

Liverpool John Moores University

MARCH 2006

Preface

The Quality Assurance Agency for Higher Education (QAA) exists to safeguard the public interest in sound standards of higher education (HE) qualifications and to encourage continuous improvement in the management of the quality of HE.

To do this QAA carries out reviews of individual HE institutions (universities and colleges of HE). In England and Northern Ireland this process is known as institutional audit. QAA operates similar but separate processes in Scotland and Wales. For institutions that have large and complex provision offered through partnerships, QAA conducts collaborative provision audits in addition to institutional audits.

The purpose of collaborative provision audit

Collaborative provision audit shares the aims of institutional audit: to meet the public interest in knowing that universities and colleges are:

- providing HE, awards and qualifications of an acceptable quality and an appropriate academic standard, and
- exercising their legal powers to award degrees in a proper manner.

Judgements

Collaborative provision audit results in judgements about the institutions being reviewed. Judgements are made about:

- the confidence that can reasonably be placed in the soundness of the institution's present and likely future management of the quality of the academic standards of its awards made through collaborative arrangements
- the confidence that can reasonably be placed in the present and likely future capacity of the awarding institution to satisfy itself that the learning opportunities offered to students through its collaborative arrangements are managed effectively and meet its requirements; and
- the reliance that can reasonably be placed on the accuracy, integrity, completeness and frankness of the information that the institution publishes, (or authorises to be published) about the quality of its programmes offered through collaborative provision that lead to its awards and the standards of those awards.

These judgements are expressed as either **broad confidence**, **limited confidence** or **no confidence** and are accompanied by examples of good practice and recommendations for improvement.

Nationally agreed standards

Collaborative provision audit uses a set of nationally agreed reference points, known as the 'Academic Infrastructure', to consider an institution's standards and quality. These are published by QAA and consist of:

- *The framework for higher education qualifications in England, Wales and Northern Ireland (FHEQ)*, which includes descriptions of different HE qualifications
- *The Code of practice for the assurance of academic quality and standards in higher education*
- subject benchmark statements, which describe the characteristics of degrees in different subjects

- guidelines for preparing programme specifications, which are descriptions of the what is on offer to students in individual programmes of study. They outline the intended knowledge, skills, understanding and attributes of a student completing that programme. They also give details of teaching and assessment methods and link the programme to the FHEQ.

The audit process

Collaborative provision audits are carried out by teams of academics who review the way in which institutions oversee their academic quality and standards. Because they are evaluating their equals, the process is called 'peer review'.

The main elements of collaborative provision audit are:

- a preliminary visit by QAA to the institution nine months before the audit visit
- a self-evaluation document submitted by the institution four months before the audit visit
- a written submission by the student representative body, if they have chosen to do so, four months before the audit visit
- a detailed briefing visit to the institution by the audit team six weeks before the audit visit
- visits to up to six partner institutions by members of the audit team
- the audit visit, which lasts five days
- the publication of a report on the audit team's judgements and findings 22 weeks after the audit visit.

The evidence for the audit

In order to obtain the evidence for its judgement, the audit team carries out a number of activities, including:

- reviewing the institution's own internal procedures and documents, such as regulations, policy statements, codes of practice, recruitment publications and minutes of relevant meetings, as well as the self-evaluation document itself
- reviewing the written submission from students
- asking questions of relevant staff from the institution and from partners
- talking to students from partner institutions about their experiences
- exploring how the institution uses the Academic Infrastructure.

The audit team also gathers evidence by focusing on examples of the institution's internal quality assurance processes at work through visits to partners. In addition, the audit team may focus on a particular theme that runs throughout the institution's management of its standards and quality. This is known as a 'thematic enquiry'.

From 2004, institutions will be required to publish information about the quality and standards of their programmes and awards in a format recommended in document 03/51, *Information on quality and standards in higher education: Final guidance*, published by the Higher Education Funding Council for England. The audit team reviews how institutions are working towards this requirement.

