the chair produces a report to inform the AME report produced by the DVC, Student Experience, as chair of ADC. This report, which includes an action plan, then

goes to ADC and on to Academic Board in June of each year. The audit team noted that these plans included a number of enhancement-oriented actions but that the tracking of these actions is unclear, as no review of the previous year's action plan is included in the report. The Briefing Paper stated that progress on the action plan is monitored by ADC but no evidence was found in ADC minutes that this took place.

33 The audit team concluded that the QAP and the faculty overview report with action plan (in its new format) fulfil the purpose of annual monitoring at the programme and faculty level, but felt that the QIP adds little to the process and prolongs the time period required for the monitoring life-cycle. The team found that the process adopted, whereby AQSSC meets with others to discuss issues arising from AME, was positive in sharing these issues and good practice, but that the lack of any evident follow-through of actions arising from the AME report to Academic Board was a weakness. The team was encouraged by recent steps introduced to improve the follow-through of actions but felt that the overall length of the process, with QAPs being finalised in March and Academic Board receiving the AME report in June, meant that AME was perceived by staff as being more about process and documentation than about being an active enhancement process. As the University reviews its AME process during 2009-10, the team would encourage that this opportunity be used to simplify and speed up the process, while making it more effective.

External examiners

34 The University states that external examiners are appointed to ensure justice is done to the individual student, that the standards of the University's awards are maintained, and the assessments with which the examiner is concerned are carried out in accordance with the University's and relevant programme regulations. The institutional code of practice and regulations for external examining is published on CASQE's website, and details of the role of external examiners, including chief external examiners, are set out clearly in the Handbook for External Examiners. Additional requirements are specified in the Assessment Regulations for Undergraduate and Taught Postgraduate Programmes and in the policy on the moderation of summative assessments, with all relevant information being readily available on the external examiners' website. The code is reviewed annually and an institutional overview report on the code's operation is submitted to ADC by the Head of CASQE.

35 External examiners are appointed to individual programmes or to networks of programmes and, wherever possible, the same external examining team oversees both collaborative and equivalent University-based provision. Clear criteria for appointment are in place. Proposals for the appointment of external examiners are considered and approved by FADCs or, for taught research programmes, the Research Degrees Sub-Committee, and reported to AQSSC.

36 The University requires its external examiners to report on whether the standards set are appropriate for its awards by reference to the Academic Infrastructure; the standards of student performance and the comparability of standards with those of similar programmes in other UK higher education institutions; the extent to which its processes for assessment, examination, and the determination of awards are sound and have been fairly conducted. External examiners should report directly to the chair of Academic Board if they have concerns over the fair treatment of individual students or the standard of the University's awards.

37 External examiners were found by the audit team to be well supported through the dedicated website, biannual induction events and, for new or inexperienced external examiners, mentoring from an experienced external examiner.

38 Faculty and campus student and academic services quality officers monitor receipt of external examiners' reports and circulate them to the programme team(s), the chair of FADC, the dean of faculty, head(s) of department (or their equivalent), collaborative partners, PSRBs where

appropriate, and CASQE. Where an external examiner covers programmes delivered both at MMU and at a collaborative partner organisation, examiners are expected to comment on any differences in standards or performance.

39 The University recognises the value of external examiners' reports as an important trigger for its enhancement processes, consequently they are considered at programme level and by CASQE. At programme level, the comments from all relevant reports are compiled into an external examiners audit trail section of the QAP which identifies the action being taken, the date of the action and who is responsible for it. The reports themselves are not considered by the programme committees, although MMU states that it regards external examiners' reports as public documents available to anyone who requests access. The audit trail in the QAP is therefore the means by which programme committee members see the content of the reports. Most QAPs examined were reasonably comprehensive in coverage of issues raised but the audit team felt it was important, if this is to continue as the primary means by which student representatives see the external examiners' reports, that MMU should be mindful of the importance of ensuring all comments are captured accurately. This audit trail is also the means by which external examiners receive a formal response to the issues they raise as there is no requirement for individual responses to be provided to each external examiner's report, although these are not provided in all instances. The team felt the University might consider how external examiners could receive a more rapid formal response.

40 All reports are monitored centrally by CASQE so that any urgent issues can be identified; issues of institutional relevance are captured and responded to, and key themes can be reflected in the annual institutional overview report on external examining prepared by the Head of CASQE for consideration and approval by ADC. The University's guidance on the reporting process states that the main themes and issues, as well as positive comments concerning good practice emerging from the reports, then form part of the Chair of ADC's overview report on AME to Academic Board. However, the audit team found these reports contained quite limited coverage of such themes, issues or comments and were more focused on process. As the external examining process is recognised by the University as having a key role in the maintenance of standards, the team felt the University could benefit from enhancing the robustness of consideration by ADC and Academic Board of the issues arising from that process.

41 The audit team concluded that the University makes scrupulous use of external examiners and that its processes are fulfilling their purpose. However, the team found that these processes would benefit from some improvements, notably increasing the timeliness of response to external examiners, encouraging the comprehensive consideration of issues raised in the reports at programme committees, and enhancing institutional level reporting and consideration of the issues that emerge from the process.

Academic Infrastructure and other external reference points

42 CASQE takes the lead role in ensuring that the Academic Infrastructure and other external reference points are explicit in the University's processes for setting and monitoring the standards of its awards. Any changes to the *Code of practice* lead to a review by CASQE of relevant procedures so as to identify the need for any changes to procedures and/or key institutional documents. Such changes then go through an approval process involving ADC and, where appropriate, Academic Board. New or revised subject benchmark statements are received by CASQE, recorded by the Learning, Teaching and Assessment Sub-Committee and distributed to faculties for action by relevant programme teams. ADC oversees the process through consideration of an annual update on engagement with the Academic Infrastructure submitted by the Head of CASQE, noting revisions and how these have been addressed.

43 The University's Award Framework is in line with the FHEQ, the *Higher education credit framework for England: Guidance on academic credit arrangements in higher education for England*,

August 2008, and with the *Standards and Guidelines for Quality Assurance in the European Higher Education Area*, all of which are reflected in the Regulations for Academic Awards and the assessment regulations for undergraduate and for taught postgraduate programmes of study. As noted earlier (in paragraph 25), programmes are required formally to comply with the FHEQ and must address relevant subject benchmark statements, with the process being formally recorded in any proposal for approval or review (including proposals for programme modification) and in the definitive document. The University's programme specification pro forma aligns with QAA guidelines and is accompanied by extensive guidance on its completion.

44 External expert opinion is used in programme approval and review although evidence of its use in programme design was less evident. Programmes that are accredited by PSRBs also take account of any specific PSRB requirements in approval and review processes. Institutional oversight is gained through monitoring of a PSRB database. Also, an annual overview report on PSRBs to AQSSC has recently been introduced. The use of the Academic Infrastructure and other external reference points was judged by the audit team to be effective in setting and maintaining standards.

Assessment policies and regulations

45 The University has in place separate assessment regulations for undergraduate programmes, for taught postgraduate programmes and for postgraduate research programmes. All regulations apply to University-based and collaborative provision, including joint awards, which all operate under the University's assessment regulations.

46 The assessment regulations were revised and approved by Academic Board in July 2007 and implemented in September 2007. In 2008-09, they were reviewed through a workshop event involving chairs of FADCs and relevant Student and Academic Services staff. No student representatives were present, although they had been invited. However, a staff member of MMUnion did attend and the Students' Union was consulted on further planned amendments emerging from the review. The report commented that the change in regulations, which included a revised method of calculating degree classifications, was 'likely to be the biggest single contributory factor' to an increase in First and Upper Second class awards from 49 per cent in 2007 to 56 per cent in 2008. It concluded that the changes 'appeared to have had a positive effect on undergraduate award outcomes, without compromising the University's academic standards'; however, there was no reference in the report, nor in the ADC or Academic Board minutes, as to what evidence this confidence in the maintenance of standards was based upon. The audit team suggests that the University monitors carefully the ongoing impact of the change.

