QAA

Leeds Metropolitan University

May 2009

Annex to the report

Contents

Introduction

A team of auditors from the Quality Assurance Agency for Higher Education (QAA) visited Leeds Metropolitan University (the University) from 18 to 22 May 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.

Outcomes of the Institutional audit

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

- limited confidence can reasonably be placed in the soundness of the institution's present and likely future management of the academic standards of its awards

- 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.

As the University will be subject to a separate audit of its collaborative provision in 2010, these judgements do not apply to that provision.

Institutional approach to quality enhancement

The audit team found extensive evidence of the University seeking to pursue an enhancement agenda at an institutional level, taking deliberate steps to improve the quality of learning opportunities and the student experience. The team noted the University's aspiration to monitor and evaluate systematically the success of its various initiatives and would encourage it in meeting these intentions.

Institutional arrangements for postgraduate research students

In general, the University's arrangements for its postgraduate research students meet the expectations of the section 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 by QAA, and in the main are operating as intended.

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 considered steps being taken to focus on assessment for learning across the University (paragraphs 50, 99)

- the work being undertaken by the University to guard against plagiarism (paragraph 51)

- the strategic use of student liaison officers to enhance significantly the learning experience for students (paragraph 65).

Recommendations for action

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

Recommendations for action that the audit team considers essential:

- ensure that the recommendation made in the previous audit report, that periodic review be undertaken at regular intervals and that there should be a contribution from external peers that is always critical and robust, is addressed fully; and ensure that the overriding responsibility for the procedure, nature and timing of the periodic review process is determined by Academic Board or an appropriate subcommittee (paragraphs 33, 35).

Recommendations for action that the audit team considers advisable:

- ensure appropriate oversight so that the academic regulations and associated procedures are implemented consistently and accountably throughout the University (paragraphs 17, 22, 114)

- review and revise the academic regulations and associated procedures so as to ensure that they are clear, unambiguous and accessible to staff and students (paragraphs 19, 21, 23, 38, 49, 50, 51, 109, 112)

- review the designation of responsibility for the approval, modification and review of programmes and for the management of research student awards to secure more effective University oversight of quality management (paragraphs 24, 26, 33, 110, 112)

- revise its procedures for the approval and amendment of courses and schemes to ensure that the integrity of awards is always safeguarded (paragraph 25)

- ensure the robust and consistent use of appropriate data in the periodic review process and consider whether this process should routinely involve engagement with students (paragraphs 34, 63)

- develop clear procedures for the approval, monitoring and review of joint awards (paragraph 37)

- develop systems and procedures for course approval and periodic review so that the University can assure itself of consistent engagement with the elements of the Academic Infrastructure across the full range of provision (paragraph 47).

Recommendations for action that the audit team considers desirable:

- review its procedures for approval and review of distance learning and for modules adopting a more blended-learning approach in the light of the *Code of practice* (paragraphs 27, 72)

- continue the work of the University to ensure that the annual review process provides a rigorous consideration of and reporting on all courses, in line with the expectations of the *Code of practice* (paragraphs 30, 37)

- review the effectiveness of the various internal audit processes and how they work together to ensure that their outcomes contribute in an integrated way to the management of academic standards, quality and enhancement (paragraphs 36, 39)

- ensure that external examiners' reports are shared with students in accordance with the HEFCE publication *Review of the Quality Assurance Framework, Phase two outcomes*, October 2006 (HEFCE 06/45) (paragraphs 42, 130)

- review the effectiveness of its processes to manage student representation (paragraphs 69, 119)

- ensure that the University's expectation that all research students who undertake teaching and assessment receive appropriate prior training, is met consistently (paragraph 117).

Section 1: Introduction and background

The institution and its mission

1   Leeds Metropolitan University came into existence formally in 1992, but its roots extend considerably further back, to the Leeds Polytechnic founded in 1970 and to the Leeds Mechanics Institute founded in 1824. The University has two main campuses: one in Headingley on the northern edge of Leeds; and the other in the Civic Quarter in central Leeds.

2   The University comprises six faculties and has an extensive range of collaborative partnerships with institutions in the United Kingdom (UK) and abroad. The University's collaborative provision is subject to separate collaborative provision audit in 2010.

3   The University has just under 28,000 students studying for credit-bearing awards on campus, including over 4,000 studying at postgraduate level on taught and research programmes. In 2007-08, 8 per cent of new entrants were from overseas. At the time of the audit the University had 3,208 staff, including 1,714 academic staff (of whom 42 were professors and 464 part-time) and 464 learning support staff.

4   The University's Vision and Character states that 'Leeds Metropolitan University is striving to become a world-class regional university, with world-wide horizons, using all our talents to the full' and is elaborated in 10 further statements relating to students, partners, ethical working, and learning and teaching values.

The information base for the audit

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

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

7   In addition, the audit team had access to:

●   the report of the previous Institutional audit (November 2004)

●   reports of reviews by QAA at the subject level since the previous Institutional audit

●   the report of QAA's Review of postgraduate research degree programmes in England, Northern Ireland and Wales (2006)

●   reports produced by other relevant bodies (for example, Ofsted and professional, statutory or regulatory bodies)

●   the report on the mid-cycle follow up to Institutional audit

●   the institution's internal documents

●   the notes of its meetings with staff and students.

Developments since the last audit

8   Since the last audit the University has seen some significant changes, including at the time of the audit a recent change of head of institution. The current faculty structure has been reviewed leading to the creation of the present six faculties: Arts and Society; Business and Law; Carnegie Faculty of Sport and Education; Health; Innovation North; and the Leslie Silver International Faculty. At the start of the 2008-09 academic year, each faculty appointed a chief operating officer. Their role is to manage all administrative/support services within the faculty from a strategic and operational perspective. The University believes this will improve the effectiveness of faculties and schools and their links with the Registrar and Secretary's Office (RSO). The organisation of service units has also changed so that in some cases a unit became responsible to deans of faculty rather than to the head of institution.

9   At the time of the audit the Head of Institution, the acting Chief Executive, was supported by a senior management team formed from two groups of senior staff: one comprises the deans of the six faculties; the other, the pro-vice-chancellors and the heads of the administration. Although all meet as a team, there are no formal reporting lines between these two groups.

10   The University's estate has also changed since 2004. In particular the University is in the process of providing better academic and administrative accommodation within the Civic Quarter, involving the creation of signature buildings and refurbishments which will house the Leeds Business School and the Faculty of Arts and Society. The Leeds Met Carnegie Pavilion at the Headingley Sports Complex provides the University with a strong regional identity which in turn makes it attractive to local students, many of whom come from non-traditional backgrounds.

11   In 2006-07 the University undertook a curriculum review, leading to a reduction in the number of courses and awards offered at both undergraduate and postgraduate level. The University also took the opportunity to develop new courses within different subject areas and to introduce new focuses for teaching and research which are considered to be attractive to students, but also show the University alert to public developments and concerns. For example, a School of Applied Global Ethics has been created, as has an Institute of Northern Studies and an International Centre for Responsible Tourism. The University has particularly developed sport as a key aspect of its activity, and has done so in a number of ways including: sponsorship of Leeds Carnegie Rugby Union Football Club; the provision of wide-ranging learning opportunities for students in the Carnegie Faculty of Sport and Education; and introducing the concept of 'coaching' to aspects of the student experience.

12   Since the last audit the University has also aimed to focus more on learning and teaching and on the student experience. A Directorate of Assessment, Learning and Teaching (ALT) and a Directorate of Student-Centred Change Management (SCCM) have been created, headed by the Pro-Vice-Chancellor (ALT) and the Director of SCCM, respectively. The University has strived to engage with students, staff and other stakeholders in a variety of ways including establishing a portfolio of festivals and partnerships, such as the Freshers' Welcome Festival, the Reading and Writing Festival and the Graduation Festival, as well as organising events which mix academic debate with entertainment, for example the Staff Development Festival. Such events are deemed to be 'creating a culture of celebration'. The University has also established a feature on the website titled 'Daily Reflections' which includes reflections from the Chief Executive, and staff comment on matters relating to research, assessment, learning and teaching.

13   The previous Institutional audit in 2004 found that broad confidence could be placed in the soundness of the University's current and likely future management of the quality of its academic programmes and the academic standards of its awards. The report highlighted a number of areas of good practice relating to staff development and the student experience. The report also identified a number of recommendations: those that the team deemed advisable related to periodic review and assessment regulations in the context of student progression. As noted elsewhere in the report, while the University has addressed the progression issue fully

(see paragraph 48), it has not done so for the recommendation relating to periodic review (see paragraph 33). The University has also taken forward a number of developments since the last audit as part of its strategic approach to enhancement (see paragraphs 93-106).

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

14   Academic Board has overall responsibility for the management of academic standards and quality of learning opportunities. The Briefing Paper noted that the Academic Committee, a subcommittee of Academic Board, has along with faculty boards (see paragraph 15) a 'particular remit contributing to the management of quality and standards'. It 'advise[s] the Academic Board…on the quality and standards of programmes leading to awards granted by the University' on the one hand, and 'receive[s] and review[s] reports from Faculty Boards on…[the] operation of systems of approval, review and monitoring of the quality of standards of courses and programmes' on the other. The Academic Committee also has 'delegated authority to…consider and approve regulations' on academic matters. Two important subcommittees support the work of the Academic Committee in the area of academic standards and the quality of learning opportunities: the External Examiners Sub-Committee and the Research Sub-Committee (see paragraphs 40 and 108 onwards).