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Summary

Introduction

A team of auditors from the Quality Assurance Agency for Higher Education (QAA) visited Liverpool John Moores University (the University) from 27 to 31 March 2006 to carry out an audit of the provision offered by the University through collaborative arrangements. The purpose of the audit was to provide public information on the quality of the programmes offered by the University through arrangements with collaborative partners, and on the discharge of the University's responsibility as an awarding body in assuring the academic standards of its awards made through collaborative arrangements.

To arrive at its conclusions the audit team spoke to members of staff of the University, and read a wide range of documents relating to the way the University manages the academic aspects of its collaborative provision. As part of the audit process, the audit team visited four of the University's collaborative partners, where it spoke to students on the University's programmes and to members of staff of the partner institution.

The words 'academic standards' are used to describe the level of achievement that a student has to reach to gain an award (for example, a degree). It should be at a similar level across the United Kingdom.

Academic quality is a way of describing how well the learning opportunities available to students help them achieve their awards. It is about making sure that appropriate teaching, support, assessment and learning opportunities are provided for them.

The term 'collaborative provision' is taken to mean 'educational provision leading to an award, or to specific credit toward an award, of an awarding institution delivered and/or supported and/or assessed through an arrangement with a partner organisation' (*Code of practice for the assurance of academic quality and standards in higher education, Section 2: Collaborative provision and flexible and*

distributed learning (including e-learning), 2004, paragraph 13, published by QAA).

In an audit of collaborative provision, both academic standards and academic quality are reviewed.

Outcome of the collaborative provision audit

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

- broad confidence can reasonably be placed in the soundness of the University's present and likely future management of the academic standards of its awards made through collaborative arrangements
- broad confidence can reasonably be placed in the present and likely future capacity of the University to satisfy itself that the learning opportunities offered to students through its collaborative arrangements are managed effectively and meet its requirements.

Features of good practice

The audit team identified the following areas as being good practice:

- its consultative approach to enhancing formal procedures for managing quality and standards in collaborative provision
- the University's continued development of the link tutor role and the resulting enhancement of the quality of the student experience
- its effective application of process review and internal academic audit to collaborative provision
- its application of integrated institutional expertise in support of the continuing development of a higher education culture amongst partners.

Recommendations for action

The audit team recommends that the University should consider further action in a number of areas to ensure that the academic quality and standards of the awards it offers through

collaborative arrangements are maintained. The team advises the University to:

- ensure that its procedures for the initial approval and subsequent modification of regulations operated by partner institutions are fully communicated to and understood by those responsible for implementing them
- ensure the timely review of all partner contracts, including those in respect of accredited provision
- strengthen its procedures for monitoring the quality and standards of accredited provision and define the criteria for achieving accredited status
- reconsider the proportion of credit for an institutional award which may be given through a combined recognition and validation agreement
- ensure that certificates and transcripts in respect of programmes undertaken in collaborative provision do not omit any information needed for a full understanding of a student's achievement
- make explicit its requirements for the qualifications of staff in partner institutions who contribute to its programmes.

It would be desirable for the University to:

- draw on a wider range of evidence to strengthen its monitoring and review of collaborative provision at the partnership level
- strengthen its oversight of issues and themes arising from quality management processes across its collaborative provision
- improve its analysis and use of data in the management of quality and standards in collaborative provision.

National reference points

To provide further evidence to support its findings the audit team investigated the use made by the Institute of the Academic Infrastructure, which QAA has developed on behalf of the whole of UK higher education as

a set of nationally agreed reference points that help define both good practice and academic standards. The findings of the audit suggest that the University is making effective use of the Academic Infrastructure in the context of its collaborative provision.

