

University of Central Lancashire

November 2008

Annex to the report

Contents

Introduction	3
Outcomes of the Institutional audit	3
Institutional approach to quality enhancement	3
Institutional arrangements for postgraduate research students	3
Published information	3
Features of good practice	3
Recommendations for action	4
Section 1: Introduction and background	4
The institution and its mission	4
The information base for the audit	5
Developments since the last audit	6
The institution's framework for managing academic standards and the quality of learning opportunities	6
Section 2: Institutional management of academic standards	8
Approval, monitoring and review of award standards	8
External examiners	9
Academic Infrastructure and other external reference points - standards	11
Assessment policies and regulations	11
Management information - statistics	12
Section 3: Institutional management of learning opportunities	13
Academic Infrastructure and other external reference points	13
Approval, monitoring and review of programmes	14
Management information - feedback from students	17
Role of students in quality assurance	18
Links between research or scholarly activity and learning opportunities	19
Other modes of study	20
Resources for learning	20

Admissions policy	21
Student support	22
Staff support (including staff development)	24
Section 4: Institutional approach to quality enhancement	25
Section 5: Collaborative arrangements	28
Section 6: Institutional arrangements for postgraduate research students	28
The research environment	28
Selection, admission and induction of students	29
Supervision	29
Progress and review arrangements	30
Development of research and other skills	31
Feedback mechanisms	31
Assessment	32
Representation, complaints and appeals arrangements	32
Section 7: Published information	33

Introduction

A team of auditors from the Quality Assurance Agency for Higher Education (QAA) visited the University of Central Lancashire (the University) from 24 November to 28 November 2008 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 institution offers.

Outcomes of the Institutional audit

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

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

Institutional approach to quality enhancement

The audit found that the University has a comprehensive range of activities which constitute a strategic, thorough and effective institutional approach to quality enhancement.

Institutional arrangements for postgraduate research students

The audit found the University's arrangements for postgraduate research students met the precepts of the *Code of practice for the assurance of academic quality and standards in higher education (Code of practice), Section 1: Postgraduate research programmes*, and are effective in securing academic standards and the quality of students' learning opportunities.

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 integrated student support service, known as The 'i', for its accessibility and provision of high quality information, guidance and support for students (paragraph 121)
- the innovative approach to the involvement of students demonstrated in the development and production of the Student's Guide to Assessment (paragraph 143)
- the strategic, project-based approach employed by the Academic Audit Sub-committee, Learning Development Unit and the Business Enhancement Team, which provides an effective model for enhancement across the University (paragraph 144)
- the role of the Centre for Research Informed Teaching in raising undergraduate students' research aspirations, particularly through the Diffusion journal and the Student Intern Scheme (paragraph 145).

Recommendations for action

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

Recommendations for action that the audit team considers advisable:

- review the Academic Quality Assurance manual, Part 1 Appendix 6, section 3, in order to ensure scrutiny of each level of annual monitoring by more than one person within faculty quality frameworks (paragraphs 77 and 78)
- establish a role for current students at faculty level through direct representation at relevant faculty committees, as distinct from the role of student liaison officer employed as a member of staff by the University (paragraph 98).

Section 1: Introduction and background

The institution and mission

1 The University originates from the Preston Institution for the Diffusion of Knowledge, founded in 1828. The Institution became the Harris Institute in 1882 and subsequently the Harris College in 1956, which formed the basis for Preston Polytechnic in 1973, retitled in 1984 as Lancashire Polytechnic. In 1992, the Polytechnic was granted degree and higher degree awarding powers under the *Further and Higher Education Act* and became the University of Central Lancashire. Since 1992, the University has incorporated the Lancashire College of Nursing and Newton Rigg College into its activities.

2 With the establishment of the University of Cumbria in 2007, the University consolidated its location on the Preston Campus and transferred its campuses in Penrith and Carlisle to the University of Cumbria, but retained the Westlakes Research Institute, based in Cumbria. The University plans to open a new University Centre in Burnley in September 2009 as part of the Higher Education in East Lancashire Initiative in collaboration with Burnley College.

3 The University has recently developed new discipline areas for the health sector such as pharmacy and dentistry. It provides courses for the regional nuclear industry and has plans to open a new School of Architecture in 2009. The University also has significant international and regional collaborative partnerships and has established permanently staffed offices in China to support its franchise provision.

4 The University is organised into four faculties: Health and Social Care; Science and Technology; Arts, Humanities and Social Sciences; and Management. Each faculty includes between two and six schools. There is also one pan-institutional school: the International School of Communities, Rights and Inclusion. In 2007-08 just over 32,000 students were enrolled at the University: 27,664 undergraduates; 3,986 taught postgraduates and 384 postgraduate research students.

5 The University's Mission Statement is:

- 'we promote access to excellence enabling you to develop your potential
- we value and practise equality of opportunity, transparency and tolerance
- we strive for excellence in all we do: locally, regionally, nationally and internationally
- we work in partnership with business, the community and other educators
- we encourage and promote research innovation and creativity'.

6 The University's mission is taken forward through its guiding strategic document, the Medium Term Strategy, set in the context of a 10-year strategic vision (A World Class Modern University 2007-2017). This defines 'the three core academic activities of teaching, research and knowledge transfer' as inseparable, focusing the curriculum on 'real-world learning opportunities that support diversity, internationality, employability and enterprise'. The Strategy places great importance on growing the institution's research culture.

7 Implementation of the Medium Term Strategy is underpinned by nine supporting strategies: Student Access; Learning and Teaching; Research; Knowledge Transfer; Employability and Enterprise; Student Experience; Internationalisation; Sustainable Development; and Human Resources. In turn, these are supported by cross-cutting central resource strategies together with faculty delivery strategies. The Corporate Plan, based on the individual implementation plans for each strategy, is used as the key document for reviewing and setting out the University's annual objectives.

8 Faculties take responsibility for the implementation of the Medium Term Strategy, with schools taking responsibility for actions within the faculties. From August 2009 schools will work to their own delivery plans, approved by the Directorate lead. Faculties will continue to oversee the implementation of school plans. In meetings with staff, the audit team heard that this process has led to a high degree of ownership of school plans among staff.

9 A new management information tool is being developed, MooD, which supports corporate planning. The development of MooD will bring together strategy implementation plans and action monitoring, risk registers and key performance indicators to support the Senior Management Team, deans, heads of services and heads of schools. In phase 1, deans responsible for strategy implementation will be able to access their specific implementation objectives, action plans and key performance indicators which will form the basis for their performance statement. In phase 2, the equivalent will be provided at school level and staff will be able to update implementation and actions plans themselves within MooD.

The information base for the audit

10 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 footnotes in the Briefing Paper were 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 audit team had hard copy of documents referenced in the Briefing Paper; in addition, the team had access to the institution's intranet.

11 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.

12 In addition, the audit team had access to recent reports:

- the QAA Review of research degree programmes, July 2006
- the QAA Collaborative provision audit, March 2006
- the QAA Major review of healthcare programmes: University of Central Lancashire and Cumbria and Lancashire Strategic Health Authority and Cheshire and Merseyside Strategic Health Authority, November 2005
- the QAA Overseas quality audit report: University of Central Lancashire and the Fire Safety Engineering College, Oman, May 2005
- the Institutional audit, April 2004.

Developments since the last audit

13 The last Institutional audit in 2004 found that broad confidence could be placed in the University's capacity to manage effectively the quality of learning opportunities of its programmes and the academic standards of its awards. The audit identified a number of features of good practice which the present audit team found had either been maintained or built upon. The University responded to the areas recommended for action by setting up a working party which reviewed and amended administrative and regulatory processes such as the approval of minor changes to taught programmes, the standard University-wide penalties for late submission of work, minimum criteria for feedback on assessed work and requirements for the moderation of assessment. The Learning Development Unit and a Progress File/Personal Development Planning (PDP) Advisory Group strengthened the implementation of PDP across the University through staff development, support for personal tutors, offering related resources and highlighting the importance of PDP to students through 'The Card' and 'The Organiser' (see paragraphs 121 and 126). The team found that the University had taken effective and timely action in response to the recommendations in the previous Institutional audit report as well as those from its other QAA engagements.

14 Key developments since the last audit are the development of the Medium Term Strategy (see paragraph 6). To support this strategy, from August 2008 the University restructured its academic functions based on schools within faculties, thereby replacing the previous departmental structure. Schools are now devolved budgetary units and responsible for their own academic planning, while faculties focus on strategy, performance management and the provision of common services.

15 The University's committee structure was reviewed in 2004-05 with the objective of establishing new committees in 2005-06 which more closely reflect the student life cycle and report the achievement of key University strategies to Academic Board. A new Academic Audit Sub-committee (AASC), established in 2006-07, supports the University's quality assurance and enhancement mechanisms by conducting targeted audits (see paragraph 139).

The institution's framework for managing academic standards and the quality of learning opportunities

16 The Academic Board, chaired by the Vice-Chancellor, holds formal responsibility for determining and assuring academic quality and standards. In 2005, a new Scheme of Delegation for the responsibilities of Academic Board was introduced. Responsibilities are delegated to the following committees: Student Access, Student Experience, Research and Knowledge Transfer (RKTC), Academic Standards and Quality Assurance (ASQAC) and Honorary Awards. The remit and membership of these committees is articulated in the Academic Board and Committee Governance Manual. The Briefing Paper stated that this delegation enables the Academic Board to focus on strategic matters, while receiving assurance reports from these subcommittees on the implementation of its academic strategies.

17 At committee level ASQAC, chaired by the Deputy Vice-Chancellor (Academic), determines and monitors the procedures which assure academic quality and standards of both undergraduate and postgraduate awards. The following panels, subcommittees and groups support ASQAC in discharging its responsibilities: the External Examiner Panel, Academic Regulations Sub-committee, International Collaboration Sub-committee, AASC, and Partnership Planning Advisory Group. RKTC is supported by the University Research Degrees Sub-committee and by the four faculty research degrees subcommittees. The University's approach to the management of research degree programmes is set out from paragraph 150 below.

18 While the management and assurance of quality and standards is significantly devolved to faculties and schools, in order to be located as close as possible to the student experience, the University defines and retains control of its policies and processes. These are set out in the Academic Quality Assurance (AQA) manual which is maintained by Academic Quality and Standards Unit which provides guidance and support for staff.

19 Local interpretation and adaptation of policies and processes by faculties and schools is permitted, provided that overall University policy is not contravened. Appendix 1 of the AQA manual, 'Guidance on Faculty and School Manuals', provides a framework in which schools and faculties can organise themselves. Each faculty and school is required to provide its own manual covering faculty and school organisation respectively, and at school level, in particular, admission, induction and student support procedures, course management, teaching, learning, assessment and research arrangements.