15   Governance structures at University level are mirrored at the faculty level, each having a faculty board, whose work is supported by a Faculty Academic Committee (FAC) and a Faculty Research Committee or equivalent (see paragraphs 108-09). Faculty boards are at the centre of the framework for managing academic standards. According to their terms of reference, they, for example 'approve, and monitor the implementation of, academic and operational plans which are aligned to the University vision and character and strategies'. They also 'approve, and monitor the operation of, the Faculty's quality management processes and ensure compliance with the academic regulations'.

16   The audit team noted that these structures had the potential to be effective and that the University had a clear desire that they be so; for example, care had been taken to avoid duplication or confusion of responsibilities. However, the team had concerns regarding the level of University oversight of activity at the faculty level. The team saw examples of the variable provision of minutes to higher level committees at both faculty and institutional level. The minuting of some university level committee business did not provide assurance that the outcomes of key quality assurance procedures operating at faculty level reached University committee level in a form that enabled effective discussion and decision, or assurance that the committee itself exercised oversight of the issues raised.

17   Policies, regulations and processes agreed in the governance structure are implemented through a hierarchy of management. Key at University level, aside from the Head of Institution, are the Pro-Vice-Chancellor Assessment, Learning and Teaching (ALT), the Pro-Vice-Chancellor who serves as the Director of University Research and the Pro-Vice-Chancellor Registrar and Secretary who heads the RSO which has significant administrative responsibilities for quality assurance. The PVC (ALT) is the Deputy Chair of Academic Board and the Chair of the Academic Committee. The PVC and Director of University Research is Chair of the University Research Sub-Committee. Both have a key role in determining the direction of the University. For example, the PVC (ALT) has a significant role in leading the enhancement of the quality of learning opportunities and the student experience. At faculty level the deans are central to the management of academic standards through the approval and review processes (see paragraph 20 onwards).

18   The University supports its processes for the management of standards and learning opportunities by systematic documentation. The central documents are the academic principles and regulations, the research regulations, and the student regulations. For the purpose of this report the first two of these documents are referred to as the academic regulations. Each is

supported by other documents, for example the research regulations link to the policies and procedures for research ethics. The academic regulations are embodied in a quality manual which is part of a website maintained by a quality, standards, review and enhancement team within the RSO. This provides a centralised resource for these activities, providing details of academic procedures, guidelines on processes, and forms to be used.

19   The audit team considered this overall structure of documentation to be providing valuable tools for the University in safeguarding quality, but considered that the style in which the academic regulations and associated procedures were framed was overly complicated and did not make them easily accessible to members of academic staff who were engaged in the day-to-day management of standards and quality. The team also noted a number of inconsistencies within the academic regulations. The section on academic approval in the procedures, for example, notes in B1.P6.12 that 'the report [of the Approval Panel] is addressed to the Academic Board of the University'. But the next paragraphs indicate that these reports are not submitted to Academic Board, but to the faculty board or equivalent (see also paragraph 21). Further, although the academic regulations are shown as having been revised in 2008, they still refer to bodies which, at the time of the audit, did not exist, such as faculty academic quality and standards committees. The team considers it advisable that the University revise the academic regulations and the associated procedures so as to ensure that they are clear, unambiguous, and accessible to staff and students (see also paragraphs 23, 38, 49, 51, 109, 112).

Section 2: Institutional management of academic standards

Approval, monitoring and review of award standards

Academic Approval

20   In its Briefing Paper, the University stated that a formal process of academic approval, based on a system of peer review, was required for all schemes or courses leading to an award. The aim is to 'secure for students appropriate standards of award and a high quality of educational and academic experience'. The responsibility for this process is delegated to deans of faculties (see paragraph 33). The principles are set out in the academic regulations and associated procedures and amplified further in the document Academic Approval created by the Quality, Standards, Review, and Enhancement section of the RSO.

21   Course approval is a two-stage process involving strategic planning approval and academic approval. The University requires that 'all proposed academic provision is subject to strategic planning approval (SPA) before it can be included within the University's portfolio'. This includes entirely new awards or new forms of delivery; changes to a scheme, course title; changes to existing courses that involve more than 30 per cent of the programme of study. SPA determines whether a course proposal is consistent with the 'Vision and Character' of the University, its feasibility, financially viability and congruence with existing University provision. All course proposals are considered first by a faculty academic committee and then by the Strategic Planning Approval Review (SPAR) Group, chaired by the Director of Planning and Registry Services or nominee and with faculty representation. The audit team noted that the academic regulations concerning SPA and the Briefing Paper were not entirely consistent; the Briefing Paper indicating that SPA are subject to 'confirmation' by 'DEVISE,' a group not mentioned in the procedures. Once SPA approval is obtained, a course or scheme development team prepares the programme for academic approval.

22   The University has two processes for academic approval. The main process, described as a formal event, is normally applied to new courses and involves a chair external to the faculty or University. Alternatively, where new modules within a course represent no more than 30 per cent of the credit points required for the award, then the academic regulations state that the faculty board (or equivalent) can, assisted by appropriate external peer advice, consider proposals and

act as an approval panel. In this case, the chair would be internal to the faculty and input external to the University might be via correspondence. The decision about whether such an internal event is appropriate is a matter for the dean of faculty. The audit team considered that while these arrangements are not currently putting the maintenance of academic standards at risk, the potential conflict of interest caused by deans having executive powers for both business and academic matters, with limited institutional oversight, has potential to put standards at risk (see also paragraph 33 in periodic review).

23   For the main process, the academic regulations state that the chair of the FAC is responsible for nominating the chair of the approval panel, who may be external to the University. University staff that the audit team met indicated that an external chair would only be appropriate where it was a requirement of a professional body. The team considered that the academic regulations should be clarified to reflect current practice.

24   The University's academic regulations state that an approval panel has delegated powers of approval from Academic Board. The full approval report goes to the FAC whose terms of reference say that it has a role in monitoring the conduct of approval events and compliance with the academic regulations. Once any conditions set by an approval panel have been met, the panel chair confirms approval to the relevant dean who completes a final faculty approval form. The audit team noted that the process diagram, within the recently issued guidance, indicated that an FAC has a confirmatory role only and that the reports are presented to the Academic Committee, although the associated guidance made no reference to this process and the team could find no record of it happening (see also paragraph 36). Therefore the team recommends that the University clarify its expectations of FACs and the Academic Committee in relation to the approval and review processes.

25   From its scrutiny of documentation and its discussions with staff, the audit team found that the procedures for the approval of new courses were functioning as described in the University's Regulations and associated procedures. The implication of this is that new undergraduate honours degree courses, drawing upon existing modules, but involving significant new provision, say, at final honours level, can be approved under an internal faculty-based system which may only involve input from external peers through correspondence. The team saw examples where nearly half of the final year of an undergraduate course was new provision and where the approval had been under the faculty-based system. The team acknowledges the need for flexibility in processes to add new courses within existing modular schemes. However, the team considers that the University should review its academic regulations and associated procedures in respect of the percentage of new modules and their levels required to permit approval through the internal process, in order to ensure that the integrity of its awards is always safeguarded and that the approval of new courses involves robust external scrutiny.

Minor modifications

26   Minor modifications are defined as those which do not affect the overall aims, objectives, philosophy and balance of a scheme or course and include changes in module title, assessment methods, syllabus and curriculum updating and the deletion of modules where the effect of this is not to alter the overall aims and learning outcomes of a scheme or course. Such changes are approved by the head of school or senior academic manager appointed by the dean and reported to the FAC. The audit team found that most faculties were operating this system effectively with the decisions being reported to the appropriate FAC. However, in one faculty, the team could find no record of this process taking place. The team considered that the role of the FAC in this process was unclear; while their terms of reference indicate that they have a monitoring role for approvals, the team found references to the reports going to FACs 'for information only'. It was concerned about the independent scrutiny of the changes being made and considered that the University should further strengthen its processes to ensure that there was effective monitoring of minor changes across the University.

Changes to mode

27   The audit team noted the plans the University had in place to extend the use of its virtual learning environment. It heard that where courses are being designed for distance learning then their approval would consider a range of quality assurance issues associated with this mode of delivery. However, when individual modules were being moved to a more blended approach, the team heard differing views from academic staff and senior managers as to the quality assurance procedures that would apply. The team could find no reference in the University's academic regulations or guidance as to how such changes should be considered and recommends that the University review its procedures for approval and review of modules adopting a more blended-learning approach in the light of the *Code of practice*.