47 The University's regulations are supported by an Assessment Framework to be used by staff in designing assessments. The framework is based on the principles that both formative and summative assessment should be valid, reliable, achievable and gradable. A range of online resources has been developed by the Assessment Community of Practice and staff of the Centre for Learning and Teaching (CeLT) and, since April 2008, CeLT has been encouraging innovation in assessment practice through its Challenging Assessment initiative.

48 The 2004 Institutional audit recommended that the University review its policies on penalties for late submission of coursework for undergraduate programmes and internal moderation to ensure equity and consistency. Penalties have now been standardised and clear guidance is available on procedures for the internal and external moderation of summative assessments.

49 The regulations and framework set out the expectation that assessment is integrated into all curriculum planning and directly aligned with intended learning outcomes, and that processes of summative assessment are inclusive, fair, consistent and clear to both staff and students. Programme approval and review events scrutinise engagement with the regulations through the definitive document, and any proposed exemption or variation from the assessment regulations,

for example to meet PSRB requirements, is considered by the Learning, Teaching and Assessment Sub-Committee.

50 Unit-specific assessment criteria are required in definitive documents for taught programmes but no detailed guidance for these is provided in the regulations. For example, there are no generic grade descriptors but rather an alignment of degree grades to broad categories such as 'threshold' or 'very good'. Examples were seen by the audit team of comprehensive programme and unit-level descriptors, and grading criteria clearly informed by relevant benchmarks and the FHEQ, but the team also observed instances in collaborative programmes of an inadequate approach to such criteria. The University's guidance for unit handbooks includes full details of assessment but in practice coverage was found to vary and students reported some lack of clarity on assessment criteria. The team felt that achieving a consistent and robust approach to assessment criteria was too dependent on staff seeking and gaining advice, for example from CeLT, rather than by reference to a clear, regulated framework. The team advises the University to establish a set of comprehensive university-wide assessment criteria to help maintain consistent standards across all provision, both on and off-campus.

51 Information also varied in unit handbooks in relation to the return dates for assessment. The regulations do not include any norms or maximum periods for return of feedback on assessment or a requirement to publish and comply with a return date. Concern was expressed by students concerning lengthy return times for assessed work. In some instances no feedback at all was received within the year of study. This is also an aspect of the National Student Survey on which the University does not score well. The audit team was told that norms/maximums were not set owing to the varying nature of the assessment tasks but no explanation was provided as to why norms/maximums should not apply for similar types of assessment across the institution. The team concluded that the University should set clear requirements for the timeliness of feedback on assessment (see paragraph 105).

52 The University does not operate a standard assessment workload model as it believes this is best determined at a local level. University policy states that programme teams need to ensure there is consistency in rigour and workload in units of the same credit rating and level but the audit team was unable to identify how the University ensured that consistency is achieved across the institution. The University is therefore encouraged to explore ways in which consistency of workload in units of the same credit rating can be achieved across the University (see paragraph 105).

53 Academic Board charges boards of examiners with the overall responsibility for all assessments that contribute to the granting of academic awards. Each programme or network of programmes is regulated by its own board of examiners, which determines progression and achievement and confirms decisions on exceptional factors affecting student performance. The audit team found that boards were appropriately constituted and that extensive guidance on their operation and remit was available to students, staff and external examiners. The team was told that exceptional factors are considered by a panel separate from the board of examiners. This is reinforced in the Assessment Regulations, which refer to submissions normally being dealt with in confidence by the pre-board or, where established, a departmental or faculty panel, with details only being revealed to the full board in exceptional circumstances and only with the student's permission. However, no reference to such a panel is made in the student guidance on exceptional factors. Separate consideration was evident in some board minutes which referred to such a panel, but minutes seen from other boards made no such reference to a panel or pre-board and stated that the board itself had considered the documentary evidence. The team encourages the University to ensure that its regulations regarding the handling of exceptional factors relating to submissions are applied consistently to ensure the fair and equitable treatment of students (see paragraph 105).

54 The University's Combined Honours Programme provides a range of cross-subject awards, whereby final awards are based upon results coming together from a series of subject programme boards. Student concerns that have arisen around timing and loading of assessment were particularly evident in relation to this programme as the differences between subject areas highlighted inconsistency of practice. The University accepts that the Combined Honours Programme has a more challenging assessment schedule than single honours owing to the logistics of arranging assessment across the breadth of combinations available. Programme teams do negotiate changes to the timing of assessment where necessary, but the student written submission reflected significant concern, not limited to the Combined Honours Programme, with the general organisation and management of assessment. The audit team felt the Challenging Assessment initiative was a positive step in encouraging academic staff to consider carefully all aspects of assessment activity, but that the University needed to be mindful of the need for sound administrative arrangements to support that activity in order to overcome the student concerns with administration and management expressed above.

55 The audit team concluded that the University's arrangements for the assessment of students were in general appropriate and effective. They would, however, benefit from further improvement in relation to assessment/grading criteria, workload, clarity on assessment submission dates, timeliness of feedback and the consideration of extenuating factors.

Management information - statistics

56 As stated in paragraphs 7 and 9, the 2004 Institutional audit recommended that the University make more effective and systematic use of statistical/performance indicator data in annual monitoring and programme review processes. In recent years, the University has invested in the development of a data system, MMUniview, as a means of providing accessible, targeted and current information, gathered from across various information systems, including the student and course record system. MMUniview, which became available in November 2008, was designed to be an intuitive, user-friendly system. Its introduction has been supported by training which must be undertaken prior to the issue of an individual user licence. Staff confirmed that this was a significant step forward for the University as it provides them with highly accessible and useful data. The audit team found evidence of the use of such data through the termly statistical review considered by Academic Board and in projects such as the Retention and Student Success Project and the Shock Absorber Project. Recruitment and admissions data is monitored weekly throughout the recruitment cycle at an institutional level and by faculty executive groups, and data is used at faculty and institutional level to inform decision-making.

57 The University states that student-related statistics are the cornerstone of institutional performance management and that by focusing on such statistical information, it can identify issues and put in place actions to address these issues. However, the availability of some data is not yet comprehensive, as the replacement of individual faculty systems with a common process for recording and entering marks is still being rolled out, and the inclusion of information on students studying at partner institutions is still at an early stage.

58 The audit team's examination of the use of data in programme review and programme-level AME showed that its use was inconsistent and often quite limited. This was particularly evident in the AME process, for a number of QAPs seen by the team failed to comment upon or even include the programme performance indicators set out in the QAP guidance, the minimum requirements for which include retention, progression and completion data. The team also found limited or no use of trend data, and of comparisons to institutional performance indicators. The University accepts there has been a challenge in presenting achievement data for AME purposes, which it feels has resulted in variable levels of engagement within some areas, but anticipates that improved availability through MMUniview will lead to more widespread use. Although the QAPs seen by the team had been produced prior to the availability of MMUniview, datasets for annual monitoring had hitherto been available to course teams, but did not appear to the audit team to have been used effectively. Despite the lack of analysis of data, these QAPs were

approved by programme committees and signed off by the relevant head. Beyond the QAP, the team was told by senior staff that data is scrutinised during faculty AME meetings, which question such issues as retention. However the requirements for reporting above programme-level, including the QIPs and faculty overview reports, include no requirement for analysis or use of data, so the outcomes from such discussion are not captured in the AME documentation.

59 The introduction of MMUniview has been accompanied by workshops aimed at focusing on its use for AME and programme review, with its efficacy being evaluated following the current AME cycle to help inform improved analysis. Although the University accepts the need for further improvement in its use of data, there was little understanding expressed as to why its current use was so limited and why inadequate analysis was being accepted in the QAP process. The audit team felt it was important that the University recognise the significant improvement needed with respect to the use, rather than just availability, of data and concluded that it was desirable that the University make more systematic, effective and evident the analysis and use of data in annual monitoring processes.

60 Overall, the audit found that MMU's management of academic standards is operating as intended. The application of the institution'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 development of comprehensive University assessment criteria would help maintain consistent standards. There is effective use of external input in approval and review processes. Management information is used in the establishment and maintenance of the academic standards of awards, although the team found that its use could be more effective. 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

61 The Academic Infrastructure and other external reference points are used to improve the learning opportunities of students. As described in paragraphs 42 to 44, any changes to the *Code of practice* lead to a review of relevant procedures by the Centre for Academic Standards and Quality Enhancement (CASQE) to identify the need for any changes to procedures and/or documents.