20 Each faculty has a faculty executive team (FET) with reporting responsibilities to all major committees supporting the Academic Board. The Academic Board and Committee Governance Manual indicated that at faculty level, the FET has oversight of four faculty committees: learning and teaching, research, ethics and the quality panel. However, the audit team found that the committee structures in the faculties differ from the description given in the Governance Manual. For example, faculty structure diagrams made available to the team showed that none of the faculties has learning and teaching committees.

21 The Governance Manual does not prescribe school-level committee structures and the audit team was told that the expected minimum is the staff-student liaison committee and assessment boards. In its discussions with senior staff, the team was told that at faculty and school levels, committees mirror the functionality, but not necessarily the title of university-level committees to avoid needless multiplication of committees - the principle being that all functional areas are covered. For some functions, for example, admission and recruitment or student experience, a school has identified a 'lead' person who sits on the relevant faculty committee. The team formed the view that the University will wish to update its Academic Board and Committee Governance Manual to reflect the expectation that detailed committee names may vary at faculty level in accordance with the devolved responsibility and functional approach in order to add greater clarity to the institution's framework for managing academic quality and standards.

22 Based on the evidence provided and its meetings with students and academic and administrative staff, the audit team formed the view that the University's framework for securing academic standards and the quality of learning opportunities across its provision is both appropriate and effective. The recent establishment of schools within this framework was, at the time of the audit, still bedding down. For this reason, the team considered that the University will wish to continue to monitor the degree of flexibility it gives to faculties and schools, notably with respect to the annual monitoring process (see paragraph 77).

Section 2: Institutional management of academic standards

23 The University's quality strategy aims to establish and assure appropriate standards for its awards. The Briefing Paper described the University's institutional quality assurance framework as incorporating, in particular, the use of external reference points, the course approval process, annual monitoring, periodic review and revalidation of courses, institution-wide academic regulations and the use of external examiners and their reports. Some of these elements are also closely associated with academic quality and, while being considered in this section in relation to academic standards, will also be covered later under the heading of institutional management of learning opportunities.

Approval, monitoring and review of award standards

Approval

24 For on-campus provision, responsibility for the management of the course approval process is devolved to faculties, with the Academic Standards and Quality Assurance Committee (ASQAC) maintaining oversight of validations undertaken annually. The process has two stages: Stage 1 being internal to the faculty, and essentially developmental to assist course teams to refine their proposals; and Stage 2 comprising a formal validation event. A report of the outcome of Stage 1 must be presented at Stage 2.

25 All new taught programmes must be validated using the process in the Academic Quality Assurance (AQA) manual which incorporates the Course Developer's Guide. Teams are required, in designing the course, to refer to the University's Academic Regulations to ensure that the most appropriate level of target award is chosen and that the design of the course takes account of the requirements of that award. Teams are also required to consider how the course content needs to respond to subject benchmark statements and the *Code of practice*, published by QAA. The audit team viewed a range of validation documentation which confirmed that these matters were addressed.

26 Stage 1 panels comprise staff drawn from across a faculty. Faculties are required to provide evidence of the satisfactory operation of Stage 1 to the Stage 2 validation panel in a written report. This must cover matters including compliance with the Academic Regulations, resources, congruence with University strategies, for example, on admissions, learning, teaching and assessment, and the accuracy and consistency of the documentation, programme specification, student handbook and module descriptors. While the Stage 1 documentation provided to the audit team demonstrated scrutiny of these matters by Stage 1 panels, the sample of recent Stage 2 reports available to the team did not formally record receipt and consideration of Stage 1 reports.

27 The AQA manual provides that the Stage 2 event must entail scrutiny by a validation panel made up of academic staff internal and external to the University and, where appropriate, a representative from industry or a professional, statutory or regulatory body (PSRB). External members are nominated by the head of school, who is responsible for ensuring sufficient expertise and independence in accordance with institutional guidelines on the appointment of external advisers. Nominations must be approved by the dean of faculty and are forwarded to the Academic Quality and Standards Unit (AQaSU). The audit team was able to confirm appropriate externality on Stage 2 panels including, in numerous cases, external advisers from industry, PSRBs and other external bodies, in addition to academic external advisers. For Stage 2, internal panel members are drawn from University review panels (URPs). Each faculty has a URP consisting of a pool of 20 to 30 members external to the faculty who are selected annually from nominations made by deans and heads of school. A student representative may be included. Current URP panel membership lists and the panel membership lists set out in validation reports confirmed that the University's course approval process incorporates appropriate scrutiny from outside the faculty.

28 The audit team concluded that the University's validation procedures and their implementation were comprehensive and robust, include appropriate participation by independent externals, and contribute effectively to the setting, defining and maintaining of academic standards.

Annual monitoring

29 Annual monitoring is designed to ensure that the academic standard of awards and the quality of the learning experience are maintained. The annual monitoring process, which is described more fully later in relation to the management of learning opportunities (see paragraphs 73 to 78), comprises reporting at course, school and faculty levels, faculty reports and annual overview reports by AQaSU being considered at special monitoring meetings of ASQAC.

30 The audit team viewed samples of course, heads of school, faculty and institutional annual monitoring reports and was able to verify that there was detailed consideration of external examiner feedback, which covers a range of academic standards matters, at each stage of the process.

31 From the evidence provided, the audit team concluded that the University's annual monitoring processes were sufficiently robust to secure and maintain academic standards.

Periodic course review and revalidation

32 The University's five to six-year cycle of periodic course review and revalidation of courses (PCR) is managed by AQaSU. Its objective is to review the standards and quality of a school's provision. PCR is undertaken by a panel drawn from the URP, plus two externals. As for validation events, external members, who must have sufficient expertise and independence in accordance with institutional guidelines, are nominated by the head of school and approved by the dean of faculty.

33 External subject specialists are asked to report specifically on the appropriateness of standards set at each level, and the PCR process also incorporates externality through scrutiny of external examiner reports and full responses for the previous three years. From the audit trail documentation, the audit team was able to verify that these requirements were being implemented.

34 On the basis of the evidence provided, the audit team concluded that the University's approval, annual monitoring and review processes, and their operation, contributed effectively to the securing and to the effective management of the academic standards of its provision.

External examiners

35 The University's Academic Regulations identify the core functions of its external examiners as external verification and moderation, at level 2 (Intermediate level) and above. External verification includes verification of the overall assessment strategy and all examination questions as well as negotiation with the school regarding the balance of assessment types. External moderation is based upon a representative sample of work negotiated between the examiner and the head of school. External examiners are required to attend end-of-year award boards. The AQA manual provides detailed information on the operation of the external examiner system, covering selection and appointment, induction documentation, role and duties, termination of appointment, external examiner reports and the role and remit of the External Examiner Panel.

36 Nominations for external examiner appointments are made by heads of school and are checked by the relevant faculty against University criteria prior to approval by the dean on behalf of ASQAC. Proposals supported by the dean but not meeting the criteria are referred to the External Examiner Panel, which makes a recommendation to the Chair of ASQAC, for final decision. The AQA manual sets out clear guidance on the factors to be taken into account in such cases. Once appointed, external examiners receive a briefing pack and are invited to attend a briefing event. The audit team viewed documentation from a recent briefing event and noted the comprehensive coverage, notably of the Academic Regulations, the external examiner role, the

Banner system (the University's central database) and the operation of the external examiner system. The sessions were also accessible online through podcasts.

37 The role of Institutional External Examiner (IEE) was established by the University in 2006. The IEE's role is to comment on the University's annual overview report of external examiners' reports and to advise on the operation of the external examiner system and on issues relating to the Academic Regulations. On the basis of the IEE reports for 2006-07 and 2007-08, the audit team concluded that this role makes a valuable contribution to the University's external examiner system.

38 A feature of the University's external examining process that was commended in the 2004 Institutional audit report was the categorisation of external examiner recommendations within the report as 'essential', 'advisable' or 'desirable'. This allows AQaSU to prioritise issues requiring immediate response. Heads of school, who are responsible for responding to the external examiner and for taking any necessary action, are required to respond to the external examiner immediately (that is, within two weeks) regarding 'essential' concerns, with either a full response/explanation or with a date by which a full response might be expected, and copy that response to AQaSU. For the 2006-07 academic year, the audit team noted that, of the 43 reports containing 'essential' recommendations, 10 received a response from the respective head of school within the required timescale. The remainder received responses up to four months after the receipt of the reports, save for three responses that were still outstanding as at February 2008. The team was provided with figures for 2007-08, which indicated that at the time of the audit all the 45 external examiner reports containing 'essential' recommendations and for which the response deadline had passed had received responses, 18 responses having been received within the required timescale. Acting on ASQAC resolutions of 2006 and 2008, AQaSU sent reminders to heads of school concerning the requirement, together with a standard 'holding letter' to facilitate the process. The University will wish to continue its efforts to improve further the timeliness of responses to essential recommendations made by external examiners.

39 The implementation of internal verification and moderation procedures in some courses and some schools gave rise to 'essential' recommendations in external examiner reports for 2005-06 and 2006-07. In 2006-07 the IEE commented on the need for greater consistency in the application of the Academic Regulations relating to internal verification and moderation. In 2007-08, while reiterating that 'this is not in any way a widespread issue at the University', the IEE noted that the absence of evidence of verification and moderation having taken place in some courses and some departments was once again highlighted as a key recommendation in the AQaSU annual report summarising the institutional issues raised within external examiners' reports. Acting on ASQAC resolutions of 2006, 2007 and 2008, AQaSU asked schools to ensure they demonstrate that the relevant processes were being adhered to. For the 2007-08 academic year, the audit team saw evidence of a reduction in the incidence of adverse external examiner comment regarding internal verification and moderation, demonstrating that progress is being made by the University in this area.

40 The audit team saw evidence of appropriate consideration of external examiner reports at various levels. Course annual reports and heads of school annual reports recorded analysis of, and response to, external examiner comments; for example, improvements to the administration of despatch of scripts and extension of the marking range at the higher end. AQaSU produces an annual summary of institutional issues raised within the external examiners' annual reports for presentation to ASQAC. The 2008 report, viewed by the team, analysed external examiner feedback by faculty, was comprehensive and evaluative and reported on loop-closing in relation to matters raised the previous year. The AQA manual expects schools to share external examiner comments (as a minimum the recommendations and section 7 of the external examiner's report and the good practice) with students at staff-student liaison committees or equivalent, and that the institutional summary of external examiner reports is shared with the Students' Union. From student and staff comment in meetings with the team, it appeared that students had access to external examiner reports, although it was unclear whether the entirety of the reports was shared with students.

41 The audit team concluded from the evidence provided that the external examiner system is robust and rigorous, fully supporting the University's approach to securing and maintaining academic standards.