In due course, the audit process will include a check on the reliability of the teaching quality information (TQI) published by institutions in the format recommended in the Higher Education Funding Council for England's document 03/51, *Information on quality and standards in higher education: final guidance*. The audit team was satisfied that the information the University and its partners are publishing currently about the quality of its collaborative programmes and the standards of its awards is reliable, and that the University is making adequate progress towards providing TQI data for its collaborative provision.

Main report

Main report

1 An audit of the collaborative provision (CP) offered by Liverpool John Moores University (the University) was undertaken during the period 27 to 31 March 2006. The purpose of the audit was to provide public information on the quality of the programmes offered by the University through arrangements with collaborative partners, and on the discharge of the University's responsibility, as an awarding body, to assure the academic standards of its awards made through collaborative arrangements.

2 CP audit supplements the institutional audit of the University's own provision. The process of CP audit has been developed by the Quality Assurance Agency for Higher Education (QAA) in partnership with higher education institutions (HEIs) in England. It provides a means for scrutinising the CP of an HEI with degree-awarding powers (the awarding institution) where the CP was too large or complex to have been included in the institutional audit of the awarding institution. The term 'collaborative provision' is taken to mean 'educational provision leading to an award, or to specific credit toward an award, of an awarding institution delivered and/or supported and/or assessed through an arrangement with a partner organisation' (*Code of practice for the assurance of academic quality and standards in higher education (Code of practice), Section 2: Collaborative provision and flexible and distributed learning (including e-learning)*, 2004, paragraph 13, published by QAA).

3 The CP audit checked the effectiveness of the University's procedures for establishing and maintaining the standards of academic awards through collaborative arrangements; for reviewing and enhancing the quality of the programmes of study offered through the collaborative arrangements that lead to those awards; for publishing reliable information about its CP; and for the discharge of its responsibility as an awarding body. As part of the collaborative audit process the audit team visited four of the University's collaborative partners.

Section 1: Introduction: The awarding institution and its mission as it relates to collaborative provision

4 The origins of Liverpool John Moores University, established in 1992 from the former Liverpool Polytechnic, date back to 1825. In taking the name of Sir John Moores, founder of Littlewoods and associated also with the creation of educational opportunities for all, the University was anticipating its current commitment to widening participation and to providing a stimulating, challenging and exciting, but also caring and supportive educational environment.

5 The University offers 160 collaborative programmes, including 11 not currently recruiting, in 20 UK-based and 27 European and international partner institutions. At the time of the audit a further seven programmes with four international partners were awaiting approval, and 24 programmes, distributed between eight UK-based and three international partners, were awaiting closure. The CP student population is 3,425 full-time equivalent (FTE), a majority of whom are studying part-time, comprising 662 FTE indirectly and 2,763 directly funded students. CP FTEs account for almost 16.5 per cent of the student population.

6 Since the arrival of the present Vice-Chancellor in 2000 the University has revised its Mission, Core Purpose and Values Statements and adopted the European Foundation for Quality Management Excellence Model (EFQM) as its management system framework. Developments since 2004 have particularly concerned CP, with a process review of this aspect of its activities using the EFQM process review methodology. The conclusions of this review led to the strategic decision to separate partnership management from quality assurance, and to the establishment of a Collaborative Partnerships Team (CPT), the appointment of a Director of Collaborative Partnerships (who leads it) and the production of a Collaborative Partnerships Operational

Manual. The duties of the CPT, which reports to the Pro-Vice-Chancellor (Marketing and Collaborative Partnerships), include undertaking an initial assessment of the viability of prospective partnerships.

7 The University's mission is 'to serve and enrich our students, clients and communities by providing opportunities for advancement through education, training, research and the transfer of knowledge'. It is committed to widening participation, the continuing personal, professional and skills development of all its members, to contributing to economic, social and cultural development and regeneration and to expanding its commercial activities by developing a series of strategic partnerships both at home and internationally. It plans to increase its international student numbers by 50 per cent. It also plans to work with its further education college and other regional partners, undertaking specific initiatives for targeted groups, developing Foundation Degrees and participating in regional collaborative initiatives.