62 While procedures and guidance draw upon the *Code of practice*, the audit team judged that the degree of variability allowed in the interpretation sometimes led to inconsistency of learning opportunities. As an example, the updated version of the *Code of practice, Section 6: Assessment of students*, was used to inform a review of the Assessment Regulations in 2006-07, but the inclusion in that *Code* of reference to timeliness of feedback ('as soon as possible after the student has completed the assessment task') did not result in the introduction of institutional norms in order to address the wide variability discussed in paragraphs 51 and 53.

63 The use of the Academic Infrastructure and other external reference points was judged by the audit team to be generally effective in helping to ensure the maintenance and enhancement of students' learning opportunities, but the team concluded that greater consistency could be achieved through the introduction of clearer minimum requirements for certain aspects of learning opportunities addressed by the *Code of practice* (see paragraph 105).

Approval, monitoring and review of programmes

64 The processes for approval, monitoring and review referred to in Section 2 are designed to address the need to set, monitor and maintain standards as well as the provision of appropriate learning opportunities. The quality of learning opportunities on University-based and collaborative programmes is therefore monitored and reviewed through these processes.

65 Approval and review events were seen by the audit team to investigate planned approaches to learning opportunities with review events also seeking feedback from current and recent students on the quality of their learning opportunities. The annual monitoring exercise (AME) process at programme level includes commentary in the quality action plan (QAP) on the student learning experience and the results of feedback from students. Although the QAPs were found to be variable in the extent to which they presented insights into issues surrounding learning opportunities, actions plans frequently addressed such issues, for example, providing additional training or improving access to studio space. The team found little evidence of consideration of the consistency of learning opportunities available to students across multiple sites and diverse faculties, although these differences were seen by students as a concern.

66 The University appears to place significant importance on the programme log as it is described in the annual monitoring procedures as 'the day-to-day working tool of programme management'. The audit team found these logs to be a repository of programme documents, many of which were duplicated from year to year, that did not incorporate an active 'logging' of issues as they arose. The team would encourage the University to identify simple, accessible electronic storage methods for key documents and to use the log to record issues and actions as they arise as a means of expediting the further improvement of learning opportunities.

67 The audit team concluded that the processes in place for approval, monitoring and review were, in the main, effective in maintaining the quality of learning opportunities but would encourage the University, as it reviews the AME process during 2009-10, to see how issues of consistency of learning opportunities may be more readily identified (see paragraph 105).

Management information - feedback from students

68 In his introduction to the Briefing Paper, the Vice-Chancellor writes of the University's desire to hear the 'student voice' and to respond as appropriate. Support for, and the impact of, the student voice is an equally prominent theme in the student written submission where it constitutes the closing section. Moreover, one of the recommendations of the 2004 Institutional audit was that MMU should seek to continue the development of a more systematic institution-wide means of obtaining and responding to student feedback. For all these reasons, this was a matter to which the audit team paid especially close attention.

69 In response to the 2004 Institutional audit report, the University piloted a university-wide satisfaction survey in 2006. However, the take up was disappointingly low which was one of the reasons why it launched its Student Voice Project in 2008-09, with the active participation of MMUnion. Three subgroups were established to make recommendations for enhancing student representation (this group led and chaired by MMUnion); the evaluation of student opinion; and the use made of the National Student Survey (NSS). The final report of the project was approved by the Academic Development Committee (ADC) and Academic Board in June 2009. Among the recommendations that were adopted were 10 principles for student representation and changes designed to enhance the section of the Academic Regulations and Procedures Handbook that deals with the evaluation of student opinion.

70 Another of the recommendations from the Student Voice Project was for an overall analysis by the University of issues emerging from the NSS and from two other national surveys, the Postgraduate Research Experience Survey and the International Student Barometer, for use by staff. At the time of the audit, the first report of this kind had just been produced and was made available to the audit team. Its author writes: 'It is impossible to avoid the conclusion that in surveys of student experience MMU does not perform well'.

71 The University has been expending much effort in trying to establish why this is the case. It set up a NSS Results Working Group, chaired by the Deputy-Vice-Chancellor (DVC), Student Experience, which first met in May 2009 and then again in September, to consider the 2009 data with a view to supporting responsive actions and disseminating associated good practice in faculties. One of the findings from a careful exploration of the results was that the best predictor

of overall satisfaction for MMU students in 2009 was the sub-set of questions dealing with the organisation and management of teaching. Analysis of the data by subject area disclosed variations that may help the University to identify highly targeted local actions, as called for by the DVC in a memorandum to deans. The minute of a further meeting of the Working Group confirmed good attendance at workshops that were held at the All Saints Campus and MMU Cheshire, and summarised actions taken, at faculty level, in response to issues raised in the NSS, with a particular focus on Teaching and Organisation and Management.

72 The audit team discussed the NSS results with staff on several occasions, asking, in particular, why they thought it was that MMU scored poorly on Organisation and Management even though students, including those whom the team had met, were generally impressed by the learning resources available to them. The restructuring of services that had been part of the Change Agenda was proffered as a possible explanation for that particular result, while it was suggested that the size and diversity of the institution might underlie the general result.

73 Many of the students interviewed by the audit team were unaware of the Student Voice Project by name, but all considered that the University listened to their opinions and values what they have to say. In its faculty-by-faculty examination of the Student Voice, the student written submission (SWS) identified various ways in which the gathering of student opinion might be improved, but it concluded that the University wants a strong student voice system and it will be strengthened in the near future. One of the grounds for the SWS's optimistic conclusion is the recent enhancement of the section of the Academic Regulations and Procedures Handbook that deals with the evaluation of student opinion. This is primarily concerned with the University's own, internal processes. It states that all units must be formally evaluated and the results incorporated in the AME. It also specifies various requirements, including anonymity, the inclusion of non-campus students and the closure of the feedback loop.

74 For its part, the audit team concluded that MMU's arrangements for obtaining student feedback are effective and undergoing further improvement. The issue of how well the University responds to that feedback will be dealt with in the section on 'Student support'.

Role of students in quality assurance

75 Students serve on committees at programme, faculty and institutional level, all of which should include student business as an agenda item, and on relevant working groups. Training is provided by MMUnion. The Briefing Paper identified the Programme Committee as the main forum for student engagement. Many programmes also have a second, less formal committee or forum for staff-student liaison.

76 The audit team was able to confirm the active involvement of students in all of these ways through its reading of committee papers, including specimen minutes of staff-student consultative committees that demonstrated clear action points and subsequent reporting of actions taken. Beyond the programme level, student business did, indeed, appear as a specific item on agendas. Representation may, perhaps, be weakest at the faculty level where the team found several instances in which nothing came up under that heading because no representative was present.

77 The University's procedures for programme approval, review and modification require that a representative group of students be consulted when programmes undergo periodic review, or are being considered for major modifications. The audit team saw the guidance notes issued by CASQE, which set out how these consultations should be conducted, and was able to confirm through the audit trails that this guidance was being followed.

78 Examples of student engagement beyond routine structures that were brought to the attention of the audit team included their involvement in the Assessment Community of Practice, help with consultation about equality and diversity, and MMUnion's 2008 survey of induction.

79 Many of the students met by the audit team were, or had been, representatives and were able to provide examples of how recommendations put forward by students had been acted upon. One group of students seen by the team did not seem to know who their representative was. However, staff assured the team that student representatives had been elected.

80 During the briefing visit, the audit team met several of the sabbatical officers from MMU, together with some of their staff. This group gave a generally positive account of student representation at MMU and indicated that they had ready access to the Vice-Chancellor if necessary. Although largely pleased by the University's response to the SWS, they considered that some faculties had responded more constructively than others. A relatively new body, the Students' Union/Services Forum, established in autumn 2007 as a way of improving communication between the student body and the various service departments, was praised for its relative lack of formality and its ability to implement rapid change.