Academic Infrastructure and other external reference points - standards

42 The Briefing Paper stated that the Academic Infrastructure is embedded in the University's quality assurance procedures. It referred to *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ) as a key reference point for review of the Academic Regulations, to the confirmation of alignment with the FHEQ incorporated into course validation and review procedures, to the mapping of the *Code of practice* against University practice, and to the use of subject benchmark statements and PSRB requirements in programme specifications.

43 For the validation of courses, the Course Developer's Guide requires course teams to refer to the Academic Regulations which, it indicates, incorporate the FHEQ; to consider how course design and content needs to respond to the *Code of practice* and subject benchmark statements and other external reference points, such as employers and PSRBs; and to use the programme specification as a tool early in course development. The University has a standard programme specification template, approved by ASQAC, and has produced guidance notes on developing and completing programme specifications. Stage 2 validation panels are required to address issues relating to academic standards against threshold criteria for validation. The range of validation documentation viewed by the audit team confirmed that the various requirements were being met.

44 In PCR, the audit team noted that external subject specialists reported, as requested, on the academic standards set at each level, with reference to the FHEQ and their experience of similar awards elsewhere; the extent to which the aims and outcomes of the programme articulate with the relevant subject benchmarks; and the extent to which the assessment strategy allows learning outcomes to be appropriately tested at module and course level.

45 Early in 2008, the University initiated a project on awards and assessment aimed at delivering a suite of improvements to the awards and assessments capabilities within Banner to ensure adherence with Bologna Principles, including the regulations for a European Diploma Supplement. The project was due to complete in December 2008. The audit team also noted that the recommendations of a University Working Group in response to the final reports of the Burgess Group had been approved by the Academic Board.

46 The audit team found that the University was making effective use of the Academic Infrastructure and other external reference points in relation to the academic standards of its awards.

Assessment policies and regulations

47 Assessment must be conducted according to institutional policies and procedures and in line with the University's Academic Regulations. The Academic Regulations Sub-committee (ARSC) is charged with considering and consulting on any changes to the Regulations, and the audit team noted examples of matters arising from external examiners' reports being directed to ARSC for action.

48 The Academic Regulations set out the principles of assessment practice, which require internal and external verification and moderation, and devolve responsibility for the definition of some of the detail of the internal processes to schools. School manuals must provide local guidelines for markers (marking criteria, arrangements for supervision of projects/dissertations) and internal verification and moderation procedures (checking of examination questions and coursework assignments before issue to students, checking of completed work, marking process and the role of the second marker). The audit team viewed a sample of school manuals and found that these met University requirements.

49 In other areas of assessment policy, the Academic Regulations set out detailed rules, requirements and procedures, for example, on the composition and responsibilities of assessment boards; assessment arrangements for students with disabilities; operational procedures for extenuating circumstances; penalties for late submission of work; and unfair means to enhance performance and academic appeals. At the time of the audit, some of these areas were undergoing review by the Academic Audit Sub-committee. An academic audit of extensions to deadlines and the late submission of work was exploring the consistency of approach by schools, any ways in which electronic means could expedite the process for granting extensions and assist consistency, and how well a newly introduced shorter penalties timescale for late submission of assessed work had been embedded. A separate academic audit was exploring whether the procedures for dealing with special circumstances were working effectively and fairly across the institution.

50 Students who met the audit team commented positively on the assessment information provided to them in module information packs/guides and module descriptors. They confirmed that they had clear information on assessment requirements and on what was required to obtain marks, describing feedback on their assessments as helping them to improve their work. Students stated that the 15-day turnaround target for marked work was generally met. They confirmed that they received the range of necessary information, for example, on marking schemes, submission deadlines and plagiarism. Students have access to additional information in the Student's Guide to Assessment (see paragraph 143).

51 The audit team concluded that the University's assessment policies and regulations made an effective contribution to the institutional management of academic standards.

Management information - statistics

52 Student data is collected centrally on the Banner database and standard reports can be produced both centrally and locally. All faculties have a faculty information officer who can extract reports on admissions, progression, achievement and completion for use locally, and provides statistics to module and course leaders and the faculty for the annual monitoring process. These reports also form part of the institutional-level statistical reports prepared for University committees including the Student Experience and Student Access Committee. The audit team saw an example of institutional level reporting in the Retention Analysis for 2007-08, prepared by the Student Affairs Service for the Student Experience Committee. This incorporated comparative analysis by faculty and, addressing its outcomes, faculty action plans for the following year. Faculty information officers also provide bespoke reports, for instance for investigating student deferral of studies and impact assessments. In discussion with staff, the team heard of examples of the use of data as indicators of matters requiring further investigation, for example, modular performance, student deferral and the needs of students at risk of academic failure.

53 As part of annual monitoring the course level report pro forma requires commentary on the data provided. The head of school report template requires evaluation, confirmation of appropriate action taken to address issues, and any cross-course patterns in recruitment, entry profile, progression and completion rates. The course reports viewed by the audit team included commentary and evaluation, with reporting on actions taken and planned in response to data analysis. Head of school reports analysed data on student numbers, progression and retention, and set out the ways in which the issues identified were to be addressed.

54 The Briefing Paper stated that the University had made considerable progress over the past four years in terms of the provision and use of statistical management information. While endorsing this view generally, some faculty reports for 2006-07, which were the most recent available at the time of the audit, recorded continuing difficulties, such as the inability to produce standard reports on individual combined honours subjects, the constraints of recording student progression information in Banner, and the difficulties experienced by course leaders in interpreting the Banner data reports.

55 In March 2008, the University initiated the Pulse Project, which aims to evaluate the information needs of heads of school and develop an information service that supports them in the delivery of their academic plans, thereby contributing to the achievement of the Medium Term Strategy. The key information to be provided relates to staff, students, finances and performance. At the time of the audit, the first of the three project phases had been completed, with the establishment of the management information portal and the delivery of 'engaging with data' training for heads of school. Later phases will extend capability to include access to more on-demand student reports, to finance and staff data and to discussion forums. Feedback from participants in the training indicated that the project had been extremely positively received.

56 The audit team found that, overall, the University's approach to and use of management information contributed effectively to the management of academic standards.

57 The audit team concluded that confidence could be placed in the soundness of the institution's current and likely future management of the academic standards of its awards.

Section 3: Institutional management of learning opportunities

58 The Medium Term Strategy is the University's strategic guiding document. Supporting the Strategy, the key institutional academic strategies - the Learning and Teaching Strategy, the Student Experience Strategy, the Employability and Enterprise Strategy and the Internationalisation Strategy - provide focus for the delivery of the student experience. Each strategy is underpinned by an implementation plan delivered by faculties, schools and services. The quality of learning opportunities is managed through the same structures and procedures as academic standards.

Academic Infrastructure and other external reference points

59 The *Code of practice* was mapped against University practice on first publication, and is revisited by the Academic Quality and Standards Unit (AQaSU) as sections are revised. It was clear from the relevant institutional documentation that the University had given due consideration to the *Code of practice* in the development of its quality management procedures and that review of processes was undertaken in the light of relevant sections of the *Code*. Amendments to the Academic Regulations and the Academic Quality Assurance (AQA) manual, as well as the scoping, coverage and outcomes of academic audits demonstrated that the University is mindful of its responsibilities in this respect.

60 Programme specifications, which are regarded as a key tool in course approval and review and must be produced within a standard University template, make reference to relevant subject benchmark statements, professional, statutory or regulatory body (PSRB) requirements and occupational standards. The University's guidance notes on developing and completing programme specifications set out the details of the information required, including programme aims and learning outcomes, teaching, learning and assessment methods, awards and credits and, where relevant, external accreditation.

61 In designing courses, teams are required to consider how the course design and content needs to respond to relevant subject benchmarks, the *Code of practice* and to external reference points such as PSRBs, the needs of local employers and industry. The audit team noted, in particular, the requirement to address the diverse range of students recruited and, specifically, to give consideration to the assessment strategy across modules to anticipate where adjustments may be necessary for students recruited with a disability or learning difficulty. The Course Developer's Guide requires Stage 2 validation to address how the intended learning outcomes for the course relate to external reference points, including relevant subject benchmarks, the FHEQ and any professional body requirements, and periodic course review (PCR) processes include consideration of programme specifications, external review reports and actions taken in response. In reviewing the range of validation and PCR documentation available, the team was able to confirm that, in the operation of these procedures, the required elements were being addressed.

62 The audit team found that the University was making effective use of the *Code of practice* and other external reference points in the management of students' learning opportunities.

Approval, monitoring and review of programmes

63 The Briefing Paper stated that a key feature of the University's approach to quality assurance is that responsibility is located as close as possible to the student experience. Accordingly, the University has, where appropriate, devolved operation of processes to faculties, while retaining control of the essential principles, policy and procedures for quality management, as set out in the AQA manual.

Approval

64 The Course Developer's Guide, contained in the AQA manual, sets out fully and clearly the key principles to be considered in programme design, the criteria for approval and the documentary requirements. A set of threshold criteria for validation draws together the core elements: course aims and learning outcomes; assessment; curriculum design and content; teaching and learning; student progression; student support and guidance; learning resources; and quality management and enhancement.

65 For the approval of distance-learning programmes, which is managed by AQaSU rather than by faculties, validation panels are required to explore a range of supplementary issues. These are contained in the threshold criteria for distance-learning provision and include an extensive list of detailed questions covering the wide range of issues associated with this mode of delivery. Design teams must provide a sample of the distance-learning material to be employed, for both paper-based and electronic delivery, together with a clear and definitive action plan indicating who will be responsible for completing the remaining materials. Extensive supplementary threshold criteria must be satisfied also in relation to Foundation Degrees. The sample of validation reports viewed by the audit team demonstrated appropriate consideration of the documentation and application of the threshold criteria.

66 The Briefing Paper indicated that, for validations and revalidations from 2007-08, course teams have been asked to consider the extent to which the embedding of the three 'curriculum themes' of employability and enterprise, internationalisation and sustainable development can be achieved within the curriculum. The audit team was provided with a sample recent validation report which recorded discussion of all three curriculum themes and the course team's clear response to the University's Medium Term Strategy.

67 As already noted in paragraph 27 above, internal members of Stage 2 panels are drawn from faculty University review panels (URPs). URP chairs and vice-chairs are appointed from experienced URP members. Chairs, vice-chairs and new panel members are briefed by the Head of AQaSU before taking office and members' roles and responsibilities are set out very fully in a briefing pack. The student representative is briefed by AQaSU. In addition, there is an annual briefing for URPs, and the Chair of the Academic Standards and Quality Assurance Committee (ASQAC) and URP chairs and vice-chairs hold regular meetings. The University views URPs as a significant strength of its validation process. This view was supported by the evidence available to the audit team.