Annual review

28   At the time of the audit the University had recently reviewed and amended its process for annual review in order to better enable the review of provision by staff and students to take place and be followed up within the academic year under review. This was undertaken through the introduction of two student consultations a year so that the cycle of review and action is short and response to issues identified rapid. The review of the process also recommended that annual review should be more clearly aligned with the *Code of practice* and suggested greater reporting on: research and scholarly activity; staff development; feedback from employers; placements; first destination statistics; student progression and classification data; module reviews/module results; and the identification and sharing of good practice. Annual review reports draw upon a range of evidence, including statistical data, reports from student focus groups, reports from functional areas, as well as the reflections of academic staff. Reports are considered at course level and then grouped as appropriate at faculty level. These composite reports are then collected into a University document and considered by the Academic Committee.

29   Following the 2007-08 review cycle, the University recognised that there was evidence of inconsistent practice and that further development work was required to embed fully the revised process to ensure maximum enhancement opportunities were identified and acted upon. The audit team explored the effectiveness of the annual review process through a review of course annual review reports, in discussions with staff and students, and through scrutiny of faculty and University annual review reports. Course action notes and reports available to the team adopted a variety of different formats which did not all address the issues expected by the University. Furthermore, it was not always possible to verify that all courses had been included in the process.

30   The audit team concurred with the University's assessment that the new process has the potential to provide timely and useful information on the health of the University's provision and will need time to become fully embedded in practice. The team recommends that the University continue its work to ensure that the annual review process provides a rigorous consideration of, and reporting on, all courses in line with the expectations of the *Code of practice* and as identified by its own review.

Periodic review

31   The report of the previous audit encouraged the University to bring its regulations into line with its statements of practice in the self-evaluation document for the audit; namely that all provision was subject to review every five years or less and that the regulations require externality in periodic review. The previous audit concluded that insufficient formal means existed to enable the University to be confident that the contribution of external peers in periodic review was always impartial, critical and robust. The report advised the University to consider developing its procedures and regulations further to ensure that all provision was subject to periodic review at regular intervals, and that the periodic review process invariably includes robust internal and external scrutiny across all areas of provision. In its initial response to the last audit report,

the University had stated that in practice it did meet the requirements of externality in periodic review and that 'by the end of the year the academic regulations will be amended to reflect current practice.'

32   In the Briefing Paper for the current audit the University stated that the process for periodic review mirrored that of academic approval and had the purpose of ensuring that a scheme or course remained academically valid and that it continued to meet the requirements for an award of that level. A key element of periodic review was enabling a course development team to consider and reflect upon the strengths and weaknesses of provision and to enhance provision accordingly. The academic regulations state that the University expects periodic review to 'build directly on a critical appraisal of the evidence provided by the continuous annual review and evaluation of the scheme and/or course; to register examples of good practice and make an evaluation of modifications to the scheme and/or course'. The audit team explored the University's approach to periodic review through discussions with staff and by scrutiny of the academic regulations and their application via an audit trail in one faculty and by sampling across the University. Despite the assurances provided in response to the last audit, the team nevertheless noted that the current academic regulations state that 'Periodic review is the process whereby the progress of an approved Scheme or Course is critically appraised at intervals determined by the Faculty by a Review Panel normally including external peers'.

33   The list of programmes and their dates for review provided to the audit team by the RSO was not comprehensive and would not be adequate as a basis for an independent review of the plans for review activity submitted by faculties. The schedule provided to the audit team listed a number that had exceeded a five-year period and had no date for review indicated. While the audit team heard of good reasons for minor delays in the normal five-year periodic review cycle, it echoes the previous audit's concerns regarding the responsibility for deciding when periodic reviews should take place residing with the deans, rather than with the University. Again, the present team notes the potential conflict of interest caused by deans having executive powers for both business and academic matters in a situation where institutional oversight is limited (see paragraph 22). The team also had concerns of the RSO's ability to monitor and report effectively on the current process in operation given the lack of comprehensive documentation.

Externality

34   The academic regulations state that a periodic review of a scheme or course may take a number of forms, analogous to academic approval. University procedures do not require a detailed critical review of data, but note that it is useful to provide additional evidence such as cohort statistics. The audit team identified rigorous processes for review involving independent chairs, external panel members, discussions with students and scrutiny of data in some but not all faculties. It considered that the University should review its academic regulations and associated procedures to ensure that there is always robust use of data as part of the periodic review process as advocated in precept 7 of the *Code of practice, Section 7: Programme design, approval, monitoring and review* and in line with the good practice evidence in most faculties.

35   In one faculty, the periodic review of a scheme structure, including shared modules, had undergone a process analogous to that required for the approval of new programmes, while the courses within the scheme had undergone separate review in a manner similar to that used for the approval of new courses where there is no more than a 30 per cent change in modules (see paragraph 21). The latter process had an internal chair, and external involvement was through written correspondence from 'critical readers', normally external examiners, who were asked to complete a standard pro forma designed primarily for use in course approval rather than review. Some critical reader comments seen by the audit team contained limited critical engagement with the course or comments relating to experience of its operation. In one instance a critical reader had submitted helpful and supportive comments to a scheduled review for a course which had been in operation for over six years, although the review event did not take place. The team

was informed that the review had been deferred, but could find no reference to the reasons for this being discussed and agreed by the relevant faculty board or the FAC, or any new date for review set. The University confirmed that the academic regulations permitted the periodic review of courses to be undertaken within the 30 per cent regulation and with external input via correspondence only. Since periodic reviews are of existing provision this implies that the periodic reviews for most courses could take place through internal chairing within faculties with limited external engagement (see above). The team concluded that the contribution of external peers to the University's periodic review processes, while working effectively in some areas beyond current University requirements, was not always critical and robust and was thus placing standards at risk.

University oversight of approval and review

36   Academic Committee do not receive the reports of review or approval events (see paragraph 24) but receive an annual continuous audit report on approval as part of the academic audit process (see paragraph 38). The last continuous audit report which scrutinised approval events was based on the observation of three approval events, feedback questionnaires completed by panel members, and a desk-based audit of the documentation for 15 events and the reports of 10 events. It concluded that there was scope to enhance the annual reporting of approval and review events and revised guidance was subsequently issued. The audit team scrutinised a range of approval and review reports from across the University. It identified some detailed reporting but also some reports where, for example, the precise nature of new courses and modules being approved was unclear. The team noted the steps being taken by the University, through the revised guidance, to improve the record-keeping, and encourages the University to monitor the effectiveness of these actions. The team concluded that the University might benefit from greater central oversight of the outcomes of approval and periodic review so that areas of good practice can be identified for wider dissemination, and common issues of concern raised for action as appropriate.

Joint awards

37   The University offers a range of joint awards arising from combinations in schemes within or across faculties. The audit team heard of differing ways in which such awards could be approved either through the separate faculty level approval of each element or through an event held under the auspices of the designated lead faculty. The academic regulations and the guidance produced by the RSO make no mention of the procedures by which joint awards should be approved and reviewed. Equally, the University's guidance on annual review makes no mention of how the experience of students on such awards should be monitored and enhanced through the annual cycle. The team concluded that the University should develop clear procedures for the quality assurance and enhancement of joint awards.

Audit

38   The processes of approval, monitoring and review are supplemented by three further review mechanisms: quality enhancement audit which is discussed in paragraph 96 below; continuous audit - 'an ongoing activity which involves the collection, monitoring and evaluation of routinely produced evidence and observation of a range of activities'; and annual audit - 'the audit of specific issues or themes which arise from consideration of the outcomes of continuous audit'. Continuous audit and annual audit form academic audit which is used to assure Academic Board that 'the delegated responsibilities for quality and standards of academic provision are being properly discharged' and 'to promote quality enhancement by the identification and dissemination of good practice'. It was apparent that academic audit provides an effective mechanism for the scrutiny of key processes using a clear evidence base which provides clearly stated outcomes and recommendations. The evidence suggests, however, that there may be some confusion within the University concerning the status and purpose of these three types of audit, with audit reports being given incorrect titles for their content. For example the audit of

Mitigation Panels, Examination Committees and Board of Examiners 2007-08 reports was described in its heading as a 'Report on Continuous Audit …', whereas the nature of the content fits more closely with the definition of what is described in the academic regulations as annual audit. The audit team also noted that the University academic regulations indicate that the report of academic audit, for example, is considered by the University's Academic Quality and Standards Committee, although this committee no longer exists.

39   While the audit team was provided with additional evidence which helpfully explained the purpose of each type of audit and the relationship between them, demonstrating that they were generally interconnected and mutually reinforcing, there was no evident link with periodic review. The team concluded, therefore, that it would be desirable for the University to review the effectiveness of the various audit processes and how they work together to ensure that their outcomes contribute in an integrated way to the management of academic standards, quality and enhancement.

External examiners

40   The Academic Committee has delegated authority from the Academic Board for the appointment, renewal and removal of external examiners who are appointed to all award-bearing courses. An External Examiners Sub-Committee supports the Academic Committee in its fulfilment of this responsibility through providing detailed scrutiny of proposals and considering issues raised by the external examiner system. On a limited number of schemes, where there are short courses and language awards, external advisers are appointed to assist external examiners. Following a review of its induction practices and feedback from external examiner reports, the University has recommended on-site induction sessions for 2008-09. External examiners receive a handbook which is also available on the external examiners' section of the University's website and new examiners may be appointed mentors depending on their level of experience.

