

**Institutional audit**  
**Annex to the Report**  
**School of Pharmacy**  
**April 2007**

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## Introduction

A team of auditors from the Quality Assurance Agency for Higher Education (QAA) visited the School of Pharmacy (the School) from 23 to 26 April 2007 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 School offers.

### Outcomes of the institutional audit

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

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

### Institutional approach to quality enhancement

The audit team found that, although the School is engaged in enhancement activity at both institutional and departmental level, there was scope for this to be done in a more strategic way.

### Institutional arrangements for postgraduate research students

The audit team concluded that the School's arrangements for its postgraduate research students met the expectations 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 noted that these arrangements and effective practice in this area allowed for the securing of academic standards and quality of provision for postgraduate programmes.

### Published information

The audit team found that, although there were areas to be addressed in the consistency and updating of some aspects of the School's published information, overall, the accuracy and completeness of such information was improving.

### Features of good practice

The audit team identified the following areas as good practice:

- the School's responsiveness to the changing needs of pharmacy education, particularly those of the National Health Service and post-registration practitioners, where the School is playing a leading role in establishing a cadre of practice educators (paragraphs 25; 150)
- the central register of external examinerships held by staff to avoid reciprocity (paragraph 59)
- the sense of community fostered within the School, as exemplified by the 'buddying' systems for new undergraduate and overseas students, and the arrangements to support disabled students (paragraphs 129; 135)
- the well-received Academic Tutor scheme which operates on the MPharm programme (paragraphs 130; 135)
- the effective careers support which is embedded throughout the curriculum (paragraphs 131; 135)
- the procedures for reviewing the progress of postgraduate research students, in particular the annual one-to-one meetings which all such students have with the Director of Graduate Studies (paragraph 171).

## Recommendations for action

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

Recommendations for action that the audit team considers advisable:

- in order to guarantee the overall coherence of the academic committee structure, including the location of the strategic and operational responsibility for the management of quality and standards:
  - a) review the terms of reference of the Academic Board, and
  - b) complete the review of the functions and membership of the Academic Standards Committee and of its relationships to the Academic Board, the Undergraduate Studies Management Group, the Taught Postgraduate Studies Committee, the Higher Degrees Committee and the newly established Education Directorate, so as to ensure that it can fulfil its central role in quality assurance and enhancement (paragraphs 31; 40; 42; 93)
- expedite progress with the new quality assurance manual to meet the planned implementation date, ensuring that the Academic Infrastructure is embedded within it and that its contents and purpose are communicated to all staff (44; 45; 66; 69)
- ensure adherence to programme validation procedures, and develop criteria for establishing the independence of external panel members (paragraph 68)
- introduce a system of periodic review for all taught provision which will enable the School to take a strategic view of its present and future curricula (paragraph 88).

Recommendations for action that the audit team considers desirable:

- update the School's learning and teaching strategy and incorporate an assessment strategy (paragraphs 48; 80)
- continue to develop a consistent approach to appraisal to enable transparent identification of the development needs of all groups of staff (paragraph 119).

## Reference points

To provide further evidence to support its findings the audit team investigated the use made by the School of the Academic Infrastructure which provides a means of describing academic standards in United Kingdom higher education. It allows for diversity and innovation within academic programmes offered by higher education. QAA worked with the higher education sector to establish the various parts of the Academic Infrastructure which are:

- the *Code of practice*
- the frameworks for higher education qualifications in England, Wales and Northern Ireland, and in Scotland
- subject benchmark statements
- programme specifications.

The audit team found that the School took account of *The framework for higher education qualifications in England, Wales and Northern Ireland* and the subject benchmark statements in its management of academic standards and the quality of learning opportunities available to students, although the team recommended further engagement with programme specifications and a more School-wide approach to consideration of sections of the *Code of practice*.

## Section 1: Introduction and background

### The institution and its mission

1 The School of Pharmacy describes itself as the only free-standing institution in the United Kingdom devoted entirely to teaching and research in the pharmaceutical sciences and the practice of pharmacy. It was founded in 1842 by the (now Royal) Pharmaceutical Society of Great Britain (RPSGB) and has been a part of the University of London since 1925. It is located in the Bloomsbury district of London, where the main building is in Brunswick Square.

2 The University of London is now a federation of separately incorporated and directly-funded colleges, of which the School of Pharmacy is one. The School awards undergraduate and taught postgraduate degrees under devolved powers and in accordance with the University's Ordinances. Research degrees are both awarded and regulated by the University. The School collaborates closely with five other specialist colleges of the University which have formed a grouping known as The Bloomsbury Colleges.

3 The present Dean, Professor Anthony Smith, took up his post in April 2006. Under his leadership the School has updated its Mission Statement, which now reads: 'To provide world-class education and research in pharmacy and the pharmaceutical sciences, with particular regard to patients and health care practice, medicines discovery and development, and society'.

4 At the time of the audit, the School had approximately 700 full-time equivalent undergraduate students, 50 on one or other of its MSc degrees and 125 as research postgraduates. All undergraduate students are enrolled on the MPharm programme which is accredited by the RPSGB. A notable feature of the MPharm cohort is the high proportion of students from ethnic minorities.

5 The School is organised into four academic departments: Pharmaceutical and Biological Chemistry; Pharmaceutics; Pharmacology; and Practice and Policy. Each department includes one or more research centres. The four heads report to the Dean, who is the Chief Executive of the School.

6 The School was rated 5A in the last Research Assessment Exercise (RAE) and achieved a rating of 5 in all three earlier RAEs. Current research grants total £12.5 million and support over 75 post-doctoral scientists and technicians. Undergraduate as well as postgraduate students benefit from the resulting research environment.

### The information base for the audit

7 The information available for this audit included the following documents:

- the report of a Review of research degree programmes, conducted by the Quality Assurance Agency for Higher Education (QAA), July 2006
- the report of the institutional audit, conducted by QAA, March 2003.

8 The School provided QAA with a series of documents and information including:

- An institutional Briefing Paper (the Briefing Paper).

9 In addition, students from the School provided the audit team with individual written submissions representing undergraduate, taught and research postgraduate students. The team is grateful for the students' engagement with the process.

10 During briefing and audit visits, the audit team had access to a range of the School's internal documents. It identified one programme for which a sampling trail of documentation was requested and, in agreement with the School, a supplementary trail for which similar documentary evidence was provided.

11 The audit team would advise the School, as it prepares for any future audits or external evaluations, to reference key documents in the Briefing Paper and to provide a glossary of terms in the same document. The team also noted in its meetings with staff and students that, although those present in meetings had seen the Briefing Paper, they did not appear to have been consulted during its preparation, or to have contributed to it directly.

12 However, the audit team is grateful for the prompt and helpful responses to its requests for information.

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

13 The previous institutional audit was held in May 2003. The audit team expressed broad confidence in the School's capacity to manage the academic standards of its awards and the quality of its programmes. It commented on the School's strong sense of community and identified several features of good practice. It prioritised two of its recommendations for action. The School was advised to: 'develop the capacity to maintain a formal, institutional strategic overview of, and responsibility for, quality and standards; progress the development of a formal process for internal periodic review of academic programmes'.

14 The School questioned what would be gained from the second of these recommendations, given its small, specialist nature and the many external influences to which all of its programmes are subject; and nothing had been put in place by the time of the present audit visit. Nevertheless, the Briefing Paper did state that a cycle of periodic reviews would be introduced, although the exact detail has not yet been finalised.

15 The School's response to the first of the two recommendations in the 2003 audit report had centred on a series of reviews concerning the role of its Academic Standards Committee (ASC). This was established in June 1999 as part of a comprehensive statement of Quality Assurance Procedures agreed by Council in fulfilment of one of its responsibilities to the University of London. The document states that: 'Responsibility for quality assurance rests with the Academic Board, which has appointed an Academic Standards Committee to ensure that its policies are carried out and to report to it at regular intervals'. It goes on to detail such matters as the approval and monitoring of programmes of study and includes terms of reference for the ASC together with an indicative calendar.

16 The 2003 audit team accepted that the ASC fulfilled its statutory duty but considered that it was not well placed to lead the development of policy and practice without changes to its remit and composition.

17 The School Council commissioned an Institutional Performance Review the following year which examined this matter, among others, and concluded that senior academics, including the Dean, should cease to be members of ASC in order to establish its independence from those who 'conceive and execute' the programmes being scrutinised. Agreement was not reached on all the proposals, however, and in May 2005, the Chair of the ASC and the Registrar held meetings with staff to seek their views on the role of the ASC. Most of those interviewed agreed that the ASC did not have 'the authority to implement change' and various changes were proposed in the report that followed the meetings. On this occasion action was forestalled by the transition to a new Dean.

18 Shortly before the new Dean took up his post, Academic Board noted that a review of the ASC was 'now a matter of extreme urgency'. In November 2006, the chartered accountancy firm Knox Cropper examined the School's quality assurance arrangements as part of a more general internal audit. This report concluded that: 'The School does not have its own documented quality assurance strategy, although in practice the arrangements in place are good'. It also reported that: a strategy would be in place by December 2006; a target date should be set for completing the intended revision of quality assurance procedures; and the terms of reference and membership of the ASC should be revised. It noted that no meetings of the ASC had taken place between May 2005 and July 2006.