68 While the Course Developer's Guide refers to the possibility of student representation on validation panels, this did not appear to be a University requirement. Of the sample of validation reports seen by the audit team, one included student panel membership by the Students' Union Education Officer. The team heard from staff that students are invited to validation meetings and that the Students' Union Education Officer is encouraging other students to support her in attending validations.

69 The outcome of the validation process may be approval with or without conditions and/or recommendations or non-approval. Fulfilment of recommendations is reported through annual monitoring, and a section is included in the course-level reporting template for this purpose. The audit team noted that one recent faculty report recorded that the response to validation/review recommendations in annual monitoring reports had been 'patchy'. Response to any conditions is considered by the chair of the validation panel who signs them off, as appropriate. On the basis of the sample documentation available at the audit, the team concluded that the sign-off process was working effectively.

70 The audit team explored the application of the academic regulation which prohibits the enrolment of students on programmes with outstanding academic conditions. The team learned that this provision referred to a discontinued practice of distinguishing between 'academic' and 'administrative' conditions in validation reports: a course with outstanding 'administrative' conditions might be allowed to recruit but not if there were outstanding 'academic' conditions. It was explained that this distinction no longer existed in validation reports but the convention remained that only where the student experience will not be affected could a course be allowed to recruit where conditions were outstanding. However, such conditions would not be waived but must still be signed off by the validation chair. The University will wish to review the relevant provision of the Academic Regulations to ensure that current institutional practice concerning outstanding validation conditions clearly aligns with its Academic Regulations.

71 Institutional oversight of the validation process is maintained through annual reporting on the outcomes of validation events. AQaSU prepares a report for ASQAC, compiled from individual faculty reports. The audit team viewed the 2007-08 faculty annual reports on the outcome of devolved validation events. These were full and evaluative. The 2007-08 AQaSU report drew on these reports, providing a summary of salient issues and addressing areas for further consideration. Such matters are also discussed at URP chairs and vice-chairs meetings.

72 On the basis of the evidence available, the audit team concluded that the course approval process was operating satisfactorily.

Annual monitoring

73 In its Briefing Paper, the University referred to the annual monitoring process as the opportunity to evaluate and improve course quality and to identify and disseminate good practice. The AQA manual sets out the key elements of annual monitoring; the process being described in more detail in guidance notes produced by AQaSU. Annual reports must be produced using a standard University template. Course, school and faculty action plans include matters that can be addressed at each respective level, other matters being referred up to the next level.

74 Good practice items are collated from school and faculty reports and discussed at a meeting between the heads of AQaSU and the Learning Development Unit (LDU), chairs of faculty quality groups and faculty learning and teaching coordinators. The audit team saw details of the 2008 meeting, which covered topics such as personal development planning, personal tutoring and active learning approaches. Service issues identified in faculty reports are discussed in meetings between the Deputy Vice-Chancellor (Academic) and service heads. Faculty annual reports are considered by ASQAC, which also receives the AQaSU report on emerging issues, recommendations and potentially transferable good practice, and the AQaSU progress report on institutional recommendations identified within faculty action plans.

75 The audit team viewed a range of course, school and faculty annual monitoring reports. These used the University's standard templates and included full and evaluative commentary, reporting on progress on the previous year's action plan and providing action plans for the following year. Course reports drew on course statistics, student feedback, course team feedback and external examiner reports, and covered a range of other areas such as learning resources and

collaborative arrangements. School reports incorporated an overview of school provision, with associated action plans. Faculty reports included detailed action planning for issues to be addressed by the faculty, services and the University, respectively.

76 The AQA manual Part 1, at Appendix 6 section 3, provides that the course leader is responsible for producing the annual course report, based on a review of the operation of the course by the course team. The manual further provides that the head of school will receive and consider all course reports and prepare a report for the faculty, and that 'the mechanism for consideration of the head of school's report within the school and by the faculty will be in accordance with each faculty's quality assurance procedures'. Similarly, the AQA manual provides that the dean of faculty will receive and consider all heads of school reports, and other reports as required by the faculty's annual monitoring process.

77 It was apparent from the most recent set of four faculty annual monitoring reports available, for 2006-07, and from the most recent faculty manuals viewed by the audit team that the respective faculty annual monitoring processes differed. The team considered this to be entirely appropriate within a system in which the University has, where appropriate, devolved operation of processes to faculties. The team also considered it appropriate for distillations of a multitude of lower level reports to be written by one person. However, the AQA manual does not explicitly require every level of annual monitoring to be scrutinised by more than one individual. In this regard, while the team was able to establish that, in practice, heads of school reports were scrutinised by faculty quality groups or their equivalent, it appeared that the respective faculty annual monitoring processes did not consistently require similar collegial scrutiny of annual course/subject reports. For example, the annual reporting process described in the Faculty of Health monitoring report for 2006-07, and specified in the relevant faculty manual, did not incorporate scrutiny of course/subject-level annual reporting by more than one person. Rather, under the faculty's processes as described, heads of school alone reviewed and quality assured all the course level reports and action plans, subsequently producing the school's annual monitoring report.

78 The audit team formed the view that, under the current provisions of the AQA manual, the scrutiny of an entire level of annual monitoring could be undertaken by a single individual. The team concluded that the lack of a specific requirement for collegial scrutiny of all levels of annual monitoring carried a risk that faculties and the University could place their reliance on individuals, rather than on a group of school or faculty staff, and that this had the potential to reduce the rigour and consistency of the annual monitoring process. The team therefore recommends that it is advisable for the University to review the AQA manual, Part 1 Appendix 6, section 3, in order to ensure scrutiny of each level of annual monitoring by more than one person, within faculty quality frameworks.

Periodic course review and revalidation

79 Until 2004, the University had a process of periodic evaluation, which reviewed not only the standards and quality of a department's provision and undertook revalidation, but also considered the alignment of the provision with institutional strategic goals and planning. In order to make the process more effective and to reduce the heavy workload of the URP, a revised process was introduced in 2004-05 separating the two functions. Under the current system, School Review, conducted by faculties, considers the school as an organisational unit, followed by periodic course review (PCR), comprising the review and revalidation of courses by the URP.

80 An audit of Departmental Review (now School Review, a term which is used in the remainder of this section) by the Academic Audit Sub-committee (AASC) in 2007 explored effective linkage between School Review and PCR; the usefulness of reports in evaluating school effectiveness, and potential overlap with other monitoring processes. The report recommended the retention of the process with a number of amendments, mainly concerning the provision of clearer guidance on the purpose and operation of the process, notably to ensure that School Review and PCR do not overlap. In this regard, the audit team noted that the School Review

process covers areas of potential overlap with PCR, for example, teaching and learning. At the time of the audit, the University had established timelines for the initiation of a review of the process in the light of the recommendations of the AASC report.

81 The Briefing Paper described PCR as a significant element in the University's management of learning opportunities. The process, which is managed by AQaSU and entails review and revalidation of courses within a school's portfolio, is fully and clearly set out in the AQA manual. PCR incorporates an initial documentary evidence check by the panel chair and at least one other panel member, to ensure that the courses meet University and external body requirements, and to identify the courses, excluding those in their first or second year of operation, that they consider ought to be reviewed in depth. The various stages include planning meetings between AQaSU, the school and the URP chair; the pre-visit documentary evidence check; reports on the pre-visit document review by external subject specialists and internal panel members, used in drafting the agenda for the meetings with course teams; and the review event, which includes meetings with students. The evidence base includes documents for the previous three years, such as annual reports and external examiners' reports, as well as core documents and information such as programme specifications, module descriptors, external review reports and statistics.

82 In the audit trail documentation, the audit team was able to view the range of documents relating to the courses reviewed in depth for the respective PCRs. This was comprehensive and met the documentation requirements laid down by the AQA manual, including the completed pre-visit documentation review reports from external panel members. The post review reports were evaluative, demonstrating consideration of curriculum, assessment, professional body requirements where appropriate, teaching and learning, student progression and achievement, student support and guidance, learning resources and features of good practice. There was evidence that review conditions had been met and signed off. The team was able to verify that institutional oversight of the PCR process is maintained through annual reporting by AQaSU to ASQAC, informed by faculty annual reports on any reviews undertaken within the reporting period. The team formed the view that the periodic course review process was sound.

83 Overall, the audit team found that the University's processes for approval, monitoring and review of programmes support the management of the quality of students' learning opportunities.

Management information - feedback from students

84 Student opinion was described by the Briefing Paper as an essential component of quality assurance, students playing a critical part in the development, evaluation and enhancement of academic provision and the wider student experience.

85 At module level, the University requires feedback to be collected through a module evaluation questionnaire (MEQ), in either paper-based or electronic form, the outcomes of which are fed into the annual monitoring process. The AQA manual provides an MEQ template, together with guidance notes for staff incorporating a requirement for schools to set out their arrangements for the operation of the MEQ scheme in the school manual. The school manuals viewed by the team included this information. Students are also able to have their voice heard through student representation in staff-student liaison meetings.

86 Annual course and heads of school reports seen by the audit team addressed student feedback from MEQs and staff-student liaison meetings, with actions taken or to be taken in response, for example, changes to programmes such as movement of modules to different levels, streamlining of assessment requirements and curriculum changes. However, some module-by-module analysis of MEQ outcomes included in the audit trail documentation suggested that MEQ feedback had not been obtained in a number of modules during the period covered by the review. The audit team also noted that one faculty quality group recorded in May 2008 that the MEQ response rate had dipped lower than the previous year, with no response rate at all in a large number of modules.

87 The University uses the results of the National Student Survey (NSS) to measure performance against the sector top quartile, undertaking a detailed analysis of the University's data at both institutional and school level. Issues are identified and an institutional action plan drawn up, schools also being expected to address issues through the production of their own action plans. The audit team viewed a sample of school action plans, which incorporated analysis of issues arising from the NSS and precise and detailed actions. Similarly, the University provides an institutional overview of both the academic and service related results of the (internal) student satisfaction survey, breaking down academic results by school to allow for more detailed analysis and enable schools to respond to the issues identified as most pertinent.

88 At the time of the audit, two institutional reviews concerning student feedback were being undertaken. In September 2008, the AASC was tasked to consider the use and overall effectiveness of staff-student liaison committees, and a review group led by the Dean of Academic Development had been formed to identify and evaluate current mechanisms for student feedback.

89 The audit team concluded that the University was making effective use of student feedback within its institutional management of learning opportunities.

Role of students in quality assurance

90 At university level, student representatives are members of key University committees including the University Board, Academic Board, ASQSC, Student Access Committee and Student Experience Committee. The Students' Union Executive has regular meetings with the Senior Management Team. This meets in two modes to address either strategic developments or issues. Minutes of these meetings showed student involvement in key strategic discussions, the implementation of quality assurance actions, and student concerns such as the library refurbishment.