81 The audit team concluded that MMU effectively involves its students in quality management.

Links between research or scholarly activity and learning opportunities

82 Research-informed teaching is one of the aims of MMU's Strategic Framework for Learning, Teaching and Assessment and the University regards its research record, especially in the 2008 Research Assessment Exercise, as important for curriculum development. The Briefing Paper identified the Centre for Learning and Teaching (CeLT) and the Senior Learning and Teaching Fellows as having a central role in encouraging such links.

83 The audit team found evidence of this in its exploration of the CeLT website and in its meetings with staff and students. The next issue (volume eight, number two) of the Centre's in-house journal, *Learning and Teaching in Action*, parts of which were already on the website at the time of the audit, has *Linking Teaching and Research* as its theme and a workshop on the same topic was scheduled for February 2010. The team met fellows whose special interests include the development of research-based learning and teaching, which was one of the issues highlighted by the annual fellows away day in 2007. The team learned of examples of how the Architecture Research Centre at the University of Manchester enriches the undergraduate curriculum for students at the Manchester School of Architecture, which is a collaboration between MMU and the University of Manchester. This was confirmed by MMU students from the School who met the team. Staff at MMU mentioned the Research and Scholarly Activity strand of the MA in Academic Practice and the MA in Creative Writing as instances that demonstrate the University's commitment to promoting links between research and teaching and their actual realisation.

84 These same staff, who were senior members of the University, maintained that research-informed teaching is widespread. The audit team was able to concur with this view.

Other modes of study

85 According to the Briefing Paper, very few of MMU's programmes are delivered entirely online. However, the University is moving, as part of its Change Agenda, towards a greater use of blended learning. Combining electronic delivery with face-to-face contact is one means by which MMU is seeking to maximise the integration of its part-time students. Resources available to students include a Studying Online website, which incorporates advice on internet access and use, information about online library resources, guidance on the avoidance of plagiarism and a range of study skills leaflets. Resources for staff include a community of practice group devoted to blended learning.

86 The audit team did not meet many part-time students but those it did meet spoke positively about their learning experiences. One of the recommendations arising from the Student Voice Project was that the views of non-campus students should be sought and that

this should be monitored in 2009-10. When asked about this, staff told the team that a working group had been set up. Staff also described an electronic letter box facility developed by the Faculty of Science and Engineering as a means of collecting opinions from distance-learning students that could then be considered by staff-student and programme committees.

87 Work-based or placement learning is an element of many programmes at MMU. The University has its own Code of Practice, which sets threshold standards and is aligned with the relevant section of the *Code of practice* published by QAA. The audit team met several students who had undertaken placements, or had studied abroad as part of their programme. These students were mostly satisfied, or very pleased, with the support they had received, although one student had needed to contact the allocated tutor repeatedly before obtaining assistance.

88 Overall, the audit team considered the University's arrangements for these other modes of study to be effective.

Resources for learning

89 The Briefing Paper described the creation of an integrated Learning and Research Information Services (LRIS) as one of the key achievements of the University's Change Agenda. LRIS is intended to facilitate close cooperation between its three constituent parts: Library Services; Information and Communication Technology Services; and Learning and Research Technologies. It was confirmed to the audit team that this is happening in practice.

90 One of LRIS' major current responsibilities is support for the University's Managed Learning Environment (MLE) and the creation within it of the MyMMU student portal. The audit team was able to investigate the MLE via the e-Learning section of the CeLT website, which provides clear and extensive advice on the pedagogic as well as the administrative and technical aspects of its use, and via the complementary advice produced for students. The latter includes a simple questionnaire to help students decide whether they are equipped for online learning. The undergraduates spoken to by the team expressed their appreciation of the benefits of MyMMU, although some of those who had begun their studies using an earlier system had found the transition confusing.

91 The same group of undergraduates was generally very positive in its evaluation of the Library Services, and the student representatives who met the audit team were pleased that students' calls for increased library opening hours had been addressed. The University acknowledged in its Briefing Paper that a full resolution of this issue must await its consolidation onto two campuses. Meanwhile, various e-resources are available at all times and will be incorporated within the student portal.

92 These mainly positive comments by students about the University's resources for learning are echoed by its NSS results, as this is the dimension on which it performed best, relative to other universities, in 2009. The audit team concluded that MMU provides its students with appropriate learning resources that are effectively managed.

Admissions policy

93 Admission to all taught programmes is managed by a centralised Recruitment and Admissions Department that became fully operational in 2008. The Briefing Paper acknowledged that the change to a centralised system had proved more challenging than expected, in part because of a substantial increase in applications. Additional resources were made available to ensure that all applications were dealt with in a timely and appropriate manner and a review was undertaken to establish what had caused the difficulties. In addition to more specific matters, the review suggested that the University should develop a more structured approach to the management of large-scale change.

94 Also in 2008, the University revised its Recruitment and Admissions Policy. As well as meeting legislative requirements, the Policy takes account of the relevant section of the *Code of practice* and of applicable professional, statutory and regulatory body (PSRB) expectations. The Head of the Recruitment and Admissions Department reports to the Registrar. The Department's operations are monitored by ADC, through its Student Experience Sub-Committee.

95 An online enrolment system is available to many new, and returning, students and includes information about induction arrangements for students by faculty, and for Combined Honours and Foundation students. Recognising that, despite much good practice at a local level, it lacked a common approach to induction, the University initiated a Student Induction and Transition Project which has produced a framework, based on student entitlements for the guidance of staff.

96 The University has also been seeking to improve student retention. Although a task force had been set up in 2006, rates continued to drop during that year and the next. More recent developments include linkage with the First Year 'Shock Absorber' project, led by one of the University's National Teaching Fellows, which explored the factors that may lead students to leave early, even though they are in good standing, and the formation of retention strategy groups at faculty level. The University referred to this recent work in a summary prepared for the audit team of what it considered to be good practice, adding that it was starting to produce an improvement in retention. Senior staff expanded on this by maintaining that, although there had been no step change, volatility appeared to be decreasing. They attributed this in part to successful interventions but also, in some areas, to higher entry tariffs and less use of clearing.

97 The audit team considered that the University's oversight of its admissions policies and practice to be effective.

Student support

98 The Briefing Paper explained that student support is provided centrally through Student Services and MMUnion, and locally by faculty student support officers (FSSOs) and programme teams. The FSSOs provide one-to-one support for students, but also work with staff from central services, for instance in the production of online study skills resources. The Student Services Department was restructured, as part of the University's Change Agenda, to provide better integration between its three main elements: the Centre for Student Employability and Success; Student Administration; and Student Health and Wellbeing. Student information points (SIPs) are being introduced, also through the Change Agenda, as focal points for student enquiries.

99 The audit team was informed that the new structure had achieved the intended greater interaction between its component parts and, although the MMUnion representatives raised a question about the extent to which they had been consulted directly, they nevertheless considered that the changes responded to concerns they had expressed. The audit team did not meet an FSSO but it did scrutinise the annual reports that are made to faculty academic development committees, which were evaluative and included detailed information about both the number and type of referrals.

100 The University is aware that it may need to extend the hours during which SIPs, where they already exist, are open, especially to accommodate the needs of part-time students. The audit team was satisfied, however, that they are properly monitored through the SIPs Management Group. A survey of their operation during the academic year 2008-09 showed that most objectives were being achieved and a problem regarding access to timetabling information, to which a student met by the team had referred, was one of the few targets still to be met.

101 The undergraduate students whom the audit team met commended many features of their student experience and presented it favourably in overall terms. However, several of their individual experiences had not met their own expectations nor, it seemed to the team, those

of the University itself. Thus, one or more students had wanted clearer assessment criteria; experienced long delays in the return of assessed work; not been properly informed about cancelled lectures; been inadequately supported during the early stages of a placement; had significant difficulty in accessing their tutor. It is important to emphasise that these were individual shortcomings, none of which was common to the entire group. However, they did tend to corroborate findings in the SWS and the inference it drew from them, namely that there are unjustifiable variations in teaching practice both within, and especially between, faculties.