19 At the July meeting ASC agreed that it should meet again in October 2006 and in February 2007. Both meetings took place, and at the second of these the Dean gave an oral report on the future of the Committee following which it was noted: that the role of the ASC would be to audit the quality of the School's academic programmes; that it would take a 'relatively arm's length approach'; and that a more appropriate title might be 'Academic Audit Committee'.

20 The 2003 institutional audit report made seven further recommendations, for action that would be 'desirable'. The Briefing Paper reported clear action in respect of four of these, including a major project, of national significance, to break down the barriers to the study of pharmacy for students with disabilities. However, three others - producing programme specifications for taught postgraduate programmes; implementing peer observation throughout the School; and formalising policies for staff workload analysis, had not been acted upon.

21 The 2003 audit team judged that many of the School's responses to the previous audit, in 1994, 'must be considered slow'. This was acknowledged by the ASC at its meeting in October 2006, when: 'The Registrar noted that the School had been criticised in the past for slowness in implementing quality assurance procedures and it would be important to show that the School was progressing more quickly now that the new Dean was in post'.

22 At a meeting during the briefing visit, the audit team suggested to the Dean that slowness could be said to have characterised the School's response to the 2003 audit. The Dean responded by reporting two major initiatives: an Education Directorate was being established which would manage all teaching and learning at the undergraduate and taught postgraduate levels; and a Quality Assurance Manual which would, according to the Briefing Paper, 'finally set out the School's quality assurance standards and procedures in a systematic way, enabling ASC to take on an audit role, with the power to direct change', was in production.

23 Significant developments at the School prior to the new Dean's arrival included the creation of a virtual learning environment (VLE), using Blackboard, and the appointment of an e-learning facilitator; the appointment of an Outreach Officer; the successful validation of a new postgraduate Diploma in General Pharmacy Practice (DipGPP); and the award of strategic development funding from the Higher Education Funding Council for England to develop the infrastructure for post-registration pharmacy education.

24 Since appointment, the Dean has been developing a new 5-year strategic plan, aimed at establishing the School as one of the leading pharmacy schools in Europe and amongst the top 10 world-wide. Senior colleagues confirmed that the strategic plan had been the subject of extensive consultation.

25 There are no plans to expand the MPharm programme which has grown rapidly in recent years, but rather to expand the School's MSc provision, in alignment with its research strategy, and to further develop its programmes for practising pharmacists, in collaboration with the National Health Service and other higher education institutions. The Dean regards the School's extensive connections with outside bodies, including hospitals and pharmaceutical companies, as one of its strengths. The audit team agreed with this view and felt that these connections helped the School to respond to the changing needs of pharmacy education.

26 Equally, there are no plans to initiate new collaborative programmes overseas.

27 In 2006, the QAA Special Review of research degree programmes judged that the arrangements made by the School to secure and enhance the quality and standards of its research degrees were appropriate and satisfactory. They used the same words to record their judgements on three of the areas specified in this template: namely, progress review, collecting and acting on feedback, and dealing with appeals; and on two others that are not treated separately here: 'The research environment' and 'Development of research and other skills'. The report also made five recommendations (relating to admissions, supervision, assessment and

complaints), as detailed in Section 6. It was a noteworthy feature of the Briefing Paper that the School had been quick to act upon them. Also in 2006, the RPSGB agreed that the School's MPharm degree should be re-accredited for a full period of five years, without conditions.

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

28 The University of London's academic framework is embodied in University Ordinances that set out the degrees that may be awarded and the broad criteria that apply to each. Responsibility for the standard and quality assurance of these degrees was thereby devolved to the School. For its research degrees, the School chose to continue using the University's regulations and procedures rather than develop its own.

29 The School's governing body is known as Council. Statute 16 of the University of London empowers it to conduct the general business of the School, provided that it seeks the opinion of Academic Board before deciding on any question of educational policy.

30 The Academic Board consists of all teaching staff holding permanent appointments, as full members, and, as observers, certain other staff and two students. It is chaired by the Dean. Its terms of reference state that it shall 'consider and advise the Council upon all academic matters and questions affecting the educational policy of the School, the organisation of teaching and research and courses of instruction'. A few examples are given, but none make explicit reference to the management of academic standards or quality. However, the quality assurance procedures that were approved by Council and lodged with the University in 1999 do specify that responsibility for quality assurance rests with the Academic Board.

31 The same procedures also state that Academic Board appointed an ASC to ensure that its policies are carried out. The terms of reference and membership of the ASC are still under review but it currently comprises four external members, one of whom takes the chair, the Dean, the four heads of department and the Registrar (as Secretary) while three other members of staff attend by invitation. Two of the external members were added to the ASC in response to the Ganderton Report. Its present terms of reference are essentially unchanged from those first drawn up in 1999. They state that the ASC reports to Academic Board and they detail its responsibility for quality assurance, for receiving annual reports for all taught courses and all accreditation reports, and for making recommendations to the Board on regulations, including those governing the approval of programmes and the conduct of examinations.

32 The Education Directorate, which came into effect in January 2007, is not a committee of the School but is responsible for the 'management, delivery and enhancement' of all taught degree programmes. It is headed by the Academic Director of Studies (ADS), who is broadly responsible for all existing programmes, and the Head of Educational Development, who is responsible for new programmes, although there is overlap between the roles. Both are involved with quality assurance and enhancement.

33 The ADS has assumed the chairmanship of the Undergraduate Studies Management Group (USMG), which also includes the Head of Educational Development and the course co-ordinators for all seven of the courses that constitute the MPharm degree. The USMG is responsible for the curriculum, organisation and delivery of this programme, and for evaluating, at least annually, each of the courses. The resulting course reports are considered by ASC which then reports on them to the Academic Board.

34 The Taught Postgraduate Studies Committee (TPSC) performs an equivalent role for the taught postgraduate programmes and has an analogous membership. It, too, is chaired by the ADS.

35 The Higher Degrees Committee (HDC) provides advice on the registration and examination of research students, organises their training, and monitors their progress and the facilities available to them. Its membership includes a majority of students.



36 In summary, the USMG, the TPSC and the HDC all report to the Academic Board. In respect of matters pertaining to course evaluation and quality assurance, each does so via the ASC.

37 There is also a Pharmacy Advisory Committee which includes a broad range of external members and whose function is to advise the School on issues of professional practice.

38 The Dean has replaced an earlier Planning and Resources Executive Committee with a new Executive Committee, which reports to Academic Board and to Council. All three of the ADS, the Head of Educational Development and the Director of Graduate Studies are members and can thereby discuss and negotiate resource and staffing issues with the Dean and with heads of department.

39 Although all of these bodies were described in the Briefing Paper, the precise relationships between them were not immediately clear to the audit team. This was partly because the protracted discussions concerning changes to the remit and membership of the ASC have yet to be concluded. But, it was also because the terms of reference of the other bodies were not set down as clearly as they could be, nor the reporting lines between them. A new Committee Organisational Chart was drawn up by the School at the request of the team and this does provide a transparent overview of the interrelationships.

40 Given that the School is already committed to finalising changes to the ASC, this would be an opportune moment to revisit the terms of reference of the other bodies described above. The audit team was surprised by the brevity of the terms of reference for the Academic Board which lack any explicit reference to academic standards or to quality assurance. This might account for the fact that when some of the senior staff of the School were asked where the responsibility for academic standards rests, differing answers were given and none mentioned the Academic Board, although that is where the Briefing Paper locates it. A review of the Board's terms of reference might, perhaps, be accompanied by a fresh look at its membership. On the one hand this seems large given the functions it must perform and the fact that comparable bodies in other institutions (including much larger ones) have often created smaller proxies to improve efficiency. On the other, it was not clear to the audit team why the two students attend as observers rather than as full members.

41 The individual terms of reference of the USMG, the TPSC and the HDC would also benefit from some revision. Those of the USMG make no mention of ASC. Also, whereas it is stated that the TPSC shall meet at least three times each session, no such minimum is set for the USMG, or indeed for the ASC itself. This matters because the meetings of USMG and TPSC need to be in phase with those of ASC and the Academic Board for the School's quality assurance procedures to work as intended, whereas the schedule broke down in 2005-06. Nothing at all is said about the frequency of HDC meetings, nor do its terms of reference make it explicit that they include reserved business from which the student members are excluded.

42 The audit team therefore considers it advisable for the institution to address these matters, as follows:

In order to guarantee the overall coherence of the academic committee structure, including the location of the strategic and operational responsibility for the management of quality and standards:

- a) review the terms of reference of the Academic Board, and
- b) complete the review of the functions and membership of the Academic Standards Committee and of its relationships to the Academic Board, the Undergraduate Studies Management Group, the Taught Postgraduate Studies Committee, the Higher Degrees Committee and the newly established Education Directorate, so as to ensure that it can fulfil its central role in quality assurance and enhancement.

43 Regarding the future of the ASC itself, the Briefing Paper states: '[It] will not be the body to carry out quality assurance procedures. Instead, this will happen in the relevant internal committees, with ASC auditing whether this has taken place and whether appropriate follow-up action has occurred...' Thus, as confirmed by the Dean, an essential feature of the new system will be that routine quality assurance and monitoring is undertaken by the USMG, TPSC and HDC (although the role of the latter is inevitably somewhat different, in part because the University of London retains responsibility for the regulation and assessment of research degrees), and that their actions will be audited by an ASC that has the power to direct (and which will therefore be able to capitalise properly on its external members) and which in turn reports to the Academic Board. The Dean recognised that this might entail some further changes to the membership of ASC.