91 At faculty and school level the management and assurance of quality and standards is carried out within a framework as defined by the AQA manual and in particular the 'Guidance on Faculty and School Manuals'. Within this framework, committee structures are designed to meet local requirements and there are therefore varying structures across the faculties and schools. This also relates to student representation at these levels. There is no requirement for student representation on these committees although the Guidance Manual states that its minimum content should include 'Arrangements for student representation on committees'. The audit team was unable to identify student attendance in the examples provided. The University has introduced the role of student liaison officer (SLO) to facilitate the course representative system and to be a bridge between staff and students by sitting on faculty-level committees and coordinating course representatives. SLOs are current students on placement or are recent graduates of the University. The Students' Union emphasised that these were not elected student representatives but paid members of staff.

92 The AQA manual refers to student representation below university level taking place at course level. From the evidence that the audit team saw in faculty and school manuals, student representation at course level was designated as membership of staff-student liaison committees.

93 The audit team did see evidence of students included in both university and faculty-level working groups, including the Learning and Teaching Strategic Management Group and a School's Placement Joint Working Group.

94 Training for student representation focuses on being a course representative and presenting student feedback at staff-student liaison committees. It is provided by the Students' Union and by faculty SLOs and there is a clear and comprehensive guide, the Course Representative Handbook. The University supports the system and recognises it through the award of 'Star Reps' at an annual Course Reps Awards Night.

95 SLOs' role is to attend staff-student liaison committees and to take forward any issues within the faculty. The audit team found that this role was effective in supporting students (see also paragraph 125) but queried the role as a student representative, given that the SLO is an employed member of staff.

96 The AQA manual states that URPs for validations can 'possibly' include a student representative. However, faculty manuals seen by the audit team did not consistently suggest student membership. Evidence provided to the team showed that student representation was not consistent on validation panels. The Students' Union Education Officer does attend on some occasions but the team was told that due to the high number of validations, it was more likely that a contribution would be made by written correspondence.

97 The AQA manual does not include student representatives in its guidance for membership of PCR panels. However the audit team did see an example of student representation at a PCR so, in practice, they may attend. Academic panel members receive training for validation and PCR activities. Student representatives are not included in this training, but AQaSU meets annually with the Students' Union Education Officer to discuss participation in validation and PCR events and provides a briefing paper on the role.

98 The audit team found that the University ensures student representation on key University committees and on a range of working groups. At faculty and school levels the team concluded, however, that opportunities for students to participate directly in the quality management processes could be increased, and considered this to be especially important in the context of devolved responsibilities for quality assurance. The team therefore recommends that it is advisable that the University establishes a role for current students at faculty level through direct representation at relevant faculty committees, as distinct from the role of student liaison officer employed as a member of staff by the University.

Links between research or scholarly activity and learning opportunities

99 The University proposes in its Medium Term Strategy to be research active through increasing the numbers of staff engaged in research and by linking research activities to student learning. Several supporting strategies underpin this aspiration.

100 The Human Resources Strategy aims for all academic staff to be engaged in research or knowledge transfer by 2012, and its implementation plan will ensure its achievement through activities such as funding for staff to take sabbaticals and secondments. The Information Strategy focuses on information technology (IT) and includes the provision of 'research-targeted technologies'. Its implementation plan includes a 'specialist support service' to support researchers. Further resources will be available in the proposed new area in the library for staff research.

101 The Learning and Teaching Strategy, coordinated and implemented by LDU, emphasises that research should inform and enrich teaching and learning, and that by 2012 final-year undergraduate and all postgraduate modules should each have a research-related component. LDU develops and monitors the Learning and Teaching Implementation Plan. This has included the establishment of a Centre for Research Informed Teaching in 2007 (see also paragraph 145). Its aims are to support links between research and teaching, support pedagogic research and give undergraduates experience of research. The Centre also promotes links between teaching and research through its granting of Harris Awards in Excellence for Research Informed Teaching.

102 LDU also manages various HEFCE funding streams which are used to contribute to the development of a teaching-research nexus at the University. The University has also been awarded funding to set up a Centre for Excellence in Teaching and Learning. This is the Centre for Employability through the Humanities (CETH). Its research strategy includes promoting research informed teaching, and supporting pedagogic research in the humanities. Research is linked into teaching through a range of modules that embed employability in their curricula.

103 The impact of research and scholarly activity on the curriculum is addressed at the validation and PCR process. The Course Developer's Guide suggests that validation panels should investigate how research informs the course.

104 The audit team found that the University has developed a number of approaches that will contribute towards realising its aim to link research and scholarly activity to students' learning opportunities.

Other modes of study

105 The Briefing Paper referred to the small number of distance-learning programmes offered by the University: AQaSU manages these validations with additional criteria being applied. Resources for off-campus delivery are checked by the dean of faculty and a course resource audit form is completed for validation.

106 There are considerably more courses delivered through blended learning. The Learning and Teaching Implementation Plan provides staff with support to develop flexible means of delivering programmes. For those programmes that utilise IT, the University has integrated e-learning within the information and learning and teaching strategies but it will take cognisance of the new HEFCE e-Learning Strategy in any further developments. The Information Strategy includes developing further mobile services to enable off-campus access. Schools are contributing best practice case-studies to LDU, and schools will be supported to develop local e-learning objectives and action plans as part of school learning and teaching plans. Individuals and faculties will be given support by LDU to implement the University's e-Learning Strategy.

107 The LDU offers support for staff delivering e-learning. Its website offers a range of support to staff. For those embarking on e-learning, their starter pack provides advice on good practice in blending traditional learning with e-learning. LDU also offers funding through e-learning development projects. These support faculties in developing programmes with either full or partial online study. One such project relates to an off-campus delivery base. The University provides students with access to programme materials via its virtual learning environment, 'elearn' and there is email support for students studying off-campus including while on placement. There is as yet no institutional policy on the materials that courses should make available electronically.

108 The audit team found that the University's developments in e-learning make an effective contribution to the quality of students' learning opportunities.

Resources for learning

109 The Medium Term Strategy addresses the University's commitment to provide students with an outstanding experience in terms of teaching, learning and support. In particular it focuses on providing exceptional facilities and an emphasis on IT and communication systems. There are plans to create a coordinated IT infrastructure that will be location-independent for both learning and research and to further develop e-learning methods of delivering curricula. These plans are articulated in the Information Strategy, Learning and Teaching Strategy and the Estates Strategy and their implementation plans.

110 A key structural change to support the implementation of these strategies has been the decision to bring together the Library and Learning Resources Service and the Information Systems Service to create a new Learning and Information Services in 2008. This centralising of resources has provided students with increased access to integrated facilities. The Information Strategy and its Implementation Plan highlight the University's commitment to ensure that students have access to advanced levels of technology in their learning environment.

111 The refurbishment of the library has been a focus for the Learning and Teaching Implementation Plan. The audit team was informed that there was considerable consultation with users of the service to design the new library arrangements. The students' written submission

applauded the University for listening to the student voice and praised it for the refurbishments. Although the Students' Union expressed concern that they had not been involved in the early stages of consultation, students are now represented on the Information Strategy Group. The developments have also drawn on student opinion including feedback from the University's student satisfaction survey. There is now a new 'Learning Zone' for group work and as a result of postgraduate feedback there is now an eating area and a quiet area. To support the Research Strategy there is to be a research centre for staff and postgraduates. Students who met the audit team were generally happy with the library. The team was also informed that a space had been created for key resources to allow students to always have access when needed.

112 The appropriateness of resources is considered at validation and PCR. Course resource audit forms (CRAFs) must be completed for all courses at these times. There are separate forms for new courses, courses delivered off-campus and for PCR. A separate questionnaire is submitted to the library to ensure that resources can be provided. If the delivery is at a partner institution, a self-assessment pro forma is completed by the person responsible for learning resources. All CRAFs are signed by the course leader, head of school and dean. During validations and revalidations resources are reviewed by the panel.

113 The quality of teaching environments is addressed by the Learning and Teaching Strategy and the Estates Strategy to provide learning spaces conducive to learning. One major activity to implement this objective has been through the £1.1 million HEFCE-funded Tech Tick project. This has provided standardised equipment in 200 teaching rooms and LDU also provides training for staff to use the equipment. Staff who met with the audit team were complimentary about the project's impact on learning and teaching.

114 There is also a range of HEFCE funds to draw upon to augment resources. The Teaching Equipment Fund offers individual staff access to funds to provide equipment, and the Learning Equipment Fund is focused to enhance students' learning experience, especially employability skills. The Research Equipment Fund invests in areas that lack easily available funds.

115 The audit team found that the Medium Term Strategy has made an impact on the management of learning resources for the benefit of students' learning opportunities. The team concluded that the University's approach to the management of learning resources makes a valuable contribution to the quality of students' learning opportunities.

Admissions policy

116 The University's Mission Statement aims to promote educational opportunity for all. This commitment is addressed through its regulations and policy in regard to admissions. These are incorporated in the AQA manual. The key documents are the Academic Regulations and Appendices, the Admissions Policy and the Accreditation of Prior Learning Staff Guide. The Academic Regulations and Appendices specify the general entry requirements for both undergraduate and postgraduate courses, and the requirements for students with a disability and/or learning difficulty. They also give detailed information on the accreditation of prior learning. The Admissions Policy and Code of Practice states that recruitment and marketing activities are the responsibility of the Advancement Service (see paragraph 188). The responsibility for implementing, monitoring and reviewing the Admissions Policy lies with the Head of Admissions who presents an annual report to ASQAC. The Code of Practice provides detailed requirements for admissions procedures and the audit team was satisfied that it reflects the *Code of practice, Section 10: Admissions to higher education*, published by QAA. Training to support admission practice is coordinated by Human Resources in consultation with the Head of Admissions.

117 The Student Access Strategy covers student recruitment. The Student Access Committee and faculty student access committees take a strategic view of matters that impact on admissions policies and practices.

118 Admissions fall within the remit of the Student Affairs Service. Its website contains information to assist students in applying to the University, including copies of the University magazine, *Aspire*, which focuses on the achievements of University students and its alumni. The admissions system is centrally organised. The majority of undergraduate applications are dealt with by the Service. For students not applying via the University and Colleges Admissions Service, there is an opportunity to apply directly to the University online. The Admissions Team includes an Applicant Guidance Officer who gives assistance to students during the admissions process. Research degree applications are dealt with by the Graduate Research Office (see paragraph 156). The International Office liaises closely with the Admissions Team to offer a more streamlined process for overseas students. Faculties or schools may deal with some admissions procedures such as interviews or Criminal Records Bureau checks. Faculty and school manuals are expected to provide information on admissions including any particular procedures. The audit team viewed a number of faculty and school handbooks and noted that admissions advice was tailored to their particular needs. Meetings with students generally confirmed that admissions processes were managed satisfactorily.