41   External examiners are required to report in writing annually to the Academic Board. The RSO receives and formally acknowledges each external examiner's report which is then copied to the relevant faculty. The course leader is responsible for ensuring that the comments and recommendations contained in the report are considered, actions taken and formally recorded and external examiners notified. Further consideration of the responses to external examiners is undertaken by scheme/course teams through the annual review process. The RSO collates and reports on good practice, areas of concerns and institutional trends to the Academic Committee.

42   From its review of the evidence and its discussions with staff and students, the audit team concluded that the University had in place effective means for the appointment and support of external examiners and was using their feedback effectively to monitor and enhance its provision. The University stated that it facilitates sharing external examiners' reports with student representatives; however, there was limited evidence that student representatives were seeing these reports in accordance with the requirements of the HEFCE publication *Review of the Quality Assurance Framework, Phase two outcomes*, October 2006 (HEFCE 06/45) and the team recommends as desirable that the University considers strengthening its procedures in this regard (see paragraph 130).

Academic Infrastructure and other external reference points

43   The University makes no mention of the Academic Infrastructure in the 'Overarching Principles' section of the academic regulations but it is evident elsewhere that there is a general systematic regard for these matters in some areas of the University. For example, the University's Regional University Network has already adopted the revised system of levels, published by QAA in 2008 in the FHEQ, and the Academic Committee has also agreed that this be adopted within the University. The University is aware of the European developments arising from the Bologna Process and draws on the expertise of a senior academic in the Faculty of Business and Law who is a UK Bologna expert. The Briefing Paper also noted that the University plans to provide a set

of personalised information for students about their courses which will align with the European diploma supplement system.

44   The Quality, Standards, Review and Enhancement Team take a specific responsibility for 'interpreting the external academic framework through the development of a quality assurance infrastructure'. In its guidance on approval events reference is made to the need for proponents of courses to demonstrate alignment with 'external reference points (i.e. QAA subject benchmark statements) … [and] PSRB requirements'. The University also utilises a taxonomy of assessment domains which is aligned with the FHEQ. However, the guidance makes no mention of approval and review panels ensuring that there is alignment with the FHEQ (or the University's own taxonomy).

45   All courses are expected to maintain up-to-date programme and module specifications and the annual monitoring and review processes ensure that the documentation remains current. Staff confirmed that programme specifications were not written for students but for the approval process and were key definitive course documents. (see also paragraph 127). At the time of the audit the University had launched an online repository for programme and module specifications accessible to staff and students (see paragraphs 86, 126); however, the audit team was unclear about the quality assurance processes that would be applied within the University to enable any change in focus for programme specifications to take place. Although some programme specifications showed detailed course structures including core and elective modules, in other areas of the University programme specifications covered a scheme and contained no detailed requirements for the subsumed awards. Staff confirmed that, in such cases, there was no requirement for a detailed programme specification for each award. The audit team concluded that, without detailed course structures including a list of the relevant modules, approval panels could not assure the University that course teams were fully meeting the intentions of programme specifications to provide 'a concise description of the intended learning outcomes of an HE programme, and the means by which the outcomes are achieved and demonstrated'.

46   Although programme specifications indicate the relevant subject benchmark, the evidence available to the audit team showed no consistent detailed mapping of course provision against subject benchmarks in approval and review events or their reports. Staff confirmed that detailed mapping was unusual and that approval and review events would record discussions only if the issue had been raised as a matter of concern by the panel. The University deals with public, statutory and regulatory body requirements in a similar way but here the engagement in programme specifications is more systematic, and the detail is also spelt out in course handbooks.

47   From its discussions and consideration of approval and review documentation, the audit team considered that the University could not be assured that the Academic Infrastructure was always being used as an effective reference point. Accordingly, it advises the University of the need to develop its systems and procedures for course approval and review so that it can assure itself that the elements of the Academic Infrastructure are consistently engaged with across the full range of provision.

Assessment policies and regulations

48   The University's assessment principles, regulations and procedures are set out in the academic regulations and have been revised to respond to the issues raised in the previous audit regarding student progression. The audit team found that the University had responded effectively to the concerns raised in the previous audit relating to students' tactical avoidance of challenging modules.

Boards of examiners and examination committees

49   The University's academic regulations and procedures for academic regulations set out the constitution, remit and procedures for the operation of examination committees and boards

of examiners. The RSO delivers Board of Examiners training to staff on an annual basis which key staff are expected to attend. The academic regulations state that the chair of the board of examiners should be 'a member of the academic staff of the University with seniority and experience of Boards of Examiners' and that normally this would be 'the Head of School or Senior Academic Manager nominated by the Dean'. The audit team raised concerns about the possible independence of the chair in this process. However, discussions with staff revealed that it was University practice to appoint chairs independent of the school or subject area under consideration. The team concluded that the University's academic regulations should be revised to reflect current practice.

50   Since the previous audit there has been a shift in emphasis from a Learning, Teaching and Assessment Strategy, to an Assessment, Learning and Teaching (ALT) Strategy demonstrating the University's intention to focus on assessment practices which support student learning. An agenda which the University is pressing ahead with through, for example, the creation of a website carrying a range of resources, and networks of associate deans and teaching fellows (see paragraph 99). The University's ALT strategy focuses, among other issues, on the importance of students receiving formative feedback on assessed work within three weeks of submission. This three-week period was understood as accepted practice by both staff and students that the audit team met. However, the University's academic regulations set a target of four weeks for return. While setting a more ambitious target than that in the regulations potentially advantages students, the University may wish to consider whether its regulations and ALT targets should be brought into line in order to send a clear and unambiguous message about its expectations on the period in which work is to be returned.

51   The University has actively addressed the issue of plagiarism. It provides students with a comprehensive guide: the Little Book of Plagiarism which was commended universally by staff and students that the audit team met. Following a pilot process, the University has recently instigated unfair practice boards as a way of managing cheating, plagiarism and other forms of unfair practice. Unfair practice boards determine penalties on a consistent basis and refer cases of procedural or other deficiencies back to faculties. The team considered these boards potentially as a feature of good practice but, given their recent introduction, was not able to consider their full impact. A minor change had been made to the academic regulations to accommodate these boards but it appeared to the team that this was now in conflict with other aspects of the regulations, for example, that which stated that 'the Board of Examiners has the authority to determine the penalty' and that the 'Examination Committees are authorised to consider at first instance cases of cheating or plagiarism and other forms of unfair practice'. The audit concluded that the University should revise its academic regulations to ensure that they are clear and unambiguous on this matter. Notwithstanding the need for clarification, the audit team considered that the work being undertaken by the University to guard against plagiarism was a feature of good practice.

52   The audit team noted that the University was involved in developing a process to manage and deliver audio feedback on student assessments through a Joint Information Systems Committee funded pilot project named 'Sounds Good', in collaboration with three other higher education institutions. The University was short-listed for this project in the Times Higher Education Awards for 2008 in the Outstanding Commitment to Innovation and Technology category.

Management information

53   Management information is produced to support the review of specific aspects of the University's performance at course, faculty and institutional levels and its use to support academic development and decision-making is being extended. The lack of a requirement for management information to be part of the periodic review process was discussed earlier (see paragraph 34). The audit team reviewed the use made of management information in the annual review process where several courses reported issues with the data produced by the University. The team noted

that the University was aware of this issue as an outcome of the most recent Annual Quality Review. The team concluded that the University was working to improve the consistency, accurateness and usefulness of the way its management information supported core processes and would encourage the University to continue to monitor its work in this area.

Conclusion

54   From its considerations of the University's policies and procedures for the institutional management of its awards and their application across the University, the audit concluded that limited confidence could be placed in the soundness of its current and likely future management of academic standards.

Section 3: Institutional management of learning opportunities

Academic Infrastructure and other external reference points

55   The Registrar and Secretary's Office (RSO) is responsible for ensuring the University's academic regulations and associated procedures are written in line with the *Code of practice.* These are available on the University's website and feature in training for key roles such as chairs of examination boards, course leaders and course administrators. The RSO maps the *Code of practice* and any amendments to the regulations and reports on this to the University's Academic Committee. Apart from the concerns noted earlier in relation to recording of mapping against subject benchmark statements (see paragraphs 46, 47), the audit team formed the view that the University makes generally appropriate use of the Academic Infrastructure and other external reference points in the management of learning opportunities.

Approval, monitoring and review of programmes

56   The University's planning process covers a consideration of the resources required to provide effective learning resources to students. From its review of the evidence available, the audit concluded that the strategic planning approval process was effective in ensuring that appropriate resources were considered prior to approval.

57   All approval events are expected to involve input from a subject expert who is external to the University (see paragraph 22). In addition, where appropriate, an employer representative from the relevant sector may be included. From its review of approval reports, the audit team noted considerable variation across faculties in the use of employer representatives in panels and the University may wish to consider whether there is scope for a more systematic use of employers in this way.

Programme design

58   The University stated that the academic regulations provide clear guidance on the expectations regarding programme development and that additional guidance is provided to support the consideration of all relevant areas through completion of the programme and module specifications. Issues around the framing of the academic regulations (see paragraph 19) and aspects of the Academic Infrastructure (see paragraph 47) are detailed elsewhere in this report.