44 The Briefing Paper presents this redefinition of the role of the ASC as fulfilling one of the recommendations of the November 2006 Knox Cropper report on quality assurance arrangements. A further response to that report will be the replacement of the School's current quality assurance procedures 'by a much more comprehensive Quality Assurance Manual'. A table of contents has been drawn up for this manual. The audit team was satisfied by its outline structure and indicative content, with the proviso that it should be clearly linked to the QAA Academic Infrastructure, including the *Code of practice for the assurance of academic quality and standards in higher education (Code of practice)*. It will be very important, moreover, to ensure that the manual is completed quickly. Some of the teaching staff interviewed by the audit team were unaware that it is in course of preparation and were meanwhile unable to say where they could find a written statement of the School's quality assurance procedures.

45 These considerations were the basis for a second advisable recommendation, to: Expedite progress with the new quality assurance manual to meet the planned implementation date, ensuring that the Academic Infrastructure is embedded within it and that its contents and purpose are communicated to all staff.

46 In order to be as clear as possible as to how the School expects its quality assurance system to operate once its own intended revisions are complete, the audit team requested that it produce an up-to-date statement, which need not be highly detailed, but would be as precise as the current formulation would allow. This was drafted by two of the members of the new Education Directorate and given to the team just before the end of the main audit visit. Entitled Forward Look, the two page paper confirms that the Directorate now has the support of two programme managers, whose role is to assist the ADS with routine management of the principal taught programmes, and of an Examinations Officer, whose remit also includes the management of student feedback and evaluation processes. The aim of the Directorate is to enhance the School's learning and teaching through a remit (which will presumably be set down formally) to 'monitor and develop strategy and coordinate this with operational management'. Its current priorities are to:

- a) facilitate the development of the ASC into a Quality Audit Committee, whilst also progressing the Quality Assurance Handbook
- b) establish periodic review of the MPharm and of taught postgraduate programmes.

47 During the final meeting between the audit team and the senior staff of the School, the members of the Education Directorate agreed that a further priority would be the updating of the School's Learning and Teaching Strategy. The current version predates the new approach to the management of learning and teaching, and in particular its quality assurance and enhancement, that has been initiated by the new Dean. The Directorate also agreed that it would be helpful to include assessment as an explicit element of the revised strategy.

48 These considerations gave rise to a desirable recommendation, as follows: Update the School's learning and teaching strategy and incorporate an assessment strategy.

49 In addition to the committee structure noted above, a further committee contributes to the framework for managing learning opportunities. The Information Systems Advisory Group (ISAG) reports to the School Executive Committee. ISAG is chaired by the Director of Educational Development and its terms of reference include advising the Executive Committee on setting appropriate objectives for information systems provision; determining appropriate strategies for enhancing such and coordinating agreed strategies for information systems. The membership of ISAG is intended to reflect the information systems stakeholders in the School. While its role in the management of learning opportunities is to ensure adequate information systems provision, the Briefing Paper indicated that ISAG maintained an overview of IT and library resources. In addition the Library and Information Services report on a regular basis to the Academic Board.

50 The School has a Learning and Teaching Strategy 2002-05, which states that the aim of the undergraduate pharmacy education is to ensure that graduates achieve a standard of competence to be able to discharge the duties of a pre-registration pharmacist. The strategy further states 'the over-riding principles for the strategy will be the quality assurance of syllabus content, programme delivery, development of staff professional needs, integrity of assessment methods and authenticity of student work.

51 The School does not have an institutional strategy for enhancement. However, it has enhanced discreet areas of activity, and has future plans to enhance the quality of its provision, and the monitoring thereof.

52 The audit team saw and heard evidence regarding both areas where a strategic approach to enhancement could facilitate the improvement of processes and those where an institutional approach is working effectively to ensure that student learning opportunities are effectively considered and improved. Consequently, it concluded that a institution-wide strategic approach to enhancement could assist the School in further developing, monitoring and disseminating effective practice.

53 The responsibility for the standard and quality of research degrees is shared between the School and the University of London as the School has chosen to operate under the University's Federal Regulations. The application of these Regulations and the supporting systems and procedures for postgraduate research students align with the *Code of practice, Section 1: Postgraduate research programmes*.

54 Research students have two supervisors who undergo formal training, through a recently introduced workshop. Primary supervisors must have previous supervisory experience, before being appointed. There is a comprehensive PhD Supervisor Handbook available to support them. The audit team felt that the supervisory arrangements were supportive and effective and this view was echoed by the students.

55 On the evidence it saw and heard, the audit team concluded that the arrangements for postgraduate research students, including those for support, supervision and assessment, were rigorous, operated effectively and fully aligned with of the *Code of practice, Section 1*.

56 At the time of the audit, the School's printed prospectus had been out-of-print for some time. Although the School's informative and attractive website is regularly updated, the online prospectus contained therein was also out of date, and featured the previous Dean. However, there is a temporary, interim hard-copy prospectus which students have found helpful. The School has not engaged with the Teaching Quality Information website, and is awaiting its relaunch.

57 Although the audit team felt that there was not enough uniformity and standardisation across course handbooks, they agreed with students that the quality of course information has improved year-on-year, and that pre-application information is comprehensive.

58 On the evidence it saw and heard regarding the continuing improvement of the School's published information, the audit team believes that reliance can be placed on its accuracy and completeness.

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

### **External examiners**

59 The Academic Director of Studies (ADS), in consultation with the Head of Department and the Registrar, presents nominations for new external examiners and, where appropriate, extensions to existing contracts to the Academic Standards Committee (ASC) and the Academic Board. The Registrar keeps a register of members of staff who hold external examining appointments elsewhere, which is used as a reference during the nomination process in order to avoid reciprocity. The audit team noted this as being particularly effective practice.

60 Nominations are also considered by Undergraduate Studies Management Group (USMG) or Taught Postgraduate Studies Committee (TPSC) as appropriate before being considered by ASC. The normal period is for a four-year appointment with extensions of one further year that can be approved by ASC and Academic Board. The audit team found evidence of the implementation of these procedures from discussions with staff and scrutiny of committee meeting minutes.

61 As well as the four external examiners for the MPharm, there is an intercollegiate external examiner to help ensure standards across the University of London. The aim is to have a number of subject specialist external examiners for the MSc programmes and one overall intercollegiate examiner. The School has now combined examination boards for the master's programmes at which all master's external examiners are present. There is not an intercollegiate or chief examiner at present, although the need for such a post will be kept under consideration as the size of the master's provision expands.

62 External examiners' reports are sent straight to the Dean who forwards them to ADS, the relevant examination board chair and the course director. A response to each report is produced normally by the Chair of the Examination Board, although this is not always the case. A report on external examiners' comments is considered by USMG, ASC and the Academic Board as part of the annual monitoring process. For each of the taught master's programmes, course reports reflecting external examiners' comments are considered by TPSC, ASC and the Academic Board.

63 During meetings with staff, there was some confusion over the responsibility for responding to external examiners' reports and over which committees formally scrutinise the reports or summaries of them. Scrutiny of the external examiner reports themselves and the above documents indicated that not all issues raised were addressed. For example, with the MPharm external examiner reports issues were raised over inconsistencies in marking methods for multiple choice questions; inconsistent messages about mitigating circumstances and other matters; training and support for new academics in setting and marking examinations; and a late referral paper that was not seen by the external and that was identical to the original paper. These were not addressed in any of the individual course annual reports and consequently no actions were identified. However, most of the issues raised by the external examiners were addressed in the separate report on external examiners' comments.

64 The postgraduate annual course review documents viewed by the audit team demonstrated appropriate consideration of and response to external examiners' reports including the identification of any necessary actions. Actions from previous reports are noted along with the progress made against them. These reports are considered by ASC. A summary report of external examiners' comments is also produced for the University of London.

65 The set of external examiner reports for 2005 and 2006 is not complete, due to some external examiners not responding to requests for their report. Although remedial action was taken in one instance, there is no codified procedure for dealing with such circumstances. The intention is that the new Quality Assurance Manual will include a section on this, and on the premature termination of external examiner contracts.

66 The audit team felt that the way in which external examiners and their reports are used is appropriate and in line with of the *Code of practice, Section 4: External examining*. The procedures could be strengthened by requiring that all MPharm Course annual reports specifically address external examiner comments and incorporate them in the action plans. They will also be strengthened when the Quality Assurance Manual is developed and published and the sections dealing with the non-submission of external examiners reports are made operational.

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

67 Procedure for developing and approving new programmes was introduced in 2003. An initial proposal (Stage 1) goes to the Executive Committee (previously the Policy and Resource Executive Committee). This initial proposal outlines, inter alia, the fit with School strategy, the market, estimated costs, estimated income and the team who will develop the proposal (the curriculum group). The proposal is informally discussed with the Head of Educational Development prior to submission to the Executive Committee. If the Executive Committee approves the proposal, a more detailed version is developed (Stage 2), including actual costings, a detailed curriculum and assessment scheme, staffing and resource requirements. This is approved by the relevant undergraduate or postgraduate board and Academic Board, although none of the minutes of Academic Board seen by the audit team included any approval of new proposals. The team did, however, see detailed evidence of external consultation for the proposal for the MSc in Pharmacognosy.