Student support

119 The University has a well-structured arrangement for student support. The AQA manual refers to a network of central and distributed facilities in The 'i', the Students' Union and faculties. The impetus for this approach derives from the Medium Term Strategy and certain supporting strategies. The Student Experience Implementation Plan includes the Student Affairs Service providing central support services; and the Learning and Teaching Implementation Plan focuses on the use of The 'i' and the development of the personal tutor system.

120 The Student Affairs Service provides a range of facilities: health and counselling, financial advice, disability support, independent academic advice, including information about rules and regulations, careers advice and the multifaith centre. It brings together much of its provision in The 'i' which is recognised by the University as the key central provision for student support. Established in 2003, The 'i' is a one-stop shop resource for key areas of student support. It gives support through a face-to-face service and a comprehensive and informative website, 'Student Help', by streamlining administrative processes and reducing the number of locations that students need to visit for support. The number of enquiries at The 'i' have grown to more than 50,000 in 2007-08. Both the students' written submission and students who met with the audit team emphasised The 'i' as a great source of support. The student satisfaction survey recorded 100 per cent satisfaction with its services.

121 The 'i' supports students at key moments of their induction into, engagement with, and progression through, higher education. It does this through a suite of resources, advice and activities aimed at retaining and helping students to progress and succeed. 'Flying Start', a summer course, offers an introduction to university life and studying, and was highly praised by students who met the audit team. Students receive an 'i' handbook containing a range of information and useful contacts. In addition, 'The Organiser', that students receive, provides guidance and activities for personal development planning, for example, setting personal goals and action planning and information about study skills support available. Students confirmed that it was a useful resource. 'Wiser' provides study skills support, including one-to-one tutorials, email support and podcasts. The 'M and M system' (Mentors and Mentees) provides trained student mentors to work with new students; currently there are 1,600 mentors. 'Fresh Start' ensures that students have every opportunity to continue with their studies by offering support to students who are considering changing their course or withdrawing from the University. The audit team identified, as a feature of good practice, the integrated student support service, known as The 'i', for its accessibility and provision of high quality information, guidance and support for students.

122 To give students support in enhancing their career perspectives, the Student Employability and Enterprise Strategy aims to prepare students to succeed in future learning or employment. To do this, the University has consolidated the Centre for Employability, the Careers Service and Northern Lights into one centre: the Futures Team. This is based on the ground floor of the library and offers opportunities for work placements, part-time employment, internships, live projects and volunteering, as well as careers advice. As part of Futures, the Northern Lights Business Incubation Unit offers students and graduates facilities to engage in start-up businesses.

123 Although The 'i' provides a centralised service of support for students, faculties and schools work with the centre in a 'hub and spokes model'. Student support is primarily offered by the personal tutor whose role is defined by the Guide for Personal Tutors. Every student has a personal tutor assigned by the head of school. The actual provision of personal tutoring may vary between faculties, but school and course handbooks seen by the team provided advice to students on the local system. For example, some courses operated notice-boards on the virtual learning environment and through an online meeting room. The Organiser is a key tool in personal development planning (PDP). It promotes PDP as a process in terms of developing skills such as time management, action planning and goal setting.

124 There is a faculty international coordinator who acts as a point of contact for international students and is involved in their induction process. International students can also have the support of a team of buddies.

125 A major innovation in faculties has been the appointment of student liaison officers (SLOs). Their role is to support the student body within the faculty and develop links between it and course representatives and other stakeholders. They are available to students to deal with issues. Students were enthusiastic about the value of SLOs and the audit team concluded that the role provided a very supportive link for students. In terms of student representation, SLOs recruit and help to train course representatives and attend staff-student liaison committees. They may attend faculty committees to represent the student voice rather than the course representatives themselves. Students' Union officers who met the team emphasised the importance of the distinction between the SLO role and representatives who had been elected by students.

126 The University has recognised, through student feedback, that there has been a need to re-affirm codes of conduct. As a result, a scheme called 'The Card' was developed with help from the Students' Union. The Card is a statement of University intentions and its expectations of students. It forms part of the personal tutor induction programme. Students value The Card. The AASC has audited the effectiveness of The Card for meeting commitments to students and also the effectiveness of PDP. Both outcomes were reported to the Student Experience Committee which has oversight of student support and it made recommendations in the light of the reports, including clearer guidelines for PDP and an annual review of The Card.

127 A number of LDU academic enhancement projects that staff can bid for focus on student support. The Transitions Application to Assessment project focuses on helping students adapt to the challenges of higher education from application until the first assessment point. The support given in this time was evaluated in a report to the Student Experience Committee and was seen as a key driver in ensuring student retention.

128 The student written submission expressed praise for the University's mechanisms for student support and this was confirmed by students who met the audit team. The team concluded that the University's arrangements for student support were effective in maintaining the quality of students' learning opportunities.

Staff support (including staff development)

129 The University's approach to staff support is shaped by two supporting strategies: Human Resources and Learning and Teaching. The Human Resources Implementation Plan includes procedures to select appropriate new staff and develop and enhance the capabilities of existing staff to meet the needs of the future University as envisaged in the Medium Term Strategy. The Human Resources Department provides a range of guidance documents on its website that includes induction and appraisal. Workshops are available to give further support. New staff are provided with an induction checklist that includes information about mandatory events. All new staff have a mentor.

130 Guidance on appraisal is clear and comprehensive. Its purposes include assessing past performance, establishing current performance and setting objectives for the future that are in line with University objectives. Copies of an individual's agreed personal and professional development plans are used by the Training and Development section of Human Resources to plan for programmes of staff training.

131 There is an expectation that all staff who teach or support learning will take part in the Peer Support for Learning and Teaching through Observation scheme. Each school devises and implements its own scheme. There are a number of key elements that are minimum requirements and the details of the scheme are explained in school manuals. The audit team scrutinised a number of school manuals each of which included such details.

132 The Learning and Teaching Strategy aims for all teaching staff to have completed a teaching and assessment updating programme by 2012. All new staff who teach or support learning, including hourly paid, part and full-time and postgraduate research students (see also paragraph 175 below) are expected to undertake some form of initial teaching development. This facility is provided by LDU which is the central service that supports staff in improving and strengthening their learning and teaching. LDU's website contains full information about its activities plus useful regular update papers. Courses run by LDU include the mandatory five-day Teaching Toolkit course for new academics. Staff can also access a Postgraduate (PG) Certificate in Learning and Teaching in Higher Education accredited by the Higher Education Academy. LDU also provides a programme of Continuing Professional Development for staff, a bespoke programme for research supervisors and a PG Certificate in Student Support and Guidance, and a PG Certificate in e-Learning. There is further support targeted at faculties to enable staff to enhance their continuing professional development by applying to LDU's Teaching, Learning and Assessment Fund. The Special Initiative Teaching Quality Enhancement stream offers funding to staff for academic enhancement projects that address the University's Learning and Teaching Strategy. It also funds the annual Harris Awards for Excellence that promote innovation and provide opportunities for staff to undertake small projects in learning and teaching.

133 All newly appointed academic staff are expected to have, or be in the process of completing, a PhD, with any exception (for example, specific industry experience) having to be agreed by the Deputy Vice-Chancellor (Academic). The expectation is that by 2012 all academic staff will be either research active or involved in knowledge transfer. The audit team was told that the appraisal scheme addressed individual staff's support needs to achieve this, and that the Human Resources Department and LDU work together to provide appropriate courses in developing research skills. There is also support available through the faculty teaching and research drop-in sessions programme of seminars on research and teaching, school and University funded sabbaticals, and LDU offers support through bringing together staff. For example, the Pedagogic Research Forum supports its members in becoming research active in the area of learning and teaching.

134 An objective of the Human Resources Implementation Plan to develop leadership in the University has been successfully implemented in the Future Proof project. This has been implemented to identify and support staff to undertake significant projects and who may go on to achieve senior roles within the University. There are plans to extend the project's remit to the middle tier of University staff.

135 The audit team found that the University has effective arrangements for staff support and the development for academics engaged in teaching.

136 The audit team concluded that confidence can be placed in the soundness of the institution's current and likely future management of the quality of the learning opportunities available to students.

Section 4: Institutional approach to quality enhancement

137 The University's current approach to enhancement has developed through its practice, which has operated over a number of years, of targeting strategically important projects such as schemes of sabbaticals for research and curriculum development, for implementation across the University as a whole. The University has now developed its Medium Term Strategy (see paragraph 6) as the prime vehicle for enhancement by embedding institutional level strategies for enhancement within the Strategy's objectives, supporting strategies and implementation plans. It has also established complementary processes to enhance both academic and business systems: the former through the Academic Audit Sub-committee (AASC) and the latter through the Business Enhancement Team. In addition, the Learning Development Unit (LDU) plays an important role in the University's strategy for enhancement as do the processes that the University adopts for identifying and disseminating good practice.

138 Central to the Medium Term Strategy are three 'curriculum themes': Employability and Enterprise, Internationalisation and Sustainable Development, which the University is taking steps to address throughout its curricula. The Vice-Chancellor and senior managers confirmed to the audit team the importance placed upon the development of these themes by the University. In 2007, the Dean of Academic Development took responsibility for initiating the embedding of the themes within schools and programmes. Consideration of these themes is now a requirement of validation and periodic course review as set out in the Course Developer's Guide. This process has been supported by workshops for University Review Panel (URP) members and guidance for URP chairs. LDU has also provided guidance through, for example, the publication of updates on internationalisation and employability and enterprise. In some cases the University acknowledged that it may not be appropriate or straightforward to embed these themes in the formal curriculum. With this in mind, as part of the Learning and Teaching Strategy, the University is developing an informal curriculum which will provide activities which cover the themes but which will not be assessed nor counted towards a final award. The University has invested significant resources in developing the themes through the formal and informal curriculum by, for example, establishing a bursary scheme for students to study abroad and the establishment of an international language programme with an emphasis on non-European languages. The University has also benefited from the establishment of a HEFCE-funded Centre for Excellence in Teaching and Learning: the Centre for Employability through the Humanities (CETH). CETH plays a key role in developing the employability and enterprise theme within non-vocational courses by, for example, offering support for business start-ups. Schools are also able to bid for funding to support specific course based projects. The team was given evidence of a variety of strategies for implementing the curriculum themes in different courses and noted the enthusiasm of staff in describing the new and innovative ways which were being discovered to constructively engage with them. Students also provided examples where, for example, the employability theme had manifested itself in their courses in a variety of forms: as an employability elective, a professional practice core module or a briefing session on career development.