Management information - feedback from students

59   The University is seeking to create a culture that demonstrates the value of, and encourages, feedback from students. This involves a 'You Said - We Did' approach intended to demonstrate to students how their feedback is shaping the decisions made by the University.

60   The University acknowledges that it has not done well in the National Student Survey (NSS) in recent years and has established a steering group to consider how improvements might be made

and to support the faculties in action planning. Through the annual review process and other documentation, the audit team saw clear evidence of the systematic manner in which the University was seeking to utilise the evidence from the NSS to improve the learning experience of students.

61   In the academic year 2007-08 a new process for delivering student module evaluations was introduced across the University which is subsequently used in the annual review process. From its consideration of course reviews, the audit team found considerable inconsistency in the way in which module feedback was gathered, used and reported on across the University. It noted that the University was already aware of this issue and that actions were underway to improve the systematic use of module evaluation data. The team encourages the University to continue its work to improve the effectiveness of this process.

62   As part of the annual review process student representatives are invited to attend the twice-yearly annual monitoring and review meetings. There is also an expectation that faculties will convene either student forums or focus groups as an additional opportunity to receive feedback from students as part of the new annual review process (see paragraph 118). The University acknowledged that it had yet to evaluate the impact of the new processes. From its review of the annual review reports and through discussions with staff and students the audit team found that some areas of the University demonstrated good engagement with students, but further work was required to embed this level of engagement with students in all courses. The team concluded that, as issues are reported at different levels through the institution, there is a tendency to lose sight of issues of concern to students and focus more on those of concern to the University. For example, faculty annual quality reports (FAQRs), in covering student feedback, conflate feedback on issues raised by students with feedback to students on assessed work. In some cases faculty-level discussions of the former were limited in FAQRs. In its work to improve the annual review process, the University might consider how it ensures that the views of students are captured and conveyed appropriately at each level in the reporting process.

63   In its Briefing Paper the University stated that faculties involve students in consultation as part of the periodic review of a programme through a focus group with staff and student representatives and/or the broader use of questionnaires. However, according to the University's academic regulations and the recently issued guidance on approval and reviews this is not a requirement and is a matter that is left to the discretion of deans of faculty. Given the emphasis being placed by the University on the student experience and the expectations of the *Code of practice*, the University should consider revising its periodic review procedures to ensure that the student voice is always considered as part of periodic reviews.

64   From its discussions with staff and students and through the sampling of the course, faculty and University documentation to support the University's 'You said - We did' approach, the audit team concluded that on the whole the University was making a systematic effort to engage students and to use their feedback to improve the quality of learning opportunities. However, the evidence from the student written submission (SWS) and from discussions with students indicated that there was sometimes a mis-match between institutional priorities and those of the student body. The University might wish to consider how it prioritises the areas for action so that it is responsive to the concerns of the majority of students or to issues which significantly impact on the quality of the learning experiences.

Student liaison officers

65   Student liaison officers (SLOs) are employed in some areas of the University, particularly where student retention is of concern, to provide a link between the University and its student body. Where employed, SLOs provide a link between students and central services and receive informal feedback from students which is used by the faculties as part of their monitoring and shared across the University through an informal network of SLOs. From its discussion with students and SLOs, and from a review of the course documentation, the audit team concluded

that the targeted use of SLOs is having a positive effect on student engagement and that the feedback gathered is being used to enhance the learning experience of students.

Role of students in quality assurance

66   The University provides opportunities for student input into the management of standards and quality by offering membership to representatives of the Students' Union across the formal senior-level committee structures, including the Board of Governors and Academic Board. This is supplemented with regular informal dialogue between the Students' Union Executive and senior University management.

67   Student representation on scheme and course level bodies, including annual review processes, are governed by the student representation regulations, which define the nature of such representation and include regulations covering matters such as the process of election of course representatives. However, it is clear from the University's own analysis, as well as that provided by the SWS, that there is considerable variation among faculties with the degree of compliance to these regulations. The University stated that it worked in partnership with the Students' Union to ensure that all courses have student representatives and claimed that 'the Students' Union is responsible for [the] training and support' of course representatives and also for their 'effective engagement'. However, in the SWS and in discussions, students were critical of the steps being taken in some areas to appoint student representatives in a timely manner and to notify the Students' Union so that appropriate training and support could be provided.

68   The 2004 audit report noted that progress had been made since the previous report which had indicated some difficulty with student representation. At the time of the 2004 report, the University indicated that it remained necessary to implement more effective formal mechanisms for achieving student representation. In particular, the course representative system was acknowledged to be inconsistent in its effectiveness, which the team noted had still not been adequately remedied.

69   The audit team considers that it is desirable that the institution reviews the effectiveness of its processes to manage student representation.

Links between research or scholarly activity and learning opportunities

70   The University's research strategy includes within it an intention to develop a linkage between research and other scholarly activity and learning and teaching. The institutional research priorities for 2008-09 include reference to the postgraduate experience, but do not include explicit goals directed at the learning opportunities of undergraduate students. Neither the annual review nor the periodic review processes embed a focus on the linkage between teaching and research. In contrast, the audit team saw clear evidence of research in the area of learning and teaching feeding directly into the assessment learning and teaching strategy through the activities of the ALT Directorate and also being disseminated widely (as noted in paragraphs 91, 99). The team considers it likely that students are benefiting from the research strengths of staff, but that these benefits are not transparently and consistently captured nor enhanced by the existing review or reporting mechanisms. The University may wish to consider ways of more clearly linking research activities with the learning opportunities of students, particularly those on taught programmes.

Other modes of study

71   In its Briefing Paper, the University stated that it is 'committed to the development of flexible modes of study, to move towards an objective of allowing students to study at the pace, place and mode of study of their preference'. One significant development has been the approval of a small number of accelerated, two year, undergraduate programmes, developed under a HEFCE-funded initiative. The oversight of this development has involved a broad consideration of the incorporation of such programmes into the University's calendar.

72   There are just over 500 students on distance-learning programmes (excluding those delivered through collaborative provision), spread over 50 programmes. The audit team saw evidence that the distance-learning element was specified at the point of programme approval within the University. However, there is no system in place for mapping against the relevant elements of the *Code of practice, Section 2*, nor any published set of University expectations mirroring these elements for such programmes; nor any reference in the University's academic regulations specifically to the review of distance-learning provision (see also paragraph 27). The audit team considers it desirable for the University to review its procedures for approval and review of distance learning in the light of the *Code of practice*.

73   The University places significant value in the education and training of students through placement activity. There are clear policies in place regarding the oversight of learning opportunities for students on placements; for the integration of placements with programme learning outcomes and for support and guidance before, during and after placement activity; and the audit team saw evidence of some robust implementation of these policies. Of particular note was the Placement Newsletter, a University magazine to ensure students on placement maintain awareness of what is happening at the University. Student satisfaction with placements is mixed. The SWS indicated some dissatisfaction with the support for student placements, while simultaneously expressing a desire to expand the range of activities with University partners. The team heard from some students who felt unsupported during their placements, while others expressed considerable satisfaction with their experience. The University may wish to review the consistency of support offered to students on placement.

Resources for learning

74   The University's libraries and information technology (IT) provision operate from within the Faculty of Information and Technology ('Innovation North'). There are separate libraries at the institution's two sites. Both libraries are open all day, 365 days a year, and borrowing and returning of items during non-staffed periods is facilitated by radio frequency identification technology.

75   The quality of the library and IT service is overseen by the Libraries and Learning Innovation Team, which consider a range of matters including benchmarking against relevant external reference points. It was noted that Society of College, National and University Libraries [SCONUL] statistics, considered by this group, indicate the University's per full-time equivalent student expenditure on books, journals and databases to be slightly below that of comparable institutions. However, the minutes of the team meetings did not indicate any critical appraisal of any benchmark data considered. The University may wish to consider reviewing the thoroughness of the process by which benchmarking is reported.

76   The Innovation North 'Supporting Student Services' report summarises library and IT service provision on a termly basis, including responses to student feedback and is reported to Academic Committee.

77   Student satisfaction with both library resources and IT provision in the 2008 NSS was slightly above the national average. The SWS reported a general satisfaction with library resources, although expressed some criticism of journal and periodical provision. Satisfaction with IT resources expressed in the SWS was mixed, with the institutional virtual learning environment, named X-Stream (see paragraph 78) being more positively rated than other aspects of provision. The library undertakes regular online surveys to assess satisfaction with service provision, of which key issues are noted via the termly 'Supporting Student services' report (see paragraph 76).

78   In its Briefing Paper the University stated that as part of the ALT priorities, there is a published set of minimum expectations for X-Stream to ensure staff engagement, which have been discussed at senior committees and are being implemented across faculties through a series of action plans. There is an extensive programme of staff development opportunities to cover different levels of expertise with the virtual learning environment. The students the audit team met

and the SWS reported mixed views of the value of the virtual learning environment, reflecting differing subject discipline practices, but overall, the SWS indicated a general level of satisfaction.