68 Once approved, the programme goes forward to validation (Stage 3). The procedures state that a Validation Committee is appointed by the Academic Board which is chaired by a Head of Department and includes one external member. The audit team learned that in the case of the two validations which were recently conducted, the Academic Board had not appointed a Validation Committee, although one was convened. The team also learned that the proposing team for the Postgraduate Diploma (PgDip) in General Pharmacy Practice put forward the name of the external member, subject to discussion with the Head of Department and the Head of Educational Development. The team was told that the external panel member for that validation was the external examiner for the existing Certificate in Medicines Management for Pharmacy Technicians. The recommendation of the Validation Committee is subject to approval by Academic Board, although again the minutes of Academic Board seen by the team did not include any such approvals. The successful validation of the Certificate in Medicines Management for Pharmacy Technicians was noted in ASC, although it is clear from the minutes of that meeting that members were unclear which body within the School had the power to grant final approval. This led the team to deduce that it would be advisable for the School to ensure adherence to programme validation procedures and in particular develop criteria for establishing the independence of external panel members.

69 Overall, it was clear to the audit team that the School is still in the process of developing its procedures for the development, approval and review of new and existing programmes. It was also clear to the team, as noted above, that the path of a validation report through the committee structure is unclear to members of staff. The team would advise the School to expedite progress with the new Quality Assurance Manual to meet the planned implementation date, ensuring that the requirements of the Academic Infrastructure are embedded within it and that its contents and purpose are communicated to all staff.

70 The audit team's findings with regard to the monitoring and review of award standards can be found in Section 3 paragraphs 85 to 88.

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

### ***The framework for higher education qualifications in England, Wales and Northern Ireland and subject benchmark statements***

71 Validation procedures state that the validation committees should ensure that programmes which are validated have taken due regard of the FHEQ and, for undergraduate programmes, the relevant subject benchmark statement(s). The Briefing Paper states that all of the School's awards are in line with the FHEQ, except two which are being phased out. While this may be the case, adherence to the FHEQ is not specifically stated in the validation report seen by the audit team, although, such a statement is made in the programme specifications for the MPharm and the course provided for the Certificate in Medicines Management for Pharmacy Technicians.

### ***The Code of practice***

72 The Briefing Paper also states that the School has mapped all of its processes against the *Code of practice* and, apart from student complaints which is still being formulated, the School feels it is adherent to the *Code*. While the audit team saw a paper mapping the precepts of the *Code* against the School's processes and procedures, members of ASC met by the team were unaware of the paper. The team felt that a more School-wide approach to consideration of the sections of the *Code* would be helpful

### **Programme specifications**

73 The Briefing Paper noted that the School has not embraced programme specifications although such documents exist for undergraduate provision.

### **Other external reference points**

74 The MPharm was recently re-accredited by the Royal Pharmaceutical Society of Great Britain with no conditions.

75 The Diploma in Pharmacy Practice (now renamed PgDip in General Pharmacy Practice) developed out of the National Health Service's (NHS) Agenda for Change and was mapped against the NHS Knowledge and Skills Framework

### **Assessment policies and regulations**

76 The Briefing Paper lists a number of School policies that relate to the assessment of students. These include course regulations and marking schemes; general examination regulations; penalties for late submission of coursework; absence policy; plagiarism policy; and instructions regarding special needs and extenuating circumstances. It was not clear from the Briefing Paper how and where these are codified; although, the policies on late submission and plagiarism are identified in 1.4 of the Briefing Paper as being recent developments (2004). Inspection of the documentation identified that the policies listed above appeared as separate documents, some of which are referred to or reproduced in programme handbooks. However, the detail and content is not consistent. There is a statement on assessment for the MPharm which gives guidance on the minimum requirements of students for the award of the degree together with 'additional standards to be achieved by typical graduates'. This guidance broadly adheres to the FHEQ but the status of the document was not clear to the audit team.

77 There is a student disciplinary procedure which incorporates some aspects of academic misconduct, such as cheating in examinations, but, not plagiarism. Plagiarism is dealt with by a different procedure that involves a School of Pharmacy Plagiarism Committee (SOPCC) which does not appear as part of the main committee structure. Although the procedure appears to work effectively, the audit team felt that the separation of plagiarism from other forms of academic misconduct added to the complexity of the procedures for assessment.

78 Academic staff members are given 'guidelines on marking, a general marking scheme and the higher education descriptors' although, it was not clear to the audit team how these are accessed. External examiners have the opportunity to review examination papers before they are set but there are no statements about moderation of coursework assignments. There is no School-wide policy on the timeliness of the return of assessments to students. There are guidelines on double-marking that were issued as part of a paper to all examiners on the MPharm that suggests different approaches for the courses, including full double-marking for courses F and G, together with indications of the numbers of scripts that should be reviewed by the external examiners. Double-marking takes place on assessments in the taught postgraduate programmes. Alignment with the *Code of practice, Section 6: Assessment of students*, is discussed in the Briefing Paper which notes recent 'tightening of procedures' after an investigation instigated by the Dean. There is an annual seminar for tutors on grading and marking student work. The Briefing Paper claimed that external examiners have commented favourably on the standard of assessment and this view is supported by scrutiny of the reports.

79 Formal examination boards with external examiners present are held for all programmes. A single board at present covers the School taught postgraduate programmes, although, this structure may change as the programmes develop and expand.

80 There is no overall assessment policy or strategy for the School of Pharmacy and staff felt that developing such a strategy and related policies and procedures would be difficult. Issues that would normally be addressed in such a strategy or derived policies and procedures, such as the number of examinations occurring in an academic session, compensation procedures and coursework procedures are discussed at the Academic Board. The audit team felt that the information on various aspects of student assessment had developed in a rather piecemeal way and was not drawn together in a single source document. Consequently, the team recommends that it is desirable for the School to develop, as part of a revised Learning and Teaching Strategy, an assessment strategy and, based on this, a set of School-wide policies and procedures.

### **Management information (including progression and completion statistics)**

81 There is no indication from the Briefing Paper as to whether management information data is used as part of the annual monitoring process. However, the audit team discovered that it is used as part of annual monitoring by course leaders to measure progression and achievement rates. Indeed, there are cohort analyses appearing in the annual course reviews, although these do vary in detail. Meetings with staff confirmed that there is not a systematic approach to the analysis as part of the annual monitoring process, with some staff questioning the usefulness of producing and analysing such data.

82 There have been exercises to try to match entry qualifications to degree classifications and use has been made of the statistics to compare degree classifications awarded by the School with those in other institutions. Staff commented that there did not seem to be much correlation between entry qualifications and exit awards on the MPharm, with the possible exception of those entering with a GCE A-Level in Biology possibly faring better in terms of their award. The audit team felt that this in some sense contradicted the view expressed in the Briefing Paper that the School would no longer accept 'any D grades at all, no matter how good the other grades were'.

83 There is a comprehensive cohort analysis in the accreditation document for the MPharm. This covers applications, first-year enrolments and total enrolments over a five-year period. It also provides information on entry qualifications, disability and ethnicity for the 2005 total cohort. There is an analysis of degree classifications over the past three years and a comprehensive set of progression statistics over four years. There are also examination statistics for all courses in the MPharm programme.

### **Other modes of study**

84 The audit team's comments in this respect may be found in Section 5 (paragraphs 149 to 152).

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

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

85 A detailed procedure for annual monitoring was approved by Council in 1999. For the MPharm, course reports are considered by Undergraduate Studies Management Group (USMG), detailing action taken in response to student and external feedback for the previous semester and action taken with respect to courses to be held in the next semester. An overview report, with external examiners' reports attached, is considered by Academic Standards Committee (ASC). Postgraduate annual reports are discussed in brief at Taught Postgraduate Studies Committee (TPSC) and an overall self-assessment report for each programme is presented to ASC. The procedure states that ASC should consider the MPharm report, together with reports from the Chair of the Examination Boards, the external examiner, Registrar and Welfare Officer in the autumn term. The process also states that ASC makes recommendations to USMG and a mutually agreed action plan is produced. The same process applies for postgraduate provision, with ASC receiving reports for this in the spring term. After receipt of the reports, ASC makes recommendations to the Academic Board. There were no meetings of ASC from May 2005 to June 2006 due to extenuating circumstances. Therefore ASC discussed the MPharm annual report 2004-05 and taught postgraduate annual reports 2004-05 in July 2006. ASC received the MPharm annual report 2005-06 and higher degrees report at its October 2006 meeting. Taught postgraduate reports 2005-06 were received at the February 2007 meeting. As such the audit team could not trace any forward transmission to the Academic Board.

86 Reports have a standard format and include, inter alia, actions taken as a result of previous monitoring and actions taken as a result of student feedback. They also include as appendices external examiner reports.

87 The School does not, at present, have a system of periodic review although the MPharm is accredited by the Royal Pharmaceutical Society of Great Britain (RPSGB) every five years. The index of the proposed Quality Assurance Manual seen by the audit team does mention periodic review and the team was told that the School planned introducing periodic review for all of its provision.