139 The AASC has so far addressed eight topics since its establishment in 2006-07 and it continues to engage in a programme of audit activity, with four projects being carried out in the current academic year. These audits contribute to the Universities processes of enhancement by targeting procedures or mechanisms which contribute to the quality of students' learning experiences, with a view to improving their effectiveness and consistency. The areas to be audited are selected from a prioritised list drawn up from issues raised by faculties and through annual monitoring. Those covered so far have included topics such as the:

- use of departmental manuals as a mechanism for quality assurance
- effectiveness of the University in meeting its commitments to students as expressed on The Card (see paragraph 126)
- effectiveness of the implementation of personal development programmes.

140 Each audit results in a series of recommendations which are reported to the Academic Standards and Quality Assurance Committee (ASQAC). In turn, ASQAC agrees to the recommendations and identifies who or which committee is responsible for progressing them. The resulting outcomes are then reported back to ASQAC. In some cases the action specified by ASQAC in relation to the audit recommendations was a requirement for changes to, and compliance with, policy and procedures. In another case the outcome provided for the dissemination of good practice among departments. An audit of assessment board decisions resulted in a review of the regulations concerning classification and the use of discretion, and the audit of The Card led to the provision of a list of the minimum requirements for feedback sheets. The audit team concluded that the range of approaches to the recommendations of audit adopted by ASQAC provides an effective basis for the enhancement of academic procedures and mechanisms.

141 Parallel to the academic enhancement activities of AASC, the University has created a Business Enhancement Team to support its aim stated in the Medium Term Strategy that 'we will be a university which is agile and flexible, innovative, responsive to the opportunities and dynamics of our various markets. We will...not allow bureaucracy, boundaries or administrative burden to compromise our teaching, research or delivery of services'. The Team seeks to facilitate the quick, effective and efficient delivery of the University's services to customers and to enhance its business tools and systems to improve the working environment.

142 The Business Enhancement Team's first project, the Pulse Project, was initiated to support the new school structure by providing heads of school with a wide range of management information relating to staffing, students and research which formerly had to be gathered from a range of sources. The aim of the project is to deliver, over the next two years, a series of reports in a standard format through a single point of access which will enable heads of school to improve the way in which they are able to track their performance against a five-year plan. A second example of a project intended to enhance business processes in order to improve the quality of service provided to students is that related to awards and assessment systems. The outcomes of this project, which was initiated in January 2008, are clearly articulated with five of the aims in the Medium Term Strategy. Elements of the project include adherence with the Bologna Principles, delivery of the European Diploma Supplement, enhancement of the accreditation of prior learning processes, and improvements in the procedures for students to report extenuating circumstances. The audit team considered this to be a good example of a project initiated by the Business Enhancement Team which has a focus on improving the quality of the student experience and which is informed by consultation with academic stakeholders.

143 Another of the University's approaches to enhancement is through academic enhancement projects of which there have been eight so far. These projects, funded by LDU, focus on the area of continuing personal and professional development; learning, teaching and assessment; student retention and e-learning. In accordance with the University's focus on

enhancement through the Medium Term Strategy and its supporting strategies, these areas reflect the objectives of the Learning and Teaching Strategy. They also seek specifically to address current issues identified by the University such as feedback and assessment. In two cases LDU has been proactive in identifying projects to be led by students: the Student's Guide to Assessment project and the Application to Assessment project which is intended to support students new to the University. In particular, the production of the Student's Guide was considered by LDU to have been valuable in identifying issues such as the emotional response of students to assessment and the potential difficulties arising from the use of unfamiliar jargon. LDU anticipates that the insight offered by the guide into students' concerns about assessment will be as valuable to staff as it is for students. The audit team found the innovative approach to the involvement of students demonstrated in the development and production of the Student's Guide to Assessment, to be a feature of good practice.

144 The audit team identified the strategic, project-based approach employed by the AASC, LDU and the Business Enhancement Team, which provides an effective model for enhancement across the University, as a feature of good practice.

145 An emphasis on research informed teaching provides another focus for enhancement. A key element of this has been the establishment of a Centre for Research Informed Teaching supported by the Teaching Quality Enhancement Fund. The activities of the Centre include the publication of Diffusion, a journal showcasing undergraduate students' research, the development of which was supported by student focus groups. The Centre also operates a Student Intern Scheme in which undergraduates have the opportunity to work with research active staff during the summer. A recent initiative is the Impact project which is endeavouring to measure the impact of research across schools through the publication of a number of case-studies. The audit team identified the role of the Centre for Research Informed Teaching in raising undergraduate students' research aspirations, particularly through the Diffusion journal and the Student Intern Scheme, as a feature of good practice.

146 LDU also contributes to enhancement through a programme of staff development, devised in conjunction with Human Resources, which includes a Learning, Teaching and Research week at the end of each academic year. The most recent of these, which was run as a University Conference in conjunction with the Centre for Research Informed Teaching, offered a comprehensive programme of activities covering aspects of learning, teaching and research. Staff are also encouraged to apply to LDU for project funding, for example, the Harris Awards which promote pedagogical innovation (Excellence in Teaching and Learning awards) or Excellence in Research Informed Teaching. The emphasis of the former in the current academic year is the use of technology-based approaches to enhance assessment.

147 The annual monitoring process provides a focus for the identification of good practice by faculties. Chairs of faculty quality groups and faculty teaching and learning coordinators meet with the Heads of the Academic Quality and Standards Unit and LDU to share any interesting or innovative practice which they think may be transferable. This enables members to choose initiatives which they want to explore in more detail with a view to implementing and building upon them within their own faculties. This year topics covered included personal development planning, e-learning and a virtual office development. The University also encourages the sharing of good practice through networks and forums such as the twice-yearly Heads' Conference Group and the termly meetings of the URP chairs and vice-chairs.

148 The audit team concluded that together this comprehensive range of activities constitutes a strategic, thorough and effective approach to quality enhancement.

Section 5: Collaborative arrangements

149 The University will be subject to a separate audit of its collaborative provision.

Section 6: Institutional arrangements for postgraduate research students

The research environment

150 Research at the University is undergoing a substantial investment programme leading to the creation of new research centres in areas such as nuclear studies, digital manufacturing, creative digital industries, fire science, sustainability, philosophy, mental health, business, deaf studies, forensic science and criminology and criminal justice. As noted, a Centre for Research Informed Teaching has recently been established (see paragraph 145), and the Westlakes Research Institute was acquired in 2005. The University's research student numbers are growing.

151 A new Research Strategy is in its first year of implementation in which the University sets out an ambitious agenda to enhance the research standing of the University by 2012, with a vision to secure a place in the UK top 70 group reflecting progress consistent with a top 60 University research rating by 2017. There are clearly laid out objectives ranging from:

- doubling research funding by 2012
- increasing student numbers by 50 per cent
- increasing peer-assessed research outputs
- diversifying the research base, thereby doubling the number of research-active staff
- improving the research infrastructure by offering research career support through a comprehensive research career ladder and an enhanced rewards and recognition framework.

152 This Strategy is complemented by an implementation plan with key performance indicators and timescales. The University Director of Research is responsible for acting on all aspects of the implementation plan together with the Deputy Vice-Chancellor (Academic), the deans and heads of schools. The Research Strategy was intended to be reviewed in December 2008 in the light of the Research Assessment Exercise 2008 results and associated funding announcements in March 2009 and HEFCE announcements on the Research Excellence Framework in July 2009.

153 Arrangements for the management of research degrees are set out in the Academic Quality Assurance (AQA) manual Part two: Research Degree Programmes and Higher Doctorate Awards and its various annexes, in particular, the Academic Regulations for Research Degrees and the University Code of Practice for the Supervision, Examination and Administration of Research Degree Students. The AQA manual contains all guidance, role descriptions, process maps, regulations, codes of practice and pro forma for all processes. All schools and faculties are expected to follow the regulations and Code of Practice as set out in the AQA manual.

154 The Research and Knowledge Transfer Committee (RKTC), responsible for the research environment and management including strategy and policy, reports to the Academic Board. It delegates operational management with regard to registration and monitoring of progression of students to the four faculty research degree subcommittees (FRDSC). The University Research Degrees Sub-committee (URDSC), chaired by the Director for Research, holds responsibility for monitoring adherence with the University quality assurance framework. Annual monitoring reports with action plans are considered by RKTC and the Academic Standards and Quality Assurance Committee (ASQAC).

155 There are a number of working parties, such as the Research Training Strategy Working Party with a brief to ensure that all externally accredited standards are met, or the Research Degree Regulations Working Party and the Research Student Experience Working Party. The latter two are considered to be standing working parties and their reports are considered at URDSC and RKTC. Regulatory issues are presented to the Academic Regulations Sub-committee before they proceed to RKTC. Through analysis of committee minutes the audit team confirmed that reports of all working parties are discussed at all relevant committees.

156 The Graduate Research Office (GRO) offers administrative support to admissions and examinations. Subcommittees meet on a regular basis and their chairs meet three times a year 'to ensure parity of practice across the University'. Each school has a research degree tutor (RDT) who monitors school-internal quality assurance processes, the progression of students and the coordination of training.

157 The audit team heard from students that the sense of belonging to a research community operates most meaningfully at department level, while the notion of schools still has to be broken down. Research students have base rooms or offices, where they meet with other students of their direct research environment. The research days at the University offer an opportunity to meet with students from other subject areas.

158 In line with the Research Strategy for the University and the objective for all staff to become research active, the audit team learnt that the University is considering a proposal to create a research centre in the library to support the implementation of the Research Strategy.

159 The audit team found that the University provided a lively and intellectually stimulating environment for its research students and staff. The quality of learning opportunities and academic standards are ensured via a thorough quality assurance framework which is set out in the comprehensive AQA manual. On the basis of the evidence provided, the team was able to verify that processes, as described, were being implemented. The team concluded that the University makes effective use of the *Code of practice, Section 1: Postgraduate research programmes* and other external reference points.

Selection, admission and induction of students

160 Heads of school and the RDTs are responsible for admissions and the quality of the application presented on a standard pro forma to FRDSC. Each research degree subcommittee has a pool of referees to assist with the approval process. The FRDSC validates the programme and confirms the supervisory team. For taught and professional doctorate programmes URDSC takes responsibility. Amendments of programmes follow the same process evidenced through a pro forma.

161 RDTs and heads of school are supported by GRO which administers the initial application process centrally by ensuring that applications are meeting entry requirements. GRO issues pre-entry guidance to prospective applicants. All students are subsequently interviewed by a panel which must consist of the prospective director of studies and the RDT. New research students receive a central induction pack and a student handbook. Central and faculty induction programmes are coordinated by GRO; these cover University research regulations and processes, introduction to teaching and learning, research skills support, library and resources services, ethics and health and safety issues. Individual training needs are established at the start of the programme and students are encouraged to attend training programmes, for which they receive certification. Participation is reviewed throughout the programme through the student's progress file.