102 The audit team discussed these apparent shortcomings with staff in the broader context of the University's response to its NSS feedback, which also disclosed similar kinds of variability. The MMU staff accepted the need to, for example, improve communication to students about cancelled lectures, or better still to have contingency arrangements that would avoid that situation altogether. With regard to the speed of return of assessed work, however, there was no clear agreement on a minimum desirable standard, even for a given form of assessment that would be comparable across disciplines. The team gained the impression that some staff would welcome clearer direction from the University in this matter, as they might in respect of arrangements for personal tutoring, and indeed those for peer support. The team therefore welcomed the paper on Threshold Standards for Student Experience, which had just been presented to Academic Board, and recommended that it be strengthened by making it absolutely clear what would be mandatory for all staff and students and by ensuring compliance across the University (see paragraph 105).

103 The Briefing Paper stated that all students are entitled to receive discipline-specific academic and pastoral support. It added, however, that the means of delivery were not standardised and that the University was considering whether the resulting diversity produced inconsistency. A steering group, chaired by the DVC, Student Experience, was set up to decide whether a formal, university-wide academic tutorials policy should be drawn up. The Briefing Paper also acknowledged variation in the arrangements for personal development planning. These were reviewed by CeLT in 2008, in the light of which the Student Experience Sub-Committee concluded that, although greater consistency was desirable, it was unlikely that one model would suit all programmes. The report on Threshold Standards for the Student Experience was drawn up to address what Academic Board itself described as 'inconsistency in the quality of the student experience across the University'. The report requires that every student will be allocated an academic tutor and that all programmes will include personal development planning. The audit team welcomed both these commitments as part of the University's wider goal that the threshold standards will guarantee a minimum common standard for the student experience of taught programmes.

104 Graduate employability is a high priority at MMU, as is to be expected in a university that aspires to graduate 'world-class professionals' and in which many students are following vocational programmes. Much information on this topic was provided for the team. The MMU Professional Passport is one element of the University's employability strategy which the audit team was able to explore with both students and staff. The scheme is not credit-bearing but encourages extra-curricular activity. It helps students to articulate the skills they are acquiring and present them to an interview panel that includes an employer. At the time of the audit the scheme was still being piloted for research students but was able to accommodate up to 200 undergraduates. The team identified the introduction of the MMU Professional Passport as a means of helping students to develop their employability skills as a feature of good practice.

105 The audit team found that students support was largely effective but that there were inconsistencies of practice, as previously noted. Consequently, the team advises that the University identify those features of the student learning experience (such as feedback on assessment, assessment information, access to personal tutoring, and handbook content) for which unambiguous requirements must be defined and implemented for the benefit of all students.

Staff support (including staff development)

106 The Briefing Paper gave a detailed account of the development opportunities available to staff at different stages in their careers. Supporting documents examined by the audit team included the University's Human Resources (HR) Strategy, covering the period 2007-10, the Guidelines for its Professional Development and Review scheme for academic staff, various HR policies and the report of its successful achievement of the Investors in People standard.

107 Each faculty produces its own staff development plan that identifies, for each objective, what training is required, by whom and when, and how progress is to be evaluated. The Director of HR has drawn on these plans, and those of central services, and on the University's corporate goals, to formulate a focused set of five priorities for staff development in 2009-10. The priorities include the development of the leadership skills needed for change management and the enhancement of the student experience through greater recognition of the student as a 'customer'.

108 The audit team focused its attention on three aspects of staff development: the training provided for new teaching staff; support for teaching staff in general; and the various fellowship schemes operated by the University.

109 All new full-time appointments, who have a teaching role but do not already hold an appropriate teaching qualification, are required to take the Higher Education Academy accredited Postgraduate Certificate in Academic Practice within three years. The audit team met a member of staff who, although not then a full-time appointee, had undertaken the course on a voluntary basis and derived much value from it. To meet the needs of associate lecturers and postgraduates who teach, CeLT initiated a three-day 'New to Teaching' course in 2008 which is run several times a year.

110 The 2004 Institutional audit recommended that MMU extend the adoption of effective peer support across the University. The current peer support for teaching scheme, approved by Academic Board in 2003, took as its starting point the premise that different disciplines would have differing needs before setting out minimum requirements for some form of peer observation of teaching. Staff, to whom the audit team spoke, emphasised their view that peer support should embrace more than just observation and should not be construed as simply remedial. However, as acknowledged in the Briefing Paper, a survey carried out by the DVC, Student Experience, in 2008-09 found wide variation in the levels of engagement with the existing peer support scheme. As the University recognised the need for a single effective system, it set up a task-and-finish group that was due to report in December 2009. Senior staff conveyed to the team the anticipation that this will propose a more prescriptive approach, but one nevertheless sensitive to the need for goodwill. The team was also told that this could be introduced as early as January 2010. As the team agrees with the University concerning the importance of peer support for teaching, and as this had been highlighted by the previous audit report, the team found it desirable that the University expedite the introduction of a single university-wide peer support system.

111 MMU operates several fellowship schemes that offer special opportunities to its staff and enable them to make particular contributions to the student experience. The Senior Learning and Teaching Fellowships (SLTFs) are permanent appointments that both recognise conspicuous success and leadership in learning, teaching and assessment, and help the postholders to deploy their skills, in their own faculty and across the institution. The number of appointments in each faculty is related to its size; 18 are listed on the CeLT website and this is expected to increase to 25. The Fellowship in Academic Practice is a one-year appointment, awarded by CeLT, that frees the holder from other duties and provides some additional resource so fellows can pursue a specific project related to learning, teaching or assessment. The CeLT website names 19 Fellowships in Academic Practice, each with a short introduction to their current project.

112 The Fellowships in Academic Practice also facilitate the University's Communities of Practice involving groups of staff who share an interest in some particular aspect of pedagogy. The CeLT website provides details of 11 communities of practice, with topics as general as 'Assessment' and as specialised as 'Podcasting'. A third kind of fellowship, for Public Engagement, focuses on community engagement in ways which can also involve current students. The team met two SLTFs, a Fellowship in Academic Practice and a Fellow in Public Engagement. All gave lucid and enthusiastic accounts of their work and its impact. The team recognised the contribution of the SLTFs, the Fellows in Academic Practice and the Communities of Practice, and the Fellows in Public Engagement, to the quality of the student learning experience as a feature of good practice.

113 The audit team found that MMU'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 effective, although it did find some variability across campuses. There are effective arrangements for staff development and support but there is some scope for improvement, particularly with respect to peer review. 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

114 The University considers that it is an enhancement-driven institution and, as such, does not have a separate enhancement strategy. It defines quality enhancement as the promotion of a culture of critical reflection, innovation and continuous improvement in the quality of students' learning opportunities. It seeks to embed quality enhancement through its existing processes with one of the key agents for this being the Change Agenda. Many of the Change Agenda's projects impact on the effectiveness of the delivery of learning opportunities for students across the University, for example through the Student Induction and Transition Project completed in September 2009. In respect of collaborative partnerships, the University has developed a Collaborative Partnerships Framework which establishes the context for making improvements in the quality of provision. For example, the contractual arrangements for the associate colleges network enable mutual staff development opportunities and access to the University's facilities.

115 The University's Learning and Teaching Strategy was revised in 2009 to form a more focused Strategic Framework for Learning, Teaching and Assessment (Strategic Framework). This Strategic Framework makes 15 commitments within four thematic priority development areas: developing world class professionals; providing flexible opportunities to learn; rewarding professionalism in learning, teaching and assessment; and engaging with, and learning from, the students. The intention is to use the Strategic Framework to guide a wide range of specific developments within teaching, learning and assessment. It forms a reference document which relates to, and interacts with, other University strategies and policies to enhance the student learning experience.

116 The commitment to quality enhancement is supported through the quality assurance processes of the University. In particular, quality action plans (QAPs) require programme leaders to make proposals on how to deal with issues of concern for the student learning experience and identify good practice which can be shared with other programme teams and through the annual monitoring exercise. The audit team was able to see examples of QAPs and considered that they were a useful way to enable the quality assurance structures to support the quality enhancement agenda (see paragraph 30).