88 It was clear to the audit team, from meetings with staff, that some staff are still unconvinced of the advantages of periodic review of programmes despite the fact that the School intends to introduce such a process. The team felt that the excellent documentation which was provided for the re-accreditation of the MPharm by the RPSGB, provided the School with valuable information in respect of, inter alia, action taken as a result of recommendations since the last accreditation visit and an overview of developments in the provision in the ensuing years, so providing the School with strategic oversight of its major undergraduate provision. The team felt that such an internal review of all of its taught provision, for example, on a five-year basis, would also benefit the School and provide it with valuable information regarding progression and attrition rates, changes in curriculum and changes in assessment over a protracted period of time. The team would therefore advise the School to introduce a system of periodic review for all taught provision which will enable the School to take a strategic view of its present and future curricula.

### **Assessment policies**

89 Students reported that the assessment briefs set were clear and unambiguous; they were confident that students knew what was expected of them and what the grading criteria were. Feedback on assignments was variable in terms of detail and timeliness but students did not see this as a problem and noted that there were always opportunities to gain additional feedback from staff either individually or as a group.

90 The School also has the practice of returning marked examination scripts to students on the MPharm and they claim that this practice provides checks on accuracy and comparability.



Discussions with the students and staff confirmed that this practice was well received and allowed an aspect of formative assessment not normally found with examinations. The School had been commended for this practice in previous reviews and the audit team felt that this was an example of continuing innovative practice.

### **Management information (including completion and progression statistics)**

91 Information on admissions, progression and completion of student cohorts is held by the Registry and reports are presented to the Academic Board, examination boards and 'various committees'. There is a statement about the Dean and senior staff using management information to measure the 'academic health' of the School but this is not a systematic process. However, there is an example of how this led to change in first-year multiple choice question assessment on the MPharm approved by the Academic Board.

92 Despite seeing some examples of excellent presentation and analysis in the MPharm accreditation document and in some of the course annual reports, the audit team felt that further use could be made of management information (see Section 4 for further details).

### **Management information (including student representation, feedback and National Student Survey outcomes)**

93 There is no designated Management Information System department; management information resides within the Registry. Registry is able to provide data sets on qualifications on entry, student demographics, student progression and first destinations data, and completion rates. Staff claim that reports on these are sent to the Academic Board and appropriate committees. Scrutiny of the Academic Board minutes, however, suggests that specific reports are not received by the Board. Nonetheless, the Board regularly notes enrolment and achievement data, although there would seem to be little discussion on this or any actions arising therefrom. Other management data finds its way to the Academic Board indirectly, through annual course reports which are received by ASC which, in turn, reports to the Academic Board. At its November 2006 meeting, for example, Academic Board received the ASC minutes of 24 October 2006, although the Board did not specifically note the MPharm course report, or any data-related issues from it. From reading the Academic Board and ASC minutes, it would seem that School-wide strategic overview of management data is inconsistent though the School engages with it at programme level. It should be noted that the terms of reference (ToR) for Academic Board make no mention of the monitoring, or receiving, of management data (although this is part of a broader issue concerning the usefulness of various ToR). These observations were integral to the audit team's decision to make the recommendation set out in Section 1 (paragraphs 49 to 58).

94 The use of course questionnaires as management information, although well-established for the MPharm, is less so for other courses. The virtual learning environment, Blackboard, is also used to obtain student feedback at course level.

95 In the 2005 and 2006 National Student Survey (NSS), the School achieved an average rating of 4.0, compared with the subject sector average of 4.1, and the higher education sector average of 4.1. The significant weakness for both years was in the area of teaching resources. A disappointing 2.8 in 2005 had improved to 3.1 for 2006, although this has to be seen against a subject national average of 4.2, and the sector-wide average of 4.1. The Dean has accepted that the NSS results were 'a wakeup call' for the School. ASC and the USMG reported on the results, as did Academic Board. The School has responded to the NSS results with rigour. For example, all social areas of the School now have wireless internet access, the library has extended opening times, including weekends, and there is a pool of laptops available for hire.

96 In order to fully assess the level of student concerns expressed through the NSS, a one-off internal questionnaire was developed specifically to obtain more detailed information on these issues. Focus groups were also established. Students confirm that considerable improvements have been made with regard to resources and the School has kept students up-to-date, for example, by means of posters, of these developments, and the outcomes from questionnaires.

97 Management information does not seem to be used to monitor progress of students with disabilities, although these students are, from evidence seen by the audit team, quite clearly, well supported.

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

98 There is student representation on key committees, and students have good awareness of this. Student representatives generally volunteer, but there is no formal training or briefing. There is representation for postgraduate diploma (PgDip) students, who feel that the issues they raise are addressed. There was no formal student input to the Briefing Paper, though students were facilitated in submitting their student written submissions (SWS). Whilst students generally support the tenor of the SWSs, they were received by the audit team much later than the Briefing Paper thus removing the opportunity to read the two in parallel. However, students that the team met had seen the Briefing Paper and SWS.

99 The course boards for MPharm and (PgDip), act as staff-student liaison groups. The boards meet at the end of each semester, and focus on curriculum-related issues, with a clear remit covering course content, delivery, coursework, assessment and timetabling. At the time of audit, the MPharm course board A had not yet met during the 2006-07 academic year.

100 The Joint Committee of Academic Board and Students (JCABS) meets three times a year with standard agenda items, for example, assessment issues. Its remit is to discuss curriculum matters relating to teaching and study, library provision, and resources, and any other appropriate issues. Meetings are more formal than course boards, and tend to focus on cross-college, rather than curriculum issues. Its membership is equally split between staff and students. As a subcommittee of the Academic Board, it is chaired by the Dean, and the Academic Board has a standing item which reports on the previous JCABS meeting. Recommendations from JCABS are also sent to appropriate committees. For example, a recommendation on mock exams was considered by the USMG. Students on JCABS are full members, as are those on the Higher Degrees Committee. Student representatives on the Academic Board are observers.

101 The School has an annual meeting for all PhD supervisors and students, to which MSc students are also invited.

102 Between the course boards, JCABS, and the collection, and actions arising from student views, evidence suggests that the School has efficient systems in place to engage students in its quality mechanisms.

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

103 The School has consistently been rated 5 in each of the Research Assessment Exercises and has a current portfolio of research grants totalling £12.5 million. In addition, the School is involved in a number of educational research and development projects, for example, staff are special advisers to the World Health Organisation for healthcare education and the School hosts the only international journal for pharmacy education. The claim that research informs teaching was substantiated by the undergraduate students. Students stated that some student projects reflect staff research interests. Students also told the audit team that they had been attracted to the School because of the international reputation of the staff. In addition, the team was told that undergraduate project students mingle with research students in laboratories and research students supervise MPharm student projects.

### **Resources for learning**

104 The facilities at the main site are listed in the Briefing Paper and include the library, computer unit and a multimedia unit. There are also leased facilities at Tavistock Square. The

Briefing Paper suggests that, following the School's response to the NSS survey, resources are excellent. There is no formalised strategy for learning resources, although there are detailed procedures for the allocation of funds for learning resources.

105 The accreditation document for the MPharm has a comprehensive section on learning resources, describing the methodology for allocating funds for resources; a full list of teaching and research staff; details of technical and administrative staff. There are also full descriptions of library services, IT provision, teaching and laboratory accommodation. From the result of the accreditation, it is apparent that the RPSGB considers the resources adequate.

106 As regards laboratory and library facilities, the students said that they were generally good and fit for purpose. If there were any difficulties in locating required material in the library, students had varying degrees of access to other libraries including University College London and the British Library. Both of these libraries are in close proximity to the School.

107 The School is making increasing use of BlackBoard as the standard virtual learning environment. Students welcomed these developments and commented favourably on sites, not only as repositories for lecture notes and other information, but also as aids to communication with staff and other course members.

### **Admissions policy**

108 There is an admissions committee which deals with undergraduate admissions matters chaired by the Academic Director of Studies (ADS). At present it includes members of academic staff who act as admissions tutors on the MPharm, the Assistant Registrar, the Outreach Officer and the International Officer. Until recently it met once a year to decide admissions standards and procedures but has recently met more frequently. The Briefing Paper states that it is being reconstituted to include taught postgraduate admissions. Admissions for both undergraduate and taught postgraduate are initially scrutinised by the relevant assistant registrars. At undergraduate level all applicants who meet the entry criteria and are based in the United Kingdom (UK) are invited to an open day interview. International students are either made an offer based on their application form or invited to an interview with the International Officer in their home country. Decisions on non-standard applications are taken by the Dean and the ADS.

109 The School noticed a correlation between student failure and performance at GCE A-Level and on the basis of such have now decided not to offer places to students with GCE A-Level grades of D or below. For similar reasons the School treats Access courses as a refresher course as long as students can demonstrate that they have previously achieved a standard in science subjects comparable to GCE A-Level. In addition, ASC recently accepted a recommendation from the MPharm Admissions Group that the group would prefer students to have studied Chemistry and two other subjects from Biology, Physics or Mathematics and that UK-based students would only receive offers after they had attended a School Open Day and had been interviewed. There are detailed guidelines in respect of interviewing.

110 Taught postgraduate applications are normally considered on the basis of their application and supporting evidence alone as the majority of taught postgraduate students are from outside the UK. The decision to admit to the relevant programmes is made by the applicable course director on the basis of the nature and standard of the first degree and English proficiency.

111 Academic Board receives regular reports from both the MPharm Admissions Group and from the TPSC in relation to applications and enrolments in addition to reports regarding PhD enrolments.