Background information

8 In 1999, the Institution was the subject of a continuation audit and an overseas audit of its collaboration with the Workers' Institute of Technology (WIT), Malaysia. It has had four developmental engagements, two QAA reviews of Foundation Degrees, one favourable and one unfavourable (but with a favourable follow-up review). More recently the University was subject to a QAA institutional audit in 2004, which expressed broad confidence in the soundness of its current management of the quality of its programmes and in its institutional-level capacity to manage effectively the security of its awards. These reports were made available to the audit team, as were a range of strategic documents and full data relating to CP. The team was given ready access to the University intranet, which facilitated access to a wide range of documents relating to the provision, management and review of CP, and to a range of internal documents. The team identified a number of partnership arrangements that illustrated further aspects of the University's provision, and additional documentation was provided as required.

The collaborative provision audit process

9 Following a preliminary meeting at the University between a QAA officer and representatives of the University in July 2005, QAA confirmed in August 2005 that four partner visits would be conducted between the briefing and audit visits. The University provided its collaborative provision self-evaluation document (CPSED) in November 2005 and a further preliminary meeting took place in December. The University provided QAA with briefing documentation in January 2006 for each of the selected partner institutions.

10 The audit team visited the University from 7 to 9 February 2006 to explore with senior members of staff of the University, senior representatives from partner institutions and student representatives from partner institutions matters relating to the management of quality and academic standards in CP raised by the University's CPSED and other documentation, and to ensure that the team had a clear understanding of the University's approach to collaborative arrangements. At the close of the briefing visit, a programme of meetings for the audit was agreed with the University. It was also agreed that several document audit trails would be followed relating to aspects of the University's quality management arrangements in respect of different types of collaborative partnership.

11 During the visits to partners, members of the audit team met senior staff, teaching staff and student representatives. These meetings aided the team's understanding of the University's arrangements for managing its collaborative arrangements. The audit visit took place from 27 to 31 March 2006, and included further meetings with staff of the University. The audit team is grateful to participants in meetings at the University and the partner institutions.

12 The audit team comprised Dr MR Luck, Dr M Ruthe, Mr L Walker and Mr A Weale. The audit secretary was Miss G Hooper. The audit was coordinated for QAA by Professor R Harris, Assistant Director.

Developments since the institutional audit of the awarding institution

13 The institutional audit took place in 2004, and reported significant changes which had taken place since 2001. The University stated in its CPSED that since 2004 the workings of the University have been largely unchanged, albeit that a number of significant advances have been made, in particular in relation to the aims of the 2003-08 Strategic Plan, management information systems and the development of a virtual learning environment.

14 The report of the institutional audit, which identified four features of good practice, also advised the University to clarify a number of lines of communication, to ensure that the reporting of quality processes at all levels of operation ensured accountability from each level to the next, to ensure the consistency of published information and to exploit the full potential of its management information systems. It also identified two areas - the strategic (as opposed to operational) approach to the management of quality and standards and strengthening staff engagement with academic planning and development - where enhancement would be desirable. While the main emphasis of the recommendations was more on its internal than on its collaborative arrangements, the University detailed in its CPSED its responses to each recommendation.

15 The audit team concluded that the University has responded effectively to the recommendations of the institutional audit regarding its arrangements for the management of CP. The division, in the context of CP, of strategic planning and management on the one hand and quality assurance on the other, appears to the team to be effective and the management structure set up to facilitate these arrangements to be generally clear. The routes by which partnerships are established, approved, managed and quality assured are well documented in the Collaborative Partnerships Operational Manual (CPOM).