117 The Academic Development Committee, together with its subcommittees, provides the main focal point for the oversight of quality enhancement. Its remit includes the development of policy and advising Academic Board on all aspects of teaching, learning and assessment and monitoring the implementation of the Strategic Framework. The faculty academic development committees carry out a similar role. From its scrutiny of the minutes of these committees, the audit team was able to confirm that matters of quality enhancement were regularly considered.

118 The audit team learnt that approaches to improving the student learning experience were guided by educational principles which sought to recognise the diversity of practice inherent in a large and varied University, rather than by a desire to embrace a standardised model of attainment. This was manifested in its newly developed Threshold Standards for Student Experience, which set binding principles against which individual programmes would make explicit in their programme documentation how such threshold standards were to be achieved (see paragraphs 102 and 105). Adherence to the principles is to be scrutinised through the programme approval, review and monitoring process rather than by requesting exemptions from any aspect of the threshold standards.

119 The Centre for Learning and Teaching (CeLT) is the chief unit charged with enhancing learning. It works with other central services' teams, especially the Quality Enhancement Team within the Centre for Academic Standards and Quality Enhancement, and teams within faculties to offer support and guidance relating to all aspects of learning, teaching and assessment. It offers accredited programmes that support professional development, leading to postgraduate qualifications at master's, diploma and certificate levels in academic practice. It supports and works with the Senior Learning and Teaching Fellows who, as well as offering leadership on learning and teaching within their faculties, can contribute to wider institutional learning initiatives such as those emanating from the Strategic Framework for Learning, Teaching and Assessment. The Deputy-Vice-Chancellor, Student Experience, and the Pro-Vice-Chancellor, Learning and Teaching, work with the Head of CeLT to implement the priority development areas within the Strategic Framework. Additionally, the University sponsors Fellowships in Public Engagement which enable positive involvement with local deprived communities to be developed.

120 The University has recognised the need for greater systematic oversight of evidence if it is to improve learning opportunities. CeLT has developed its academic practice database as a way of collating and highlighting excellence in learning and teaching. This is available as a searchable web-based service. The database captures best practice from quality assurance processes, for example, from approval and review events as well as external examiners' reports. It has been used by the Student Voice Project group as a means of illustrating good practice with regard to student engagement. CeLT uses the database for its staff development workshops, while the Senior Learning and Teaching Fellows use it as a way of disseminating good practice both within their faculties and across the University. Additionally, CeLT has developed a variety of other means to disseminate good practice in learning and teaching. It has established and supports Communities of Practice in themed areas to encourage networking and discussion. Its publication, Learning and Teaching in Action, provides an outlet for the promotion of good practice, as do the faculties' newsletters. Finally, the annual Quality Enhancement Conference, which focuses on particular themes (such as e-learning), enables the University to link learning and teaching practice and development to its priorities within its Strategic Framework. The audit team identified as a feature of good practice the proactive approach of the CeLT to disseminating and supporting good practice in learning and teaching, including the development and use of the academic database.

121 The audit team considered that the University's approach to quality enhancement was characterised by a commitment to improve the quality of students' learning opportunities. The team saw examples of how the University takes deliberate steps to enhance the quality of learning opportunities for its students. There was clear evidence of developmental intent linked to the institution's own values and vision.

Section 5: Collaborative arrangements

122 As part of the implementation of the Change Agenda, a number of strategies and frameworks has been developed. Those pertinent to collaborative work are the Framework for Collaborative Partnerships, the Strategy for Widening Participation and Widening Participation - A Strategic Assessment: June 2008. Having rationalised its collaborative portfolio in 2006, the University intends to continue to focus on a smaller number of partnerships where joint delivery of a wide range of provision is possible. Commitment to collaborative work is articulated in the Strategic Plan 2007-2020 (The 2020 Vision) as part of the widening participation aspirations of the University.

123 To reinforce its commitment to collaborative work, MMU established the Collaborative Partnerships Office (CPO) in 2007. The CPO is responsible for advising the University on 'the strategic development of collaborative partnerships'. In addition, it has operational responsibility for ensuring that coherent and effective processes are in place for the management of collaborative work. Its remit includes both UK-based and overseas collaborative activity.

124 The audit team learnt that institutional priorities included staff development of partner staff, joint research and parity of standards across the multiple sites. The team heard of many examples of staff development, including peer observation; enrolment on master's courses at MMU by partner staff; and engagement in joint research projects. Parity of standards is ensured by a variety of means including the use of the same external examiner for MMU-based and collaborative courses and moderation of student work.

125 Senior staff at partners visited by the audit team reported that regular meetings between themselves and staff at MMU took place. These were primarily at the level of the dean.

126 Operationally, the role of the link tutor is key to a successful collaboration. The responsibilities of the link tutor are specified in the Link Tutor Handbook. This handbook states that a link tutor is appointed both at MMU and at the partner institute for each collaborative programme. Collaborative staff, whom the audit team met, were fully acquainted with their link tutor. Although there is no formal training for link tutors, those whom the team met had received support and guidance from out-going link tutors or had shadowed them before taking over the role fully.

127 In one case, partner staff stated that the link tutor role was not appropriate owing to the joint nature of the collaboration between their staff and those of MMU. Given the particular nature of this collaboration, the audit team was assured that the duties of the link tutor were nevertheless carried out by senior staff and via regular joint staff meetings. Staff at collaborative partners are informed of any regulatory changes by the link tutor. The Link Tutor Handbook states that the link tutor should meet students. From its meetings with staff and students the team was assured that such meetings were taking place.

128 Programme boards held at the partner sites invite the MMU link tutor to attend. The team's perusal of programme board minutes showed that attendance by link tutors was regular and valued. If the link tutor is unable to attend, then minutes and action lists are forwarded to the link tutor for information.

129 The link tutor is supported by a Link Tutor Forum, arranged by the CPO, where link tutors from across the University meet approximately three times a year to identify, discuss and action commonly occurring issues. Link tutors from partner colleges are also invited. The link tutors also have access to an E-Link Tutor Forum. Tutors whom the team met confirmed that these forums were a valuable source of support and information.

130 Although there is no formal requirement to do so, some link tutors complete an annual link tutor's report form. However, some of the reports seen by the audit team were brief and perfunctory. The team learnt that the required reporting mechanism to be used by the link tutor

was the annual quality action plan. However there are no specific fields for link tutor commentary in the QAP pro forma, therefore the University may wish to consider ways in which such commentary can become more visible. The team concluded that link tutors were a valuable means of assuring the quality of collaborative provision.

131 The University has produced an Institutional Code of Practice on Collaborative Provision (ICPCP). The principles and processes of partner approval, which include 'due diligence' investigations, are set out in the ICPCP. The academic aims and ethics of the proposed collaborative partner are checked to ensure there is alignment with those of MMU. In addition, legal and financial standing are also investigated. The audit team saw evidence of approval events that conformed to the ICPCP.

132 The audit team heard that the University's policy was to show the location of study on the student transcript and certificate. However, the team saw an example of an award certificate and student mark transcript in which neither the place of study nor the name of the partner college, were stated. The team noted that the college had requested the removal of this information. The team advises the University to ensure that the name of the partner and the location of study are stated on the transcripts and/or parchments for all the University's collaborative provision. The University may wish to revise its own ICPCP so as to include clear guidance in this respect.

133 In 2009-10, MMU intends to pilot a separate partner approval event that is distinct from programme approval. Although the process for partner approval is now comprehensively documented, at the time of the audit, the process had not been applied. The audit team noted that development of a separate process for partner approval was a recommendation of the 2006 Collaborative provision audit and would encourage the University to monitor closely the implementation of the new process as it is applied.

134 Programme approval of collaborative programmes follows the same process as that for MMU-based provision. Additions to the process include a pre-meeting where resources at the partner institution are debated. The approval event also includes examination of the curriculum vitae of the partner staff involved in the delivery of the proposed programme and meetings with students from the partner. After validation, the collaborative contract is updated accordingly. Staff at partner sites were clear that the process of validation followed standard MMU protocols.

135 For one partner, the approval of the programme took the form of a modification to an existing programme. This modification was approved by standard MMU processes, which include confirmation by the dean of the relevant faculty that such a collaborative programme is aligned with faculty strategy. A formally convened panel, including an external expert, examined the proposal before it was formally approved. In some cases it was evident that the link tutor had worked with the collaborative partner in the development of the proposed collaborative programme.