112 On the evidence it saw, the audit team concluded that the School's admissions policy was rigorous and fair.

## **Staff support, development and reward**

113 New members of staff, without teaching experience, are required to attend an accredited higher education teaching and learning programme, normally through the Institute of Education. New members of staff are also given a mentor to provide support and guidance and are given reduced teaching and administrative duties.

114 There is a staff development and support scheme through the Personnel Office. There are some School wide initiatives, such as training for the European Computer Driving License (ECDL), e-based learning, and use of IT in teaching and learning. There are also programmes of activities for individual members of staff. The Dean's view was that effective staff development is a crucial part of the School strategy.

115 The Dean has considered the 2003 recommendation on the use of a formalised workload analysis for academic staff, but has yet to find one that he feels comfortable with in terms of the weightings allocated to different activities. The staff also felt that a formalised model was inappropriate. They felt that the small size and specialist nature of the School meant that there were opportunities for informal discussions of workload and the preferred approach to workload balancing was through consultation and negotiation between heads of department and individual members of staff.

116 There is a new promotions procedure that rewards excellence in teaching and learning as well as research, including the possibility of promotion to chair-level for teaching. This appeared to the audit team to be open and transparent. The procedure has just been introduced this year and it was therefore not possible for the team to judge its operational effectiveness.

117 Nothing is said in the Briefing Paper about appraisal, or of how the identification of staff development needs arise from staff appraisal. From its meetings, the audit team learned that there was not a consistent and systematic approach to staff appraisal. The Dean acknowledges that appraisal systems have required review and is hoping to roll out a new system which would make it easier for heads of department to identify individual and collective staff development needs. There were comments from staff that the previous system had not proved to be effective as a means of identifying staff development needs, although detailed reasons were not given. Staff also felt that the small size and specialist nature of the School meant that there were opportunities for informal discussions of staff development needs which obviated the need for a formalised appraisal system. The team felt that, while this approach may identify some individual, subject related staff development needs, it was less likely to help identify individual or collective pedagogic development requirements.

118 From the Briefing Paper, there appeared to be little use made of peer observation of teaching. However, the Dean commented that it was undertaken routinely for new staff as part of their accredited higher education learning and teaching programme, and that there are instances of established staff requesting it in order to develop their teaching. Meetings with staff confirmed that peer observation forms a part of the certificate course for new staff. The audit team was able to review the portfolios of members of staff who had attended the programme and found the portfolios excellent, containing detailed reports of and reflections on observed teaching sessions. The use of peer observation by established staff was not widespread and some of those staff doubted its usefulness.

119 The audit team felt that the School was missing valuable opportunities for the identification of individual and collective staff development needs, both subject based and pedagogic, by not having a systematic approach to peer observation and academic staff appraisal. Consequently it recommends that it would be desirable for the School to continue to develop a consistent approach to appraisal to enable transparent identification of the development needs of all groups of staff.

## **Section 4: Institutional approach to quality enhancement**

### **Management information (including completion and progression statistics)**

120 The audit team felt that there was inconsistent use of management information, in particular progression statistics within the School. There are some examples of excellent presentation and analysis in the MPharm accreditation document and in some of the course annual reports. There was also some very good use of information in tracking the professional progress of graduates from the master's programme in Clinical Pharmacy when they return to their home countries. However, there are other areas, including the senior committees, where further use could be made to inform analysis and decision-making, such as in the monitoring of students with disabilities.

### **Management information (including student representation, feedback and National Student Survey outcomes)**

121 Relevant management information is used for re-accreditation submissions. Registry provides this same statistical data for course leaders as part of annual course reports. Although there is some inconsistency here, more recent course reports, compared with older ones, scrutinise this data in a more evaluative and reflective way, in order to use it as a tool for continuous improvement and enhancement. There is also some brief commentary on achievement data at some programme committees.

122 Senior staff have a clear idea on how management information can be used, and how it can be utilised strategically as a quality assurance and enhancement tool to measure the academic health of the School. However, from discussions with staff and perusal of the Academic Board and Academic Standards Committee (ASC) minutes, there is little evidence that there is yet any substantive evaluative commentary on this data at School-wide level. The School believes that the recently formed Education Directorate will allow for greater clarity of how management information can be used as a quality mechanism.

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

123 The School has an annual meeting for all PhD supervisors and students, to which MSc students are also invited. An action plan arises from this meeting. Students feel that this forum is useful. There are a number of opportunities for research students to provide feedback, and there are initiatives to involve taught postgraduates in enhancement of provision.

124 Students feel that the School is 'reasonable' in explaining why it might not act on feedback from students.

125 The audit team's other comments on this matter can be found in Section 3.

### **Resources for learning**

126 There is an ISAG chaired by the Head of Education Development. According to the Briefing Paper, this group maintains an overview of certain IT and library resources. However, the Terms of Reference for ISAG focused on the determination and coordination of strategies for information systems provision. Consequently the audit team felt that these terms of reference should be reviewed as part of a wider review of the committees.

127 The students assigned a low rating to learning resources, especially in the case of the Library and information technology (IT), when responding to the National Student Survey. The audit team was informed of a number of steps that have been taken to address this. WiFi network access has been provided in a number of communal areas; the library opening hours have been extended to include Saturdays, the Junior Common Room has been refurbished and greater IT access has been provided through desktop machines and the provision of a set of laptop computers for loan to students. In addition, the refectory opening hours have been extended to allow students greater

work space. The students acknowledged this additional provision and commented that resources were no longer a problem, with the exception of some IT provision for PhDs and access to particular paper-based and/or electronic journals for some postgraduate groups.

### **Student support**

128 Being a small, specialist monotechnic, students do not enjoy the same social resources as larger institutions. Students are therefore encouraged to engage with the Students' Union, clubs and societies at the University of London. The smallness of the School promotes a supportive environment from academic and administrative staff which helps to develop a sense of community.

129 Student induction is well organised and integrated. At induction, students are assigned an Academic Tutor, and these have been described by students as helpful and supportive. There is a specific induction day for international students prior to Freshers' Week, and students have described this as a helpful welcome to the School environment. There is a well received 'buddy' system for new undergraduates and overseas students which enhances a sense of community. Although PgDip students are not inducted at the School, students do not feel disadvantaged by this, as their attendance at the School is very limited. PgDip students also receive effective academic and pastoral support.

130 On-course, undergraduates testify to the efficacy of the Academic Tutor scheme, and advice received from the Registry. Academic Tutors meet regularly with their students, and are supported by their own Academic Tutor Handbook and Teaching Pack. Postgraduates use course directors as their Academic Tutor. Research students welcome six-monthly progress meetings with their supervisor, and their annual meeting with the Director of Graduate Studies.

131 Careers guidance and support is effectively embedded throughout the curriculum, with visiting lecturers, representatives from pharmaceutical companies, mock interviews, curriculum vitae writing, and preparation for the pre-registration year being part of the careers guidance for students.

132 Separate classes for undergraduates and postgraduates are offered to international students who require English language support. There is a School newsletter which students feel is useful.

133 The School does not have its own counselling service, but refers students to the nearby Gower Street Practice which also acts as the School's health centre. There is strong evidence that the School is offering effective support for student with a range of disabilities. This provision has been facilitated by HEFCE Strand One funding. The School currently supports 25 students with specific learning disabilities, although only two of these have profound disabilities. The Student Welfare Group, which reports to Academic Board, meets as required to monitor and provide support for students with more serious welfare needs. Registry advises academic staff if any of their students have disabilities, and advises on how these students can be supported.

134 Students are aware that they would go to the Registry in the first instance if they needed advice on how to make a formal complaint or academic appeal, and a new formal complaint procedure is currently being written by the Registry.

135 The audit team noted a number of features of good practice in relation to the School's approach to supporting students. These include: the sense of community fostered within the School, as exemplified by the 'buddy University of London' systems for new undergraduate and overseas students, and the arrangements to support disabled students, the well-received Academic Tutor scheme which operates on the MPharm programme and the effective careers support that is embedded throughout the curriculum.

## Dissemination of good practice

136 The Briefing Paper does not specifically indicate how good practice is disseminated either from within or from outside the School, although there are some examples of how the School gleans knowledge of good practice elsewhere. This is mainly through the Pharmacy Advisory Committee and via The Bloomsbury Colleges group. There are also suggestions of how the School contributes to good practice in other areas or organisations such as the World Health Organisation and through its international journal for pharmacy education research.

137 There is very little comment in the Briefing Paper on how the School itself disseminates good practice, or ensures consistency in the application of its systems and procedures, within itself. However, the Dean outlined a number of ways in which he felt that good practice could be disseminated and lead to enhancement. He highlighted the opportunities for student feedback through course boards, student representation on the Undergraduate Studies Management Group and Taught Postgraduate Studies Committee and through JCABS that brings the academic community of students and staff together. The use of management information provided by Registry and first destination data is used together with data comparing the performance of the School alumni with others in the professional qualifying examinations. This information can be used by the Education Directorate and the relevant committees to suggest enhancements to the curriculum and to the learning opportunities.

138 These views were endorsed by senior staff of the School who also cited the e-learning implementation group, intranet newsletters and staff development days as vehicles for the dissemination of good practice. They also described the role of the Pharmacy Advisory Committee in providing an external perspective.