79   Overall, the team considered the management of the provision of learning resources to be satisfactory.

Admissions policy

80   The University's admissions policy was revised in December 2008, and places emphasis on transparency, fairness and consistency and makes prominent reference to the relevant sections of the *Code of practice*. Training is compulsory for all those involved directly in admissions, and is supported by termly briefings and regular meetings of an admission tutors network, which include visiting lecturers, to raise awareness of best practice. The admissions policy applies to all students, irrespective of mode of study or level of award. Students met by the audit team were satisfied with the admissions experience they had received, and some highlighted particular efforts made by the institution to support them through the process. It was noted that the full programme specifications were not readily available to prospective students (see paragraph 86, 126), although the audit team heard that work was being undertaken in this direction (see paragraph 45).

81   The admissions policy includes guidance on the management of feedback to unsuccessful applicants. The audit team noted that concerns about this process had been raised at Academic Board in March 2008 and an admissions process review undertaken. The review reported to Academic Board in December 2008 with a number of recommended revisions to policy and practice which were being implemented at the time of the audit. Overall, the audit team concluded that the admissions policy was robust and implemented effectively.

Student support

82   Academic student support is provided via the faculties, either through a personal tutor system or another arrangement, varying in both approach and role title across the faculties. The University has embedded in the ALT Strategy a 'coaching' approach to learning, which attempts to get students to reflect on their own learning, although the audit team did not find any evaluation of the success of this approach. The SWS indicated some dissatisfaction with the variability in the current personal tutor arrangements and suggests a clarification of the institutional policy in this regard. Of the students that the audit team met, some indicated that where class sizes were small the module leader was able to give good support, while other students corroborated the picture provided by the SWS. The team noted that revisions to personal tutor arrangements were underway in the faculty picked out in the SWS for particular criticism.

83   Non-academic student services are the responsibility of the Director of Services to Students. The Services to Students team provides a wide range of services including counselling, financial advice, childcare, health, disability support, a jobshop and careers advice, specific learning difficulty support and chaplaincy. Services are accessed via 'Helpzones', which have access points at four locations across the University and via a comprehensive website.

84   The University counselling service provides a comprehensive service including, one-to-one client support and group support services covering a wide range of issues. The disability service acts in conjunction with faculties to ensure that reasonable adjustments are made to accommodate the needs of disabled students. Disabled students have access to specialist resource rooms, and dyslexic students (who comprise 59 per cent of all disabled students) have access to one-to-one support from dyslexia support tutors.

85   The careers service, which provides guidance and information to students and graduates, was re-accredited by Matrix during 2007-08. This process highlighted some areas of good practice and suggested some areas for further improvement, including the development of an ongoing qualitative impact analysis of the service.

86   All undergraduate and taught postgraduate courses are supported by course handbooks, following a University template. These are generally comprehensive although do not contain programme specifications. At the time of the audit, the majority of, but not all, programme specifications were available on a specific part of the University's website, but these were not linked or referenced in any external webpage or publication which a student or potential applicant might find (see paragraphs 45 and 126).

87   Student liaison officers are employed in three faculties to proactively seek feedback from students and coordinate with the wider student support system and, where in place, enhance the student experience (see paragraph 65).

Staff support (including staff development)

88   The Human resources policy and procedures were recently revised, and consolidated into a single set of regulations uniformly covering all staff. Staffing expenditure is overseen at University level by the Finance and General Purposes Committee whilst human resource practices are overseen by the Employment and Staffing Committee, with input from other relevant committees such as the University's Health and Safety Committee and the Equality and Diversity Group.

89   The University introduced a new, compulsory, performance and development review (PDR) scheme in September 2008 which was due to complete its first cycle in spring 2009. All reviewers are obliged to attend a one-day training course and a half-day optional briefing session is provided for reviewees. This new system replaced the previous arrangement where 'different appraisal/staff development arrangements were in place and were being applied inconsistently'. The primary aim of the PDR scheme is to focus performance on the achievement of objectives in the University's 'Attitude, Character and Talents' framework, which underpin the University's Vision and Character statement that forms the institutional strategic plan. It was too early, at the time of the audit, to assess the success of this approach.

90   Employee engagement into institutional policies and processes is gained via trade unions who feed discussions through a Joint Consultative Committee. A further mechanism, titled 'Leeds Met Listens', is a programme of focus groups and online polls. Feedback gathered through this initiative has resulted in action plans and further work to improve the effectiveness of management practice and human resource procedures. The outcomes of 'Leeds Met Listens' are reported to the Employment and Staffing Committee and the action plans and feedback are posted online.

91   The audit team saw evidence of an extensive programme of staff development opportunities in place to support the ALT Strategy, supplemented by a comprehensive ALT website with a range of staff development resources (see paragraph 99).

92   The audit team concluded that confidence can reasonably be placed in the soundness of the University's current and likely future management of the quality of learning opportunities.

Section 4: Institutional approach to quality enhancement

Overview

93   The University aims to make enhancement a core element in teaching and learning. This is signalled most clearly by the assessment learning and teaching (ALT) strategy, now in its second iteration covering 2008-12; the creation since the last audit of a Directorate of ALT; and the revision of the pro-vice-chancellor (PVC) portfolios to create a PVC (ALT). There is no separate subcommittee devoted to enhancement but the PVC (ALT) is deputy chair of the Academic Board, and chair of Academic Committee, and thus well placed to ensure that the explicit reference to enhancement in the terms of reference of the Academic Committee is acted upon. The audit team saw evidence of systematic consideration of enhancement-related matters at the Academic Committee in 2008-09.

94   The University also aims to make enhancement an evidence-led process, for example basing initiatives and actions on detailed analysis of data such as the National Student Survey (NSS). Quality enhancement audits have also been introduced within the University focusing on particular areas. To date these have included: the experience of international students'; formative assessment; student retention; and widening participation. Evidence available to the audit team showed that these had been carried through with specific outcomes being approved for action by the Academic Committee. From the reports seen, the team concluded that the quality enhancement audits provide an effective mechanism for identifying matters for further work and appropriate action points that will be beneficial to the University.

95   A review of annual monitoring and review documentation indicated that a number of course teams do consider issues relating to the enhancement of teaching and learning thoroughly, for example within the Carnegie Faculty of Sport and Education where there was some evidence of detailed consideration of feedback from a full range of students and staff on the teaching of the programme, although this was not across all provision.

96   The University has a system for upward reporting of issues including enhancement raised in annual monitoring and review, culminating in the annual quality report but the system is weakened by the diversity of practice in annual and periodic review meetings.

97   The case studies of periodic programme review, submitted with the Briefing Paper, indicated a number of examples of course teams responding effectively to the University's enhancement priorities, although this is not yet systematic across all provision.

98   The initiatives and special projects led from the centre of the University demonstrate its deliberate and systematic approach to enhancement. Examples include the creation of the ALT Directorate; the Institute for Enterprise CETL; peer observation of teaching; internationalisation of the curriculum; the Internationalisation Strategy; the Directorate for Student-Centred Change Management (SCCM) and the range of staff development activities.

99   The ALT Directorate provides a number of resources to support the University's enhancement agenda including a 'practice-based, reflective and pragmatic' Assessment, Learning and Teaching Journal, as well as publications giving guidance on University policies and priorities. The Directorate's website also hosts the 'ALT Resource' which includes sections on technology enhanced learning; enterprise and employability; assessment and feedback; teaching and coaching; transitions and inclusivity; and learning. A particular emphasis has been placed on assessment and feedback, focusing on the value of timely feedback (in response to student concerns) but also on more general principles, and particularly the need to integrate 'fit-for-purpose assessment into learning particularly using feedback to directly influence student learning' (ALT Strategy 2008-2012). In this way, staff have good access to tailored and accessible resources which facilitates improvement of teaching practice. The Directorate also works as a focal point for the enhancement of learning and teaching within the University through a Teacher Fellow Network which includes University Teacher Fellows and Teacher Fellows with particular responsibilities for enterprise (Enterprise Fellows) and internationalisation (International Teacher Fellows). The University also has a number of National Teaching Fellows who are active members of the network. Teacher Fellows are appointed in recognition of their own abilities and their ability to influence others through involvement in faculty management and course team activities. From the evidence available to it, the audit team concluded that, although relatively small in scale, this network was an effective force for systematic change in the University.

100   The Institute for Enterprise is the University's Centre for Excellence in Teaching and Learning with the aim, through a network of faculty pioneers and sponsoring projects, to 'develop enterprise in teaching or to enhance student learning and employability'. The Institute's website demonstrates engagement by members of staff from the majority of faculties and schools, alongside a number of generic student-related projects.

101   The peer observation scheme was adopted as part of the ALT Strategy (2005-08) as a means of improving teaching and learning and is a priority for the University in 2008-09. The importance of the initiative was endorsed by the acting Chief Executive in a meeting with the audit team. As noted in paragraph 8, the introduction of faculty chief operating officers is expected to be beneficial in increasing consistency between faculties. The audit team raised this in meetings with staff and were persuaded that the introduction of chief operating officers would be beneficial to the more consistent and extensive take up of the peer observation scheme, which in turn would strengthen the enhancement of teaching and the quality of learning opportunities. The booklet 'Using peer observation to enhance teaching (2009)' produced by the ALT Directorate is further evidence of the University's commitment to enhancement.