136 Although staff at partner sites were responsible for managing the admission process, the audit team found that they adhered to criteria approved by the University with oversight being maintained by the link tutor.

137 A new process for partner review had been introduced with effect from 2009-10. At the time of the audit no reviews under this new system had taken place. The process was, however, fully documented and appeared to the audit team to be fit for purpose.

138 Programme monitoring is in essence the same as that for campus-based provision. Partners produce a QAP which is discussed alongside QAPs for campus-based provision at the programme board. The same QAP pro formas are used. The faculty overview report pro forma, which draws upon all of the quality improvement plans within the faculty, requires commentary on collaborative provision. Faculty overview reports are discussed at the Academic Quality and Standards Sub-Committee annually. At the time of the audit, however, there was no overview report summarising the issues and good practice arising out of collaborative provision. The University might wish to consider the added value of such an overview report.

139 Programme review follows the same processes as for campus-based provision, augmented by an additional planning meeting with partner staff to ensure there is a full understanding of the review process and to consider a report from the partner on its learning resources.

140 Assessment specifications are checked internally before being sent to the MMU link tutor for comment and then to the external examiner. This moderation of assignments is guided by a checklist which, among other items, asks the moderator to check that the assignment is matched to the learning outcomes of the unit and that an appropriate level is required of the learner.

141 For reasons of practical timing, assignments may be set before external examiners' comments have been received, in which case these will be used to inform the assignments of the following year. All examination papers are approved by external examiners before being given to students.

142 External examiners are approved and appointed by, and report to, MMU. The audit team learnt that the response to the external examiner was the responsibility of MMU. The formal response to the external examiner is that part of the QAP which deals with external examiners' reports, the issues contained therein and the subsequent actions of the programme team. Although the team acknowledges that staff can and often do respond more quickly to issues raised by external examiners, the team would encourage the University to find ways of making the formal response more prompt (see paragraph 39 above).

143 Marking is carried out either by partner staff or MMU staff. Moderation to ensure parity of standards across sites takes place, with MMU staff and/or the MMU link tutor being involved in the process. Examination boards may take place either at the partner site or at the University. In all cases, whenever progression decisions or awards are made, the external examiner and MMU staff are present. The audit team found no evidence to suggest that academic standards across the collaborative network were at risk.

144 The audit team heard that at one collaborative partner the external examiner had raised concerns about the use of consistent assessment criteria and their fit with learning outcomes. A programme team meeting had also noted the problems due to lack of assessment criteria. At another collaborative partner, members of the team heard that staff 'mark up' the work of their particular students and then other staff check the work and mark it 'down' with the final mark being determined by negotiation. The team felt that the advisable recommendation in paragraph 50 would lead to greater consistency of marking practice and standards across all areas where MMU provision is delivered. The team noted that the collaborative agreement specifies cooperation between MMU and its partners to ensure that appropriate staff development activity is in place, and would encourage the University to initiate staff development on assessment criteria for its collaborative partners.

145 Student representatives are invited to programme board meetings. Some boards recognise that mature students may have difficulty in attending and so accept written reports. One partner has a dedicated student committee, where student representatives discuss issues raised by the student community, in addition to having student representatives on each programme board. The audit team heard examples of changes that had been made as a result of their feedback.

146 Questionnaires are completed by students after each unit, with the results being discussed at programme meetings and students subsequently being informed how actions will be taken. Collaborative partners must engage in the same process of annual monitoring exercise as campus-based provision. The annual monitoring exercise requires commentary on student feedback and this was evident in documents seen by the audit team.

147 The audit team heard that the Students' Union had had an input into the creation of the new partner approval process. The team was satisfied that student input formed an integral part of the quality assurance of collaborative programmes.

148 Learning resources are checked at the approval stage to ensure that they are appropriate to the proposed programme. The link tutor plays a key role in the ongoing monitoring of resources at the partner site and this was confirmed by meetings with collaborative staff. Students whom the audit team met felt that learning resources were suitable for their chosen programme of study. Part of the approval process requires confirmation by the dean of the host MMU faculty that appropriate resources will be available to support the programme.

149 Students whom the audit team met were aware that the award for which they were studying was to be made by MMU and were also aware that the regulations pertaining to the award were those of MMU. In one case, students were unaware at the point of application that the programme was managed jointly with another university. Upon finding this out, they nevertheless saw this as a positive aspect for their studies and welcomed the right to use facilities at both universities. Overall, students whom the team met thought that information about their programme was clear and accurate.

150 Under the newly introduced method of partner approval and review any publicity information produced by the partner must be first submitted to the Head of the CPO for approval.

151 During the course of their visits to partner sites and from documentation they read, the audit team learnt of a variety of staff development activities that are supported by MMU. These include peer observation, joint research projects, enrolment of partner college staff on higher degrees at MMU and participation in the delivery of guest lectures.

152 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

153 MMU offers a range of research degree programmes (RDPs) that includes MRes, Master's by Research, MPhil, PhD, professional and higher doctorates, PhDs by Published Work and by Practice. At the time of the audit, it had 686 postgraduate research students, of whom 576 were classified as home/European Union, spread across all faculties of the University. Faculties with sufficient critical mass of research students have graduate schools. Discussions were taking place around the time of the audit regarding the development of a graduate school for MMU Cheshire to coincide with the development of the Cheshire Campus.

154 Academic Board has delegated to the Research and Enterprise Committee (REC) responsibility for ensuring the standards of research degrees and for keeping under review arrangements for assuring the quality of the experience of research degree students. REC is supported in its work by a Research Degrees Sub-Committee (RDSC), which receives annual reports from faculty research degrees subcommittees (FRDSCs), or from faculty research and enterprise committees (FREC)s. These arrangements enable RDSC to write an annual overview report on the efficacy of the provision for RDPs to REC. Academic Board duly received the report for the 2007-08 Annual Monitoring and Evaluation of Postgraduate Research Programmes at its October 2009 meeting. The audit team noted the tardiness in receiving the report and that data from one faculty was still unavailable at the time of writing the report. The team would encourage the University to elicit timely reports from all faculties. The Research Enterprise and Development (RED) unit provides central support and management of RDPs, including the administration of the examination arrangements and the conferment of awards. Student records are administered within the faculties.

155 The University's regulations for RDPs are set out in its Code of Practice and Regulations for Postgraduate Research Programmes. The most recent review of these regulations was

implemented in January 2009 to ensure full engagement with the *Code of practice, Section 1: Postgraduate research programmes*. Additional documentation includes a Research Student Handbook and Guidelines for Research Supervisors. Research policy and responsibility for RDPs regulations are overseen by REC on behalf of Academic Board.

156 The University seeks to provide a vibrant, research-rich environment for its students. It has eight research institutes (RIs) with specialist research remits, which are cross-faculty and cross-disciplinary. The RIs administer the research income of the University and, along with the graduate schools, enable research students to work closely with a core of research-active staff. The RIs and faculties assume joint responsibility for the research environment within which RDPs operate and can lead to considerable variation in approach. Research students are able to participate in a student development programme and the annual postgraduate research student conference. Students met by the audit team were generally complimentary of the facilities and research culture within which they were undertaking their degrees. The team considered that the institutional arrangements and environment provided for students were appropriate and supportive.

157 All appropriately qualified candidates are invited for interview with two members of academic staff who normally include the Departmental Research Degrees Coordinator and/or Head of Department, from within the proposed research subject area. Successful candidates must complete full registration within three months of enrolment for full-time students (six months for part-time students) unless they have special dispensation from FRDSC. This requires a full proposal that identifies ethical issues and resource requirements. At enrolment, students are provided with a pack of relevant information including the code of practice and regulations, the Research Student Handbook and details of the student development programme. A compulsory induction day is provided by RED for all new research students. One of the induction days is held on a Saturday to facilitate attendance by part-time and distance-learning students. Faculties and supervisory teams provide their own additional induction activities which complement the University programme. Students are introduced to, among other things, regulatory issues, supervision arrangements, resources available to support their research, research ethics and the skills programme. Students met by the audit team considered that enrolment and induction were efficient and provided a sound basis for their future research study.