139 With regard to research, the only reference is that from 2007, constituent colleges of the University of London will produce an annual report on research degrees for the University Research Degrees Committee to encourage the sharing of information and good practice.

140 There was a view expressed at meetings that dissemination of good practice occurred naturally due to the small size and specialist nature of the School. The audit team was given examples of how this can occur and it does acknowledge that these channels can be used. However, the team felt that a more systematic approach through course and programme monitoring and through discussion and actions from the committees would increase the opportunities for and instances of the dissemination of good practice. This in turn would enrich the opportunities for enhancement of the quality of the learning experience of students.

## Staff support, development and reward

141 The Dean's view was that effective staff development is a crucial part of the School strategy. This included encouraging the senior team (including the Dean) to develop leadership and management skills through the Leadership Foundation. However, members of the senior staff were less aware of the initiatives with the Leadership Foundation. There is no direct reference in the Briefing Paper to the Higher Education Academy, however, the School is able to draw upon the resources of the University of London's Institute of Education for continuous professional development. The School has introduced training for supervisors of research degrees as a result of QAA's Special Review. More detail on this area can be found in Section 3.

## Section 5: Collaborative arrangements

### External examiners in collaborative provision

142 The external examiners for programmes within collaborative provision are appointed by the School under the same process as that used for the MPharm and taught master's programmes. Each of the awards under collaborative provision has its own examination board where the

external examiner is present. The programmes run in Barcelona and Tübingen (see paragraph 150 below) hold local boards but these feed into the main Joint Certificate in Pharmacy Practice (JCPP) board at the School.

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

143 Procedures for approval, monitoring and review of collaborative programmes mirror those used for the School's 'home' programmes. See Sections 2 and 3 for further detail.

144 Annual monitoring of collaborative provision takes place in the same way as in-house provision in that annual course reports are produced by course directors and submitted to the Taught Postgraduate Studies Committee (TPSC) and the Academic Standards Committee (ASC). Memoranda of Agreement are clear in respect of individual partner responsibilities with the financial annex being subject to annual review by all parties.

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

145 The Briefing Paper states that the collaborative and flexible and distance learning (FDL) programmes are matched against the FHEQ and the *Code of practice* and although this was clear to the team in respect of the Certificate in Medicines Management it was less so in respect of the DipGPP. In addition, the National Health Service (NHS) Knowledge and Skills Framework has been a crucial reference point in the design of the two programmes.

### **Assessment policies and regulations**

146 The assessment procedures for collaborative provision are similar to those for other School provision, being under the control of School staff for both setting and marking of assessments. External examiners have the opportunity to inspect examinations and marked scripts. Each of the awards under collaborative provision has its own examination board where the external examiner is present. The Briefing Paper claimed that external examiners have commented favourably on the standard of assessment and this view is supported by the audit team's scrutiny of the reports.

### **Other modes of study**

147 The Briefing Paper states that the School has several collaborative programmes which can all be classed as FDL. All are delivered at a number of sites accredited by the School. One of these, the PgCert in Pharmacy Practice, is being phased out and replaced by the new DipGPP, validated in 2006, and run in partnership with other higher education institutions and the NHS, and developed in response to the NHS Agenda for Change career structure for all professions.

148 Collaborative arrangements include the JCPP which is taught at University of Tübingen (Germany) and the Hospital de la Santa Creu I Sant Pau collaboration with the University of Barcelona. These international partners gain awards which are analogous to the PgCert in Pharmacy but with some contextualisation. Both international partners wish to become more autonomous although maintaining strong links with the School. The existing Diploma in Pharmacy Practice and its top-up the MSc in Pharmacy Practice are being phased out as both no longer meet modern needs. In addition to the recently validated DipGPP, there is also the Certificate in Medicines Management for Pharmacy Technicians validated in 2005. This is run with NHS partners and exists as an integrated module of a new Foundation Degree in Pharmacy (FdSc) for pharmacy technicians which is provided through Birkbeck College, with the School and Westminster Kingsway College, a further education college, as partners. All of the programmes have external examiners who are appointed in the same way as other external examiners in the School. Since the introduction of formal validation procedures both the Certificate in Medicines Management and the DipGPP underwent a validation with external representation on the validation committee.



149 Annual monitoring of collaborative provision takes place in the same way as in-house provision in that annual course reports are produced by course directors and submitted to the TPSC and ASC. Memoranda of Agreement are clear in respect of individual partner responsibilities with the financial annex being subject to annual review by all parties. The Briefing Paper states that the collaborative and FDL programmes are matched against the FHEQ and *Code of practice* and although this was clear to the team in respect of the Certificate in Medicines Management it was less so in respect of the PgDip in General Pharmacy Practice.

150 All the programmes apart from the DipGPP are managed within the Education Directorate. The DipGPP is managed by a Joint Programme Board (JPB) comprising representatives of all the six higher education institutions involved; and new master's level provision being designed in 2007 for Advanced to Consultant practitioners will also be managed through the JPB reporting to the TPSC. The audit team had access to the programme management handbook for the PgDip and noted the clear educational infrastructure therein. The handbook also makes clear the responsibilities of the various roles involved in delivery of the provision and gives detailed requirements for both the accreditation of NHS centres for delivery of the programme and the accreditation of practice tutors. The team considered that a feature of good practice is the School's responsiveness to the changing needs of Pharmacy education, particularly those of the NHS and post-registration practitioners, where the School is playing a leading role in establishing a cadre of practice educators.

### **Resources for learning**

151 The virtual learning environment was also available to students on collaborative programmes, such as the DipGPP, and students at these sites commented on its usefulness and accessibility. Staff also commented on developments in its use such as providing an easy means of undertaking surveys of student opinion. The audit team applauded these developments and would encourage the School in the development of a strategy for e- or blended learning in order to help consolidate this progress.

### **Dissemination of good practice**

152 From meetings with staff, the audit team found no direct references to instances of the dissemination of good practice through the collaborative provision. However, there were good working relationships described between the link tutors and the School that inform the course monitoring process. This is supplemented by formal meetings every three months between NHS representatives and the School. The audit team noted that this contributes to the School's responsiveness to the changing needs of pharmacy education, particularly those of the NHS.

### **Staff support, development and reward**

153 Appraisal systems are much more formalised within most of the collaborative partners. Consequently, staff development needs are identified and satisfied locally. There are, however, opportunities for partner staff to participate in School staff development, although the audit team saw no evidence of this having been taken up.

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

### **Selection, admission, induction and supervision of research students**

154 Research degree provision was reviewed by the QAA's Special Review of research degree programmes in 2006. This was a desk-based exercise but the positive findings were borne out by the present audit team's visit to the School.

155 In 2006, the reviewers judged that the arrangements made by the School to secure and enhance the quality and standards of its research degree provision were 'appropriate and satisfactory'. They used the same words to record their judgements on three of the areas specified in this template: namely, progress review, collecting and acting on feedback, and dealing with appeals; and on two others that are not treated separately here: 'The research environment' and 'Development of research and other skills'. The report also made five recommendations (relating to admissions, supervision, assessment and complaints, as detailed below). It was a noteworthy feature of the Briefing Paper that the School had been quick to act upon them.

### **Selection and admission**

156 According to its website, the School is able to offer about 25 research studentships each year, as a result of which virtually all United Kingdom (UK)/European Union (EU) students are funded. A table of current student numbers, requested by the team, showed that the UK/EU intake had more than halved in the current session, although this had been partly offset by an increase in overseas admissions. The Director of Graduate Studies (DGS) explained that the drop was partly the result of variations in the availability of external funding for studentships. The Dean added that he hoped that the School would be able to use its own funding for studentships more strategically in future, so as to give staff an incentive in their search for external sources of support.

157 Opportunities are advertised on the School website which also includes an online application form. The website mentions an annual open day for prospective PhD students which the QAA Special Review listed as a key feature. (The link was broken when the present team came to look for it but was restored as soon as they pointed this out.) Candidates must have an Upper Second class honours degree or better to be considered.

158 The School accepted the recommendation in the Special Review that it should standardise the interview component of its admissions procedures. This is being done by the DGS, who has been collecting examples of good practice elsewhere. The PhD students who met the team during the briefing visit praised the School for the flexibility and rapidity of its admissions process.

159 All research students are initially registered for an MPhil. The expectation is that they will be ready to transfer to PhD registration by the end of the first year. Only a very few students (typically, practising pharmacists in employment wishing to undertake a more restricted project) have ever been admitted with an MPhil as the target qualification.

160 Induction is not limited to new students because second and third-year students are also provided with induction courses as part of a comprehensive training programme that was introduced 10 years ago. The School also participates in the Bloomsbury Postgraduate Skills Network (BPSN), which maximises the resources of the constituent institutions by having each contribute elements to a common programme. For example, the School of Pharmacy contributes a course on Plagiarism, Ethics and Scientific Fraud. The audit team found that the link from the BPSN network to the School was out of action, whereas those to all the other institutions were working, but on pointing this out to the School it was restored.

161 All students are given a logbook as part of their induction pack which is reviewed at least twice a year by the supervisor. The QAA Special Review mentioned that this might go online. When asked about this the DGS explained that she is hoping to utilise an e-Logbook developed by University College London, if certain practical issues concerning ownership and support can be resolved. Both the students' written submission (SWS) and the student meeting reported that the logbooks are useful.