102   Internationalisation provides another example of the University's strategic approach to enhancement through establishing the vision: to be 'a university with world-wide horizons where an international, multi-cultural ethos is pervasive through our scholarship, volunteering and community engagement at home and overseas' and setting projects in train to achieve it. In the curriculum area this ambition is being realised through the ALT Directorate which hosts a group of International Teacher Fellows and produces guidelines on cross-cultural capability. The guidelines provide models and pragmatic solutions which encourage change in the curriculum at module and course level. Evidence of change in this area was provided to the audit team in the audit trails. Festivals and conferences organised by the University, for example the 'African partnerships conference' and 'Leeds Met Ireland' Festival, both held in 2008, have also provided visible and immediate results for the strategy.

103   The ALT Directorate also arranges an annual Staff Development Festival. In 2008 this ran over two weeks and combined faculty specific days with days of broader cross-faculty interest. Staff who wish to focus their career long term or temporarily on teaching can apply for Teacher Fellowships (see paragraph 99), and the University criteria for promotion to reader and professor both indicate that evidence of 'innovation' in learning and teaching is recognised as supporting an application case.

104   The Directorate for SCCM was inaugurated in 2005, reporting directly to the Head of Institution, 'with the purpose of working across the University to put students at the centre of University activity, helping students to shape their own experience and gain skills and competencies that employers want'. The Director is listed as one of four senior officers within the senior management team and the evidence available to the audit team indicated that although a small unit, the SCCM represents an important element in the University's strategy for enhancement. The team found clear evidence of SCCM initiated projects having a direct impact on the student experience, for example the Freshers' Welcome Festival and the Student Voices project which offers students an enhanced channel of communication with the University. The SCCM has also been given a leading role in chairing a group aimed at improving the University's standing in the NSS.

105   The audit team noted that the University's enhancement agenda has predominantly been led at an institutional level. However, there is some evidence that the University aims to go beyond this and expand the focus for enhancement at faculty level including greater integration of the work of ALT and SCCM in annual and periodic review. One example of enhancement at faculty level is the technology enhanced learning groups and individual champions established to support the development in the use of the University's virtual learning environment. Some faculties are further ahead than others in the use of X-Stream, for example the Faculty of Health has a well-established learning and technology unit to support the work of academics, while the New Technology Institute in Innovation North provides training for, and disseminates research findings to, students and University staff.

106   The audit team found extensive evidence of the University seeking to pursue an enhancement agenda at an institutional level taking deliberate steps to improve the quality of learning opportunities and the student experience. There is little evidence to date of the University systematically monitoring the success of the various initiatives or evaluating success through feedback from staff and students. The Briefing Paper noted that a quality enhancement audit of widening participation activities in faculties and an evaluation of the activities of the SCCM Directorate was planned for the future. In December 2008 the Academic Committee received a report on progress against the 2007-08 ALT priorities, but this focused on whether planned actions had been completed rather than seeking feedback from users, or evaluation of effectiveness. The team encourages the University in its aspirations to conduct a systematic evaluation of its enhancement activities.

Section 5: Collaborative arrangements

107   The University will be subject to a separate audit of its collaborative provision in 2010.

Section 6: Institutional arrangements for postgraduate research students

108   Oversight of postgraduate research student activity is maintained by two subcommittees of Academic Board. The Research Sub-Committee has responsibility for research awards and research development; the Research Ethics Sub-Committee considers the ethical dimension of research projects and provides advice to the University community on research ethics. The Carnegie Faculty of Sport and Education is designated as the lead faculty for research, for example in sharing good practice, and hosts the University Research Office, which supports staff in research activities. A director of research students provides coordination of postgraduate research programmes. A research administration forum allows administrative staff from across the University to meet to discuss issues of mutual concern and to share good practice. Research student-focused committees at faculty level, whose names are not yet standardised across the University, report to and send minutes to their respective faculty academic board research awards coordinators have responsibility for managing research students within cognate areas.

109   In its Briefing Paper the University indicated that responsibility for the support, administration and delivery of research degree programmes is vested in the faculties, and indicated that each has a research committee and research ethics committee, mirroring the University-level structure. However, the regulations and procedures for research awards, which were revised in August 2008 refer to the main faculty-level committee dealing with research students as the 'Faculty Research (Awards) sub-committee'. At approximately the same time as the revision, the relevant research student-focused faculty-level committees were re-named as faculty research committees (FRCs), or faculty research subcommittees, dependent on the faculty concerned. Further, the audit team noted that the research regulations state that 'The Faculty Research (Awards) sub-committee is the sole body empowered to recommend the conferment of a research award of the University', even though this subcommittee no longer exists. The team came to the view that such discrepancy in the regulations could give rise to confusion and considered that this contributed to its decision to recommend that the University revise the academic regulations (including the research regulations) and procedures so as to ensure that they are clear, unambiguous, and accessible to staff and students.

110   The Research Sub-Committee makes decisions to approve examination arrangements and to recommend research degree awards on the basis of information supplied regularly from the research student-focused committees at faculty level. The audit team noted that the terms of reference of the Research Sub-Committee indicate that it presents recommendations for research degree awards 'to the Vice Chancellor, via the Chair of Academic Committee'. The team also noted, however, that the research regulations indicate that any recommendation is 'to be

presented to the Chair of Academic Board', that following formal confirmation at Research Sub-Committee, recommendation is 'conveyed to the Chair of Academic Committee and the Chair of Academic Board' and that the chair of the University Research Awards Sub-Committee receives the recommendation from the faculty. In the University documents available to it, the team was unable to find any other reference to the University Research Awards Sub-Committee and was unable to determine definitively what individual or group formally awards research degrees. The team considered that this lack of clarity contributed to its recommendation that to ensure effective University oversight of quality management, the University reviews where the responsibility lies for decisions taken in respect of programme approval, periodic review of programmes and the management of research student awards.

111   Information to support research students is provided in faculty-specific research student handbooks, issued prior to induction. The audit team noted a strong linkage between the research regulations and the content of the handbooks, but also noted that for one handbook the URL linking to the regulations was incorrect and so the regulations were not accessible to students via this route. In its Briefing Paper the University indicated that the handbooks included information on complaints procedures: the team noted that for at least two faculties this information, including that on appeals, was presented by inviting students to access a webpage. Notwithstanding this, the team formed the view that, in general, the handbooks were informative and fit-for-purpose.

112   Proposals to study for research degrees are considered by the relevant research awards coordinator. The coordinator checks the suitability of the candidate and selects a potential supervisory team, which typically comprises a director of studies and at least one other supervisor. In its research regulations the University lists criteria for members of supervisory teams, which the audit team regarded as appropriate. Supervisors and students together refine the proposal to study, prior to a confirmation of registration event where a review panel considers the proposal and interviews the student. The panel comprises the supervisors plus two other members of staff, one of whom must be a member of the research student-focused committee at faculty level. The confirmation process provides an assessment of the sufficiency of the proposed work for the award level and that completion is a realistic prospect. A scrutiny by the team of the minutes of the student-focused committees at faculty level revealed that in some faculties research degree registration is confirmed by the committee and in others registration is confirmed by the appropriate research awards coordinator and reported to the committee. In one case the committee queried the role of the research awards coordinator and was informed by its deputy chair that, according to the research regulations, decisions are made by the research awards coordinator. Some staff the auditors met indicated that the decision was made by the confirmation panel, while others indicated that the decision was made by FRCs on the recommendation of the panel, neither process involving the research awards coordinator. The research regulations state that the discussion at the confirmation panel may result in 'confirmation of registration for the award', but that where a student successfully re-submits for confirmation 'the relevant recommendation for confirmation will be made', without stating to what individual or body the recommendation should be made. Although the team saw some evidence that the University was aware of the issue, the Research Administration Forum noting that 'there was variable practice across faculties on the process for Confirmation of Registration' and 'confusion around the Confirmation of Registration process', the team nevertheless considered the identified lack of clarity in the research regulations contributes to its recommendation to the University to revise the academic regulations and associated procedures so as to ensure that they are clear, unambiguous, and accessible to staff and students. Further, the team considered that the inconsistency in decision-making responsibility across the University contributes to its recommendation that to ensure effective University oversight of quality management, the University reviews where the responsibility lies for decisions taken in respect of programme approval, periodic review of programmes, and the management of research student awards.

113   Enrolment takes place on four fixed dates per year. A research student induction programme, run by the Registrar and Secretary's Office, follows each enrolment date, but is not mandatory. Induction to faculty processes is via a meeting between the student and a faculty research administrator. The research students the audit team met found this faculty induction particularly valuable.