158 Each postgraduate student is assigned a supervisory team led by a director of studies with at least one additional supervisor. The audit team will normally have at least three research degree completions between them. All new supervisors at the University are required to attend a workshop conducted by RED on the supervising and examining of postgraduate research students. Experienced supervisors are required to attend a refresher workshop every three years. Staff met by the team confirmed this to be the case.

159 Clear and comprehensive guidelines for supervision are laid out in the code of practice and regulations and in the Guidelines for Supervisors. Students met by the audit team described their supervisory arrangements as satisfactory. The team was able to confirm after meetings with students and reading of relevant documentation that institutional arrangements for the supervision of RDP students were appropriate.

160 On transfer from MPhil to PhD, students are required to complete a transfer report for scrutiny by FRDSC. Students meet regularly with their director of studies and receive feedback on their progress. At such meetings, students are advised to record agreed actions in their personal development portfolio. Every student is required to participate in a formal annual review undertaken by an independent reviewer. The structured review interview covers a range of topics including the student's experience and progress, skills development and agreed personal development plan for the following year. An agreed record of the review is used in the compilation of the annual FRDSC monitoring and evaluation report, which is considered by RDSC.

161 The University is cognisant of the issue raised in QAA's 2006 Review of postgraduate research programmes which recommended that further consideration be given to 'the benchmarking of the evidence derived from annual monitoring against external key performance indicators'. It has made changes to its regulations, the most significant of which is that a submission date is now provided to students on registration. At the time of the audit, the University had only just begun monitoring the impact this will have on research students' completion rates. The audit team considered the institutional arrangements for the monitoring and reviewing of RDPs to be fit for purpose, but that they would be more efficient if mechanisms for considering the impact of changes operated in a more speedy manner.

162 RED provides a workshop-based Student Development Programme that focuses on generic and employment-related transferable skills. The programme has been devised to supplement the specialist training offered by faculties, which includes analytical and research skills appropriate to the subject area and programme of study. Library services fully support research students, offering sessions on power searching, referencing and writing for publication, as well as providing a researchers' weekly bulletin aimed at raising awareness of electronic library developments.

163 Research students have the opportunity to present their work at the RED annual research student conference. Research students who wish to teach can attend a three-day 'New to Teaching' workshop run by CeLT. The University has developed a Graduate Teaching Assistant Framework to support those research students who undertake teaching. At the Manchester School of Architecture, graduate teaching assistants are employed to develop the software skills of students on the undergraduate programme. The programme team trains and monitors these graduate teaching assistants, tailoring their work to match their specific skills, rather than require them to attend the three-day workshop. The University has begun a pilot of a postgraduate passport designed to enable students to demonstrate to employers the skills and qualities they have developed which would be of relevance in the workplace. This initiative, if widely adopted and rigorously monitored, has the potential to add substance to their future careers. It was evident to the audit team from observing the RED website and the research student handbook, and from its meeting with students, that the comprehensive training and development opportunities provided by RED for postgraduate research students is a feature of good practice.

164 The University participates in the Postgraduate Research Experience Survey. The Survey results have been shared with the Students' Union in a new postgraduate student forum established by RED with the intention of establishing an arena where postgraduate issues may be discussed. Research students have representation on RDSC and FRDSC. Direct feedback from students is primarily obtained during the annual progress review and monitoring exercise, where the report includes feedback from students and proposed actions to resolve issues raised. As all such reports are considered by FRDSCs and the RDSC, the University has in place mechanisms to receive feedback from individual research students. The audit team considered that measures to solicit feedback from research students were satisfactory.

165 The key features for the assessment of research students are clearly defined in the Code of Practice and Regulations for Postgraduate Research Programmes. The Director of Studies is responsible for organising the examination arrangements whilst RDSC appoints an independent chair and examining team. The chair must have previous research degree examining experience and have attended the workshop on chairing a viva. Internal examiners with no previous research degree examination experience will only be approved if they have experience of supervising a research candidate and attended the University workshop on the examination of research students. In this way, the University ensures that the examining team has sufficient experience, while enabling the development of a larger pool of internal examiners. RDSC, acting as the Board of Examiners for RDPs, having received a report and recommendation from the examining team, approves an appropriate recommendation to the Academic Board in respect of the award to be conferred. The audit team concluded that the assessment regime for RDPs was appropriate and suitably aligned with the FHEQ.

166 The University aims to resolve any problems between the student and the supervisory team by informal means at the earliest possible stage, normally by referral within the extended supervisory team or to the faculty research coordinator. Students are made aware at induction of the formal procedures for both complaints and appeals which can be found in the Research Student Handbook. Students met by the audit team confirmed that they were aware of these arrangements and that they knew how to take forward a complaint or appeal should it be necessary. The team was satisfied that the procedures for students on RDPs to make a complaint or an appeal were appropriate.

167 The evidence considered by the audit team led it to conclude 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 fully the requirements of the *Code of practice for the assurance of academic quality and standards in higher education, Section 1: Postgraduate research programmes*.

Section 7: Published information

168 The audit team examined a range of published information, including university-wide policy and procedural documentation, faculty and college documentation, programme handbooks, regulations, the University's website and intranet, the undergraduate prospectus and committee minutes. The team established that the University provides an extensive and accessible range of published information for prospective and current students and staff, both electronically and in hard copy.

169 The University's electronic information provision and communication with students is through a University website and a managed learning environment, MyMMU. Responsibility for publicity materials lies with Marketing, Communications and Development. The Collaborative Partnerships Office fulfils this function for collaborative provision.

170 Faculty sites contain information on taught and research degrees, administration details and links to other resources. Students who met the audit team emphasised the efficacy of the information they receive, particularly in allowing them to access unit information; other learning materials; links to support services; and electronic library and learning resources. The team recognised the efforts that have been made by the University to facilitate student access to information on some of its campuses through Student Information Points, which the team thought to be a comprehensive resource for communicating information.

171 Student handbooks, which are routinely available in hard copy and electronically, provide information to undergraduate, taught postgraduate and postgraduate research students. This information includes students' rights and obligations; the appropriate academic regulations; and facilities and support services. The audit team reviewed a range of such handbooks for undergraduate and postgraduate taught courses, and found them to be generally comprehensive and to contain relevant and accurate information about course structure, assessment and the range of support services available to students. The team met student representatives who confirmed their general satisfaction with the usefulness of the information provided by the prospectus and the website during the application and admissions stages. The students also confirmed to the team that they found the information provided to them to be accurate and complete for their needs. This included information on the aims and outcomes of their course, regulatory matters, curriculum content and learning, teaching and assessment methods; student support and programme and unit descriptors.

172 The audit team found that information on appeals, complaints and academic infringements is clearly documented in the relevant handbooks for taught awards and postgraduate research programmes, and that these are easily accessible to students either in hard

copy or for fuller details through links to the University's intranet. There was some variability of style and approach, with some faculties presenting information in a user-friendly fashion.

173 The student written submission indicated that assessment feedback was an issue for students in terms of timing and quality. In particular, it stated that faster feedback should be a priority for improvement. When the audit team asked students about their experience of the timeliness of feedback, a variety of practice was apparent across the institution at undergraduate and postgraduate levels. All students who met the team indicated that the dates for the return of marks for assessed work were not always clear or published in unit handbooks. The team noted from its meetings with staff that no institutional threshold standard exists on the timeliness of the return of student work, and practice varied. From its scrutiny of unit guides, the team was able to confirm this to be the case in a sample of 10 handbooks. The team felt that the absence of institutional guidance on the return of assessed work, coupled with the lack of a consistent approach adopted in unit guides, supported the students' view and experience of an inequality in the time taken to provide feedback on assessed work (see paragraph 105).

174 The audit team found that 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.

RG 570a 03/10

© The Quality Assurance Agency for Higher Education 2010

ISBN 978 1 84979 086 4

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

All QAA's publications are available on our website www.qaa.ac.uk

Registered charity numbers 1062746 and SC037786