Section 2: The collaborative audit investigations: the awarding institution's processes for quality management in collaborative provision

The awarding institution's strategic approach to collaborative provision

16 The University's current approach to CP and its plans for the development of this aspect of its operation are described in its Strategic Plan. The University stated in its CPSED that its current strategy for UK partnerships contains a strong regional emphasis. It claims to address key elements of the educational environment, including opportunities relating to Foundation Degrees, which it has been developing in association with local further education colleges (FECs) since academic year 2001-02. Its approach to overseas partnerships involves a reduced number of partner institutions offering a varied portfolio of programmes. It has no plans to expand FE partner numbers and is currently terminating a number of non-viable arrangements.

17 The University recognises seven types of collaborative arrangement. First, it has 38 franchise programmes, wherein the partner institution is authorised to deliver all or part of a programme developed and owned by the University. In all cases the University offers an identical programme internally, so partner institutions have no discretion to make programme changes. Second, it has 43 validated programmes wherein the partner institution develops its own programme either independently or in collaboration with the University, and may change the curriculum subject to University approval. Third, it has three jointly-validated programmes, wherein two institutions with degree-awarding powers validate the same programme which, the University stated in its CPSED, can be delivered at the partner institution, the University, or both. Neither partner may change the programme without the other's approval. Fourth, it has 23 recognition agreements,

comprising external programmes owned by the partner institution and without University validation, which are adjudged to provide learning appropriate to advanced entry to a University programme, and where changes to the external programme may affect its recognised status. Fifth, it has 19 distance learning programmes, delivered externally by the University, locally supported but without face-to-face contact between students and University staff. Sixth, it has seven distance taught programmes delivered entirely outside the University, usually overseas, by a combination of travelling University staff and distance learning, with resources and local non-academic support provided by a partner organisation. Finally, it has 24 accredited programmes in two institutions, whereby a programme offered by the institution is approved as providing a learning experience equivalent to those provided by the University. Accredited programmes are developed by the partner institution and validated as University awards. Responsibility for the curriculum is devolved to the partner subject to annual monitoring; responsibility for the maintenance of standards rests with the University but is managed locally. To this extent accredited status grants institutions operational independence in respect of teaching, assessment, curriculum development and the quality of the student experience.

18 The University also recognises three hybrid arrangements, both with overseas colleges. First, it designates eight programmes at two colleges as 'validated and recognition' because they provide access to a 60 credit programme at the University which leads to a degree qualification in which performance at the partner institution is recognised as part of the degree assessment; second, it designates one programme at another college as recognition and franchise.

19 The University aims to ensure that programme proposals from partner institutions are considered with equal rigour to the procedures in place for approving internal programmes; it also provides

additional levels of scrutiny, which are communicated to those involved and appear to the audit team to be well understood. Manuals covering the validation and review of validated and franchised programmes, Foundation Degrees and recognition arrangements are available as hard copy and on the University's website, though the University does not yet have a generic procedure for institutional review.

20 The University's Collaborative Partnerships Strategy, implemented by the CPT, has the following aims: to provide assistance for schools and faculties in finding and developing appropriate partnerships to deliver the University's strategic objectives; to ensure access for all staff to accurate information on existing links; to provide advice on the feasibility of potential new partnerships; to make more robust and consistent the initiation, development and management of collaborative partnerships; to embed the day-to-day management of partnerships in the faculty; to ensure the University at least retrieves all of its costs for collaborative links; to review regularly the performance of partnerships against business aspects and quality of provision, and to look forward to the forthcoming year; to provide an annual report to the Board of Governors. Its specific responsibilities are further defined with regard to FECs, UK non-HEFCE, EU and international partners.

21 The audit team was made aware, both by University and partner institution staff, that the University approaches its collaborations in a developmental and supportive manner which emphasises mutual learning, but without sacrificing the rigour required to assure the standards of awards and the quality of the student experience. It noted that the University adopts a participative approach to enhancement in particular, and saw evidence of plans to strengthen institutional level contacts through more systematic University representation on partner institution committees. In discussions with staff of partner institutions, link tutors and student support staff, the team learnt that the

University regularly consults widely with partners and all relevant University staff involved in the delivery and management of CP in the development of its procedures. It considers the University's consultative approach to enhancing formal procedures for managing quality and standards in CP a feature of good practice.