114   The progress of full-time students is monitored monthly, and part-time students bi-monthly, through discussion with supervisory teams and the completion of a form, which records activity. Annual monitoring for all students is achieved through the completion of report forms, one completed by the supervisory team and one by the student presented to the relevant research awards coordinator. The audit team viewed examples of the relevant forms and regarded them as fulfilling their stated role. The team heard that completed annual report forms are collected by the relevant research awards coordinator who then produces a summary report to the research student-focused faculty-level committee, as part of an annual report of activity as prescribed in the academic regulations. In its Briefing Paper the University stated that such 'annual reports are produced by all Research Awards Co-ordinators and these are submitted to the Faculty Research Committee' on the operation of research degree programmes, including feedback from students from faculty research student forums. However, the University's research regulations indicate that such 'reports will be considered by the Faculty Research (Awards) Sub-committee'. The audit team considered that this discrepancy may have led, in all but one faculty, to the lack of any annual reporting to faculty-level research committees by research awards coordinators that it noted through a scrutiny of faculty-level research committee minutes since mid-2007. The team formed the opinion that the absence of process reporting was a risk to maintaining adequate oversight of research degree activity and considered that this contributed to the recommendation that the University ensures that there is appropriate oversight to ensure that the academic regulations and associated procedures are implemented consistently and accountably throughout the University.

115   The staff and student research development programme addresses the training needs of both students and supervisors. Staff may attend research awards supervision workshops which cover a range of activities including, for example, understanding the University's research administration systems and how to prepare students for assessment. For staff new to supervision some elements of the programme are mandatory. Each faculty produces a research supervisors handbook designed to provide research degree supervisors with an overview of information useful to the supervising process. Through a scrutiny of the training materials and documents issued to research supervisors the audit team formed the view that the University was preparing its staff well for the supervision of research students.

116   The research training programme for students is compulsory, unless students can demonstrate equivalent learning. Each programme contains a module delivered via X-Stream to support, in particular, part-time and distance students. The students the audit team met valued the programme, in particular the ability to book places electronically. In conjunction with the supervisory team, students produce a learning action plan, and students submit a portfolio of evidence of having met the action plan. The portfolio is considered by the supervisory team and the research awards coordinator. Completion of the research training programme must be achieved prior to examination for the award. Progress is checked at least annually through the annual report form. A 'Research Training Programme Student and Supervisor Handbook' has been produced by the University research office. The audit team viewed this handbook as comprehensive and containing much relevant and clear material to support students with the development and completion of their learning action plan. The team also noted that the research training programme presented a varied diet of transferable skills, ensuring that the training opportunities suggested in the *Code of practice, Section 1: Postgraduate research programmes*, are available to all postgraduate research students.

117   Some research students have the opportunity to provide or support teaching and assessment at the University. Although there is an expectation that students undertake formal training in learning, teaching and assessment provided by the University, such training is not mandatory. The audit team noted an instance where teaching and assessment duties had commenced without prior training or an evaluation of prior experience. The team therefore considered it desirable for the University to ensure that its expectation, that all research students who undertake teaching and assessment receive appropriate prior training, is met consistently.

118   In its Briefing Paper the University stated that research students can give their views to the University through the annual report form and through forums at university and faculty levels. An examination by the audit team of the reporting forms used revealed specific invitation to the students to feedback on their experiences, as distinct from describing their progress. The team viewed this as appropriate. Faculty-level forums meet twice per year and from the minutes the team noted lively discussion with, in the main, appropriate action planning and conclusion. Research students the team met valued the university-wide research student forum, which feeds into University quality processes through a report of the forum provided to Research Sub-Committee by the Director of Research Students. In its Briefing Paper the University described the forum as 'a good source of feedback to the University on the practical aspects of regulatory provision'. While the team agreed with this statement it also considered that the scope for such feedback was limited because the forum had only met twice since January 2008.

119   Research students who represent their colleagues on University committees and forums are offered training by the Students' Union. The representatives have voiced their concern at faculty level at both University student forums that the training offered does not meet their needs in representing research students. Thus far, the concern has not been acted on by the University and the audit team formed the view that the University will want to address this issue quickly to enhance the efficiency of the operation of the student representative system.

120   The audit team found that the University publishes clear criteria for the assessment of research degrees, which are shared with students via their handbook. Examiners of research degree students are approved by both the relevant research student-focused committee at faculty level and the Research Sub-Committee to criteria set out in the research regulations. Examinations are conducted by an independent chair whose role and qualifications are also set out in the research regulations. The team considered that the processes for the examination of research degrees were appropriate.

121   Faculties provide data on research student achievement by interrogating the University's management information system and reporting the findings to the Registrar and Secretary's Office, which collates the data into a single report considered by the Research Sub-committee. The report contains a digest of management information on the profile and progress of research students, grouped according to a range of measures such as ethnicity and disability. The audit team viewed the report as valuable in maintaining oversight of the University's research student population and noted appropriate discussion of its contents at Research Sub-committee.

122   In 2006 the University mapped its research regulations against the *Code of practice, Section 1: Postgraduate research programmes* and made this mapping available to the audit team. Through its examination of University documents the team noted a second, more detailed mapping completed as part of the Annual Audit of Research Degree Programmes (2008-09) and agreed that, in the main, the regulations met the expectation of the precepts of the *Code of practice*. The QAA Review of research degree programmes in 2006 concluded that, overall, the University's management of the quality and standards of its research degree provision was appropriate and satisfactory. These findings were broadly endorsed by the present audit team. However, the team did identify several examples where the practice of research degree provision and management seemed to be inconsistent with the University's stated policies and procedures. These inconsistencies contribute variously to the team's recommendations to the University.

Section 7: Published information

123   The University makes a wide range of information available for prospective students, current students and other stakeholders through its website and in printed form. The Students' written submission and the students that the audit team met indicated general satisfaction with the accuracy of information supplied by the University, which in the main reflected the experiences of students since enrolment.

124   In its Briefing Paper the University stated that 'the creation of subject and programme information is the responsibility of Faculties' and that 'in each faculty there are nominated staff who are responsible for ensuring annually that documentation meets the University requirements and is available to students'. The audit team learnt that the University's requirements exist as templates and that the role and level of the nominated staff vary from faculty to faculty, but that faculty chief operating officers always have a role in the process. Faculty deans, with the support of the appropriate associate deans are ultimately responsible for programme information in the prospectus, though some material in the online prospectus, for example entry requirements, is the responsibility of the Registrar and Secretary's Office (RSO). The Director of Planning and Registry Services within RSO has overall responsibility for the information the University publishes.

125   General information to students is provided in the annual student handbook. The audit team noted content designed to support students in their studies and a strong emphasis on how students could become involved in sporting and cultural activities and in volunteering.

126   In its Briefing Paper the University indicated that it is 'in the process of making all its programme specifications available online' and the audit team was told by the University that approximately 70 per cent had been placed on the internet. Each programme specification contains a web link to more detailed information about the constituent modules of each programme, although an examination by the team revealed that in many cases the web link was inaccurate and did not link to the correct webpage. Equally, the team noted that the University had not yet linked the prospectus or course handbooks to the programme specifications, and so the specifications were not easily available to students or prospective students.

127   In its Briefing Paper the University also indicated its intent that programme specifications were written for 'students, prospective students and external stakeholders' and that programme specifications are produced to a standard template during programme approval. The audit team examined a large sample of programme specifications, including those not yet available online, and concluded that the language used was often of a technical nature that students might find difficult to understand, a position shared by some University staff the team met. The team therefore encourages the University to follow through with its intention of making new programme specifications available to, and readily understandable by, their target audience.

128   Course handbooks for taught programmes are produced to a template specified by the RSO and the University indicated in its Briefing Paper that 'all course handbooks are publicly available through the RSO website'. The audit team noted, however, that a minority of programmes were not represented. The team examined a sample of handbooks and found them to give a good coverage of themes, with generally accurate and useful information about course structure, assessment, student representation and support services available to students. The students the team met indicated their satisfaction with the accuracy and utility of the handbooks. The Briefing Paper also stated that general and assessment regulations are communicated to students through a web link to the relevant pages. The handbooks point out that complaints and appeals information can be accessed via the same web link. The team noted that such links were found in a standardised format across the sample of course handbooks that it viewed, but that the URLs used were, in the majority of cases, inaccurate and so the regulations were not available to some students via this route. The University will want to ensure that its electronic repository of course handbooks is complete and that URLs in handbooks are accurate, enabling students to access information without delay.

129   During the visit the audit team was told that a single method was employed for determining the final degree classification of students and that the method was communicated to students via their course handbooks and through a letter issued on enrolment containing a web link to the relevant information. The team considered it likely that a web link may become inaccurate over the typical three or more years of undergraduate study and could find no evidence of relevant information in the course handbooks it sampled. The team concluded that the University will want to communicate its method of determining final degree classification to students both effectively and in a timely manner.

130   University staff met by the audit team at the briefing visit indicated that the reports of external examiners are shared with students across all faculties through the annual review process during the course review meeting with students. However, at the audit visit some staff indicated that external examiners' reports were not shared with students. A scrutiny by the team of the annual review process, through documentation provided as part of the audit trails, showed that student representatives may be present when the reports of external examiners are discussed, although the team could find only limited evidence to support this as a routine occurrence. Further, the students the team met stated that they had not seen the reports of external examiners. As a result, the team considered it desirable that the University ensures that external examiner reports are shared with students in accordance with the HEFCE publication *Review of the Quality Assurance Framework, Phase two outcomes*, October 2006 (HEFCE 06/45).

131   The audit found that, overall, 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.