162 Students are assigned two supervisors, one of whom must be research active according to the QAA Special Review. New staff who have not supervised before must serve a period as aco-supervisor before being allowed to act as a primary supervisor. The QAA Special Review recommended formal supervisor training and a two-day workshop, delivered with the help of staff from Imperial College, London, was held at the end of March 2007. There was good attendance by supervisors at all levels of experience and the exercise was regarded as very useful.

163 The QAA Special Review also recommended a limit on the maximum number of students per supervisor. This was the subject of some debate within the School but a policy was agreed by the Academic Board in November 2006. Six is now the normal maximum, with the possibility of a further three through joint or co-supervision.

164 The third edition of the School's PhD Supervisor Handbook was made available to the audit team. Among the many useful features of this valuable compendium is a list of the training courses available to students, detailed guidance on how progress is monitored and the form that all supervisors must complete when offering studentships. The form includes information about the supervisor's previous supervision record, following a request from students on the Higher Degrees Committee that such information should be made available.

165 The audit team asked what a student would do if unhappy with their supervisor, and was told that the normal recourse would be to the DGS.

### **Progress and review arrangements**

166 The progress of research students is reviewed continuously by means of a six-monthly progress form, completed by both student and supervisor. The DGS reads all these forms and, since 2006, also meets every student individually once a year. As previously mentioned, students are initially registered for the MPhil. Transfer to PhD is subject to a satisfactory viva, at the end of the first year, based on a substantial written report produced by the student after 10 months. Students must produce a further, shorter report at the end of their second year and attend a review meeting in their third year. Information about all of these processes is included in the Supervisor Handbook.

167 The School's 'Submission for QAA Special Review' reported that submission rates have consistently exceeded 80 per cent for students entering since 1998-99, which is substantially above the national average. There is now a stiff financial penalty for full-time students who fail to submit within 45 months and registration automatically terminates at the end of 60 months. Of the 155 students who have been examined since 2000-01 only six were referred back at viva; all but one (who was offered, but declined, an MPhil) passed; and 152 did so at PhD level. Detailed statistics on progression were supplied to the review team.

168 Reference has already been made to the School's long-established, and extensive, training programme for research students. The SWS mentioned some reservations in respect of training to use specialised equipment and in qualitative methods for students in the area of practice and policy, but was otherwise supportive of the programme. All the research students interviewed by the audit team said how helpful they had found the training to be. One student suggested that it might be made even better by introducing some additional generic skills training, for instance in the art of reading scientific papers, but also acknowledged that it could be difficult to find common ground given the diversity of research topics. For another student, the fact that individual needs were met by tailor-made advice and mentoring was one of the strengths of the School.

169 Research students welcome the opportunity that some have to act as demonstrators for MPharm classes, and to assist with the supervision of MPharm projects. According to those interviewed by the audit team, some demonstrating is possible without special training (although all are briefed beforehand), but all students are encouraged to take two short courses, successful completion of which results in a modest increase in the rate of pay and recognition as a 'Teaching Assistant'. The students also confirmed that if they were involved in marking undergraduate work this would be under guidance and with moderation.

170 Research students met by the audit team said that resources, including opportunities to attend conferences, were good, although it was reported that the School does not take some key journals and that the policy of mutually exclusive subscription to either paper journals (meaning that, for example, Nature cannot be accessed electronically) or to e-journals (for which only the most recent volumes may be available) can prove difficult.

171 The audit team was impressed by the careful way in which the School monitors the progress of its research students and wishes to recognise: The procedures for reviewing the progress of postgraduate research students, in particular the annual one-to-one meetings which all such students have with the DGS, as a feature of good practice.

### **Feedback arrangements**

172 Students are well represented on the Higher Degrees Committee (HDC) (where, indeed, they outnumber the staff members according to the 2007 membership list). This is chaired by the DGS and oversees all aspects of the research degree programmes. The HDC prepares an annual report for the ASC, although this is not made explicit in the terms of reference for 2007, which state only that it reports to the Academic Board.

173 The Briefing Paper maintains that the other principal means of feedback is through an annual student and supervisor meeting, instituted in 2003 and last held in December 2006. The DGS explained that this meeting, which is potentially open to all supervisors and research students, had been introduced at a time when there were some general concerns within the research student community. Good attendance by supervisors as well as students, and co-chairing by the President of the Postgraduate Society, had contributed to a successful outcome and the practice had therefore been continued. Asked for examples of issues that had been addressed by this means, the DGS mentioned improved access to equipment stores, better support in the event of IT failures at weekends and a review of what was expected of research students who were themselves helping to supervise undergraduate projects.

174 There is a dedicated site for research students on Blackboard.

175 Given the efficacy of these various means of communication, the School has ceased to issue formal questionnaires to its research students. However, the DGS told the review team that she would like to introduce an exit questionnaire for departing students and is currently investigating examples in use elsewhere. Also, the QAA Special Review reported that the University of London may be implementing a formal procedure for collecting feedback from examination candidates.

176 The BP reports that the Postgraduate Society, all five of whose executive officers are currently members of the HDC, is an active body. That was endorsed by the PhD students' SWS which, however, considered it needed a bigger budget. The same SWS reported good communication between the School and students.

### **Assessment of research students**

177 Although it could, if it wished, award its own research degrees under devolved powers, the School of Pharmacy has chosen to continue operating under the University of London's federally approved regulations. Hence responsibility for the final assessment of research students rests with the University, according to criteria set out in its Ordinance 12.

178 Two examiners, one of whom is from the University of London, but, usually outwith the School of Pharmacy, are normally appointed and an oral examination is mandatory.

179 The QAA Special Review suggested, in the light of the *Code of practice, Section 1: Postgraduate research programmes*, that the School might consider mechanisms for parity across different disciplines in the absence of independent chairs for viva examinations. This is under consideration by the University of London.

### **Representations, complaints and appeals arrangements for research students**

180 The School has relied upon informal means for dealing with student complaints. The Briefing Paper states that these are based upon established custom and practice and are to be

made known to students at induction. The QAA Special Review recommended, however, that the School should formalise and publicise its procedures in a 'timely manner'. The audit team was told that the Registrar has this in hand.

181 The Special Review judged the School's appeal procedures to be appropriate and satisfactory. The appeal procedures relating to the final examination of research students are those of the University of London. No School of Pharmacy student has invoked them in the last 10 years. For students who wish to appeal against the outcome of the first-year viva, the School has its own procedure which is conducted by the Dean.

## **Section 7: Published information**

### **Accuracy and completeness of published information, including Teaching Quality Information**

182 Information about the School is available from a variety of sources, namely from the Higher Education Statistics Agency, the Higher Education Funding Council for England (HEFCE), the Universities and Colleges Admissions Service, the Higher Education and Research Opportunities in the United Kingdom and the School's own website. This information includes its Mission Statement; strategic aims; departmental structure; 2001-2007 funding streams from HEFCE; staffing profile (including full-time equivalent students); aspects of the student profile (mainly to 2005, but some data available for 2006); completion and destination data; 2001 Research Assessment Exercise data; applications and acceptances up to 2005 (broken down into various groups); ratio of staff to students (1999 to 2005) and reports from previous audits/revalidations.

183 The website was last updated on 14 February 2007, although the online prospectus is out of date, and a hard copy is not currently available. The School's Teaching Quality Information (TQI) data does not contain any information on the Learning and Teaching Strategy, Employer Needs and Trends, or External Examiner Reports. The School admitted to the audit team that it has not engaged with the TQI website, and is awaiting its relaunch. Nor has the School previously engaged with programme specifications, although a recently written set was provided for students entering in 2006.

184 In 2006, the Academic Board approved modifications to the undergraduate admissions criteria, whereby students with predicted GCSE A-Level grades of ABB would be invited to interview, and that preference would be given to students studying Chemistry and two other subjects drawn from Biology, Physics or Mathematics. A third subject, other than General Studies, would be considered. The School has made the decision not to accept Grade D at GCSE A-Level in any subject. Admissions information on the School's website makes this clear, although the MPharm programme specification does not include the GCSE A-Level grade D rule in its admissions criteria.

### **Students' experience of published information and other information available to them**

185 When requesting a prospectus, students receive this quickly, and value its quality. Home, overseas, undergraduates and postgraduates alike are very positive about the pre-application advice received which they find helpful and accurate. At the time of audit, the printed prospectus was out of date, but an interim, temporary prospectus was available. However, verbal pre-application information and advice is readily available from the Registry, and prospective students have found this helpful.

186 Students feel that the quality of course information, for example, course handbooks and the programme specifications for the MPharm, has improved during the past four years. They also testify to the clarity of assessment briefs. Students are aware of how they can access appropriate information about their course, and they have described the MPharm handbook as

being excellent. However, there does not seem to be any uniformity with regard to handbooks. For example, the 'Course Documents' for the MSc in Drug Discovery, which serves as a course document, is not nearly as comprehensive or student-friendly as the one for the MPharm.

187 There is a virtual learning environment (Blackboard), with various plans to expand this to include virtual teaching environments. Students are appreciative of this and are aware of where and how they can access information on various aspects of student support, including guidance on academic appeals and student complaints.

188 On balance, given the evidence of continuing improvement, the audit team believe that reliance can be placed in the accuracy and completeness of the School's published information.

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