22 The audit team was informed that in all cases other than accreditations CP programmes are supported by a link tutor. The team learned that appointment to this status is recognised positively by the University, that link tutors are given appropriate recognition in terms of overall workload and other responsibilities, that managers take steps to ensure that only staff with appropriate skills, experience and seniority are appointed to such positions, and that their progress and workload are adequately reviewed formally during appraisal and less formally on a continuing basis.

23 Link tutors play a significant role in supporting and developing the work of programme teams in partner colleges, reviewing practice on a regular basis, providing an opportunity for students to connect with the wider University and have their views represented, managing the operation of programmes at University level and providing individual developmental oversight of the University's CP portfolio. The audit team noted that the University responded to the report of a recent internal academic audit of CP (see also paragraph 27), which identified variability in the implementation of the role, by taking steps to clarify the role in consultation with link tutors themselves and partner institutions. Noting in particular the careful consideration the University has given to all aspects of this role and the capacity it has shown to learn from experience to enhance the role, the team is of the view that the University's continued development of the link tutor role and the resulting enhancement of the quality of the student experience together constitute a feature of good practice.

The awarding institution's framework for managing the quality of the student's experience and academic standards in collaborative provision

24 The University confirmed in its CPSED that it retains responsibility for academic standards on all external programmes leading to an award of the University. In the case of CP the Vice-Chancellor delegates this responsibility to the Pro-Vice-Chancellor Marketing and Collaborative Partnerships (PVC MKG) and the Pro-Vice-Chancellor Development (PVC DVT). The former, supported by the Director of Collaborative Partnerships, has responsibility for developing and managing the partnerships themselves, the latter, supported by the Director of Quality Support, for managing quality. The University considers this separation contributes significantly to the robustness of both, and the audit team confirms that it appears to present no obstacle to effective management; indeed in discussions with partners the audit team heard that the management of partnerships has improved in association with this change.

25 At institutional level, Academic Board, aided by the Quality and Standards Committee (QSC), is ultimately responsible for the oversight of quality assurance; QSC delegates the operational oversight of quality and standards of CP to its own sub-committee, the Partnerships Quality and Standards Panel (PQSP), which exercises considerable authority more generally, for example in authorising and overseeing quality arrangements for programmes taught in a language other than English. At institutional level the quality support team (QUS) has overall responsibility for the quality management of CP - a responsibility which, in the case of internal provision, is devolved to faculties.

26 Again at institutional level, the Strategic Management Group (SMG) determines policy and strategy for CP, delegating responsibility for both internal and collaborative programme requests to the Planning and Development Committee (PDC), which is charged also with ensuring that proposals articulate with the

University's strategic objectives and carry support at discipline level. The commercial activities of the CPT are subject to consideration by the Partnerships Panel (regarding International and non-HEFCE activities) and the Consortium Management Board (regarding UK activities). Both bodies report to PDC.

27 In 2005 the University undertook an internal academic audit and process review of key features of CP. The audit team saw evidence that the outcomes of this review have been translated into a comprehensive joint action plan, and learnt that most actions have been successfully completed, with all remaining matters currently being addressed. The team noted in particular that the process identified a number of key issues, leading to the introduction of enhanced procedures in CPOM and the procedures manuals. These have in turn led to greater clarity of process and responsibilities, openness in relationships and better documentation, all of which have been confirmed and welcomed by the staff of partner institutions. The audit team considers the University's effective application of these instruments to CP a feature of good practice.

28 The Quality Management Framework specifies procedures for the quality management of both internal and collaborative programmes. Procedures for the management of CP other than quality assurance are documented in CPOM, first published in 2005, which, as indicated in the last paragraph, specifies procedures for the initiation, development, management and closure of partnerships, provides guidance on the roles and responsibilities of University and faculty/school staff and includes appropriate pro formas and templates.