162 The audit team concluded that selection, admission and induction processes were robust and contributed to the effective management of learning opportunities and standards.

Supervision

163 Supervisory teams consist of at least two research-active and experienced supervisors approved by FRDSC and are led by a director of studies. Each student is entitled to a minimum number of supervisory meetings, six for full-time and three for part-time students, per year. Minutes of these meetings are taken by the student and actions are recorded. These are agreed by the director of studies or the supervisory team. The AQA manual states that each student has the opportunity to have a 'personal tutor who will not be the supervisor or head of school, but may be the research degrees tutor'. However, research degree students who met the audit team appeared unaware of this opportunity.

164 Students who met the audit team confirmed that they meet with their supervisors and produce a progress file which is signed off by the supervisor and the director of studies, before being approved independently by the RDT who presents it for formal progression approval at the FRDSC.

165 Research supervisors are supported by training activities such as the Postgraduate Certificate in Research Student Supervision provided by the School of Education and Social Science, GRO and their school's RDT.

166 The audit team found that the process for research student supervision was sufficiently robust and effective to ensure the quality of provision of student learning opportunities and the maintenance of academic standards.

Progress and review arrangements

167 All students are set progression criteria for the first year on entry. Thereafter the annual progression exercise review continues the process of criteria setting and monitors student progress. Guidance on progression monitoring and the setting of criteria is given in the Code of Practice. Students are issued with a progression file which holds their record of supervisory meetings and actions, research and skills training, attendance at conferences, seminars and other activities. It is the student's responsibility to maintain their progress file for the annual progression exercise.

168 Students who met the audit team confirmed that they were well briefed on progression requirements with regard to the University's expectations, possible conditions and timeframes arising out of the process. They followed the standard guidance and templates as set out in the AQA manual.

169 The annual progression exercise is a thorough process which brings together a self assessment report on progress via the progress file and a report by the supervisory team which is considered by the student and the RDT. Students who met the audit team were appreciative of the open discussion of their progress with the RDT who brings an element of external scrutiny to the progression process. Students regarded the meeting with the RDT as an opportunity to confirm the effectiveness of their supervision.

170 The RDT and the head of school confirm the recommendations of the annual progression exercise for each student and provide a report which feeds into the FRDSC process and the faculty action plan produced by the chair. The Chair of URDSC produces a composite report and an action plan at university level. This report is based on University-wide activities and the work of GRO. It focuses on academic regulations, policies and external requirements and evaluates progress against the University's strategic objectives. FRDSC and URDSC reports and action plans are submitted to RKTC for consideration. ASQAC will consider a composite report from RKTC accompanied by the university-level action plan which will contain actions from the faculty action plan.

171 URDSC, FRDSC and RKTC committees have dual functions serving as committees as well as progress and award boards at which students are being discussed, for example, FRDSC is constituted as progression board to confirm recommendations made by the school for two

meetings in the year. The minutes of all committees confirm that the review of student progress is a standard item and that actions are minuted and completed as necessary. In its meetings with staff, the audit team heard that board and committee functions are separated, but this was difficult to verify from the minutes of the committees.

172 The audit team concluded that progress and review arrangements for postgraduate research students were managed effectively.

Development of research and other skills

173 The review of research degree programmes in July 2006, commented on the need for the University to give further consideration to how it ensures the research training provision meets the requirements of the research councils' UK Joint Skills Statement (JSS). A Research Training Strategy Working Party was set up and the University has responded by conducting a JSS-based Research Student Skills mapping exercise. The mapping document confirms that, between bespoke research student training provided by the Office of the Director of Research and the faculties, and more generic training provided by the Knowledge Transfer Service, Northern Lights, the Centre for Employability, the Centre for Employability through the Humanities, Safety Health and Environment Section, Futures and the Learning Development Unit (LDU), all sections and subsections of the JSS have been addressed. In addition, a Research Training Strategy was formulated.

174 Individual training needs are explored through the induction process and they are met through generic training courses in the University. All research students are offered a yearly training programme advertised to them via email and they can choose their training options. The extent of direction from academic staff varies, but all students report on their activities through the progress file. Students are required to present their research at least once each year at internal or external conferences or symposia.

175 Postgraduate research students who undertake teaching are required to attend a one-day Introduction to Teaching session and may continue on the one-week Higher Education Teaching Toolkit module. A substantial number of research students have availed themselves of the opportunity of taking the Higher Education Teaching Toolkit module which, at present, is not a requirement for teaching, and some have continued onto the PG Certificate in Learning and Teaching in Higher Education. The University will wish to keep under review whether the Toolkit module should be made a requirement for all postgraduate research students who engage in teaching activities.

176 The University considers personal development planning (PDP) to be a core learning process and supervisors are responsible for supporting their research students as documented on LDU's website. While the students who met the audit team did not recognise the term PDP, the team confirmed that the students are engaged in various PDP activities. The central induction sessions provide, as stated in the Guidance on PDP for Postgraduate Research Students, information on research skills, progress files and research training, and students fulfil these requirements through the progression process as described above.

177 On the basis of the evidence provided, the audit team formed the view that the arrangements for the development of research skills were appropriate and effective, making reference to the *Code of practice* and the skills training requirements for research students.

Feedback mechanisms

178 The University states that the annual monitoring process provides feedback from students, staff and external examiners. This process is central to the quality assurance process. The RDT and head of school provide a report commenting, inter alia, on issues arising from the annual progression exercise and giving feedback on the actions identified in last year's school action plan for research degrees. The head of school's report together with the school action plan is

submitted to the Chair of FRDSC who provides a faculty-level report and a faculty action plan, following the process as already described (see paragraph 170).

179 Each faculty has a faculty research student committee; however, attendance by research student representatives was reported as being low in the QAA Review of research degree programmes report in 2006. The University is making efforts to boost participation and increase the level of student evaluation through various means. The Faculty of Health has developed a virtual Faculty Research Student Committee. A Postgraduate Forum has been established by the Students' Union and GRO provides a questionnaire following the oral examination. The audit team was not able to verify the effectiveness of these evaluation means as they were introduced recently.

180 At the university level, research students are only represented at the Research Student Experience Working Party which was confirmed by students who met the audit team. There appears to be no research degree student representation at any other standing committees at university level such as RKTC or URDSC. The team formed the view that representation by research students at institutional level is to be encouraged and should be kept under review.

181 The audit team found that the University was making satisfactory arrangements in respect of feedback mechanisms.

Assessment

182 Assessment for research degrees is summative by thesis and oral examination, possibly exhibition and performance for practice-based research projects, following procedures in the Academic Regulations for Research Degrees. Proposals are vetted and examiners are proposed by the head of school and the RDT. The URDSC approves the examiners and arrangements for examination. The examiners are supported through the Information for Internal and External Examiners for Research Degrees and the examination officers in GRO. For each research degree award there is an external examiner with appropriate standing, expertise and proven experience at the level of the award.

183 GRO provides briefings and mock viva examinations for students which are appreciated by students. To improve students' understanding of University assessment requirements and the expectations placed upon students, the University has also enhanced its feedback procedure after an examination has taken place by providing students with more detail on categories of corrections. Students confirmed that they receive feedback on the basis of marked papers and supervisory meetings, while written records of feedback seem to vary between supervisors.

184 On the basis of the evidence provided the audit team found that the arrangements for assessment of research degrees were appropriate and satisfactory.

Representation, complaints and appeals arrangements

185 In addition to the University's general complaints procedures for progress or examination decisions which form part of the Academic Regulations, students also have access to the Complaints and Grievance Procedure for Research Students with regard to complaints about supervision and their research programme. Students who met the audit team appeared well informed about the procedures.

186 The audit team concluded that the procedures for complaints and appeals were adequate and effective.

187 The audit team found the University's arrangements for postgraduate research students met the precepts of the *Code of practice, Section 1: Postgraduate research programmes*, and are effective in securing academic standards and the quality of students' learning opportunities.

Section 7: Published information

188 The accuracy of information in corporate publications, such as the prospectuses and that which is subsequently transferred to web format, is the responsibility of the University's Advancement Service which edits information provided by nominees within schools or services. Research is conducted by the University to ensure that the information it publishes is meeting the needs of both its prospective and current students. Feedback on key publications and the University website is used to inform future developments. Students, both through the student written submission and in meetings with the audit team, confirmed that the prospectus was an attractive and accurate publication and that their expectations based upon it had been met.

189 Currently, each school and service manages its own web pages. Ensuring the accuracy of the wide variety of information that they provide to students and staff is the responsibility of the individual head of school or service. However, based upon feedback from users on the difficulties that they encountered in using a range of different navigation systems, the University has recently implemented a new web content management system managed by the Learning and Information Service (LIS). Migration is currently taking place to a system which will provide standard navigation and appropriate access for students with disabilities. Faculties will work to a centrally coordinated format to ensure the consistency of all information for external publication. All school web pages will be audited by LIS in the coming year.

190 Schools are responsible for the production of course student handbooks. The Course Developers Guide, part of the Academic Quality Assurance manual, provides guidance for the minimum content required. Handbooks are scrutinised as part of the validation and periodic course review processes and must be signed off before the course is permitted to run. The audit team saw evidence of this happening through its audit trails. The head of school has ongoing responsibility for ensuring that information provided to students in the handbook is correct and students are notified of any changes when they occur. Students are also provided with module information packs or module guides which provide detailed information about individual modules. The students who met the team were complimentary about the quality of the handbooks and module information packs and confirmed that they were effective in making academic expectations clear.

191 The audit team was provided with a comprehensive range of documents designed to provide prospective and current students with information regarding their studies, services provided by the University and the support available for their life as a student. These included student handbooks provided to all students, the contents of which, among other useful information about University services, include links to information on complaints and appeals procedures. Students reported that as well as the handbook, the Student Organiser which the University produced, based upon queries received at The 'i', was also a useful resource in supporting them in their studies. These key documents are accompanied by a wide range of information leaflets, postcards, guides and electronic resources. Students also placed significant emphasis on The 'i' itself as a key source of information and support. The team concluded that the University was proactive in providing prospective and current students with a wide range of accessible, attractive and useful information.

192 Based upon evidence from a range of published material, meetings with students and the student written submission the audit team concluded 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.

RG 413a 03/09

© The Quality Assurance Agency for Higher Education 2009

ISBN 978 1 84482 928 6

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

Tel 01425 557000

Fax 01452 557070

Email comms@qaa.ac.uk

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

Registered charity numbers 1062746 and SC037786