29 The assessment process for CP, like that for internal provision, is governed by the University Modular Framework (UMF) regulations, such that, while some partner institutions may develop or use their own assessment regulations, these must be compatible with the UMF, albeit that, as indicated in the next paragraph, variations can be sought and approved. Almost all collaborative programmes

are assessed through a two-tier assessment board system, module (MAB) and programme assessment boards (PAB). The University stated in its CPSED that boards may consider results from different partnerships and that, in order to facilitate cross-moderation, composite boards considering the same programme offered by different partners may be held.

30 The audit team identified two categories of licensed variations to general regulations. First, in the case of validated or accredited provision, variations are approved by a validation panel. In such cases, while the location of responsibility for authorising variations is clear, the team is uncertain that a validation panel is the most appropriate body to discharge this duty. Secondly, the team found a number of variations to regulations which had been made following validation but prior to programme review. Here the team was provided with varying advice as to where the authority to approve such variations lies. Hence, although it was informed that responsibility lies with PQSP, it also notes instances of minor modifications to regulations for particular partnerships having been agreed at faculty level and reported to QSC, approval for variants to the UMF having taken different routes depending on the category of the partnership, or, in the case of accredited provision, on the individual partner. Accordingly, and bearing in mind in particular the levels of uncertainty encountered among staff in the course of the audit, the team is not satisfied that the arrangements for initial and subsequent approval of major regulatory changes were in all cases as robust for CP as for internal programmes, and considers it advisable for the University to ensure that its procedures for the initial approval and subsequent modification of regulations operated by partner institutions are fully communicated to and understood by those responsible for implementing them.

31 The audit team noted, furthermore, that the University does not have in place any mechanism for overseeing the implications of modifications to an individual programme for the partnership within which that programme

exists, for the relevant partnership category, or for its collaborative arrangements more generally. Given that individual modifications have the potential to unbalance the equivalence of standards across awards and that changes to one part of a system may have unintended consequences elsewhere, the team welcomes the University's intention to consider how best to develop a mechanism which will provide it with an effective and continuing overview of arrangements which are always more likely to be mutable than static.

32 The audit team notes that the distribution of authority for quality assurance between the University and its partners also varies according to the nature of the collaboration. For example, the quality of provision and assurance of academic standards for franchised, validated and jointly validated programmes are managed at faculty and school level under standard procedures also applying to internal provision, but in the case of accredited provision this responsibility is, subject to annual monitoring, devolved to partners. The team was informed that the distribution of responsibility for quality assurance between the University and partner institutions is codified in the appropriate Memorandum of Co-operation (MOC), which is part of the contractual agreement which is itself reviewed prior to a scheduled programme review. Nonetheless, the team noted instances of ambiguity or lack of clarity of expression in some of these documents. For example, although the team was assured verbally that in all cases external examiners are appointed by the University, this was not always clear in the Memoranda, and it identified instances of disagreement between statements in the MOC and the Schedule of Services and between practical arrangements and those specified in CPOM. The team also learned of cases where external examiners did not understand whether they are required to attend assessment boards, although it was advised that in practice adequate guidance is subsequently provided by the programme team. While the team was told that the University intends to update its contract with HEFCE-funded partners in the near future and to do so on a regular basis,

given the importance of contracts as the legal foundation for CP, it considers it advisable for the University to ensure the timely review of all partner contracts, including those in respect of accredited provision.

33 The operation of the majority of elements of CP which bear directly on the student experience are mainly the responsibility of partner institutions. Although the University does not make its expectations clear in a formal document, it scrutinises partner arrangements at programme approval and review, matching them against its requirements and including all relevant matters in its annual monitoring procedure. On the basis of its enquiries the audit team confirms that the University's expectations in respect of the student experience are understood by partner institutions and appropriately monitored by the University.

34 The University stated in its CPSED that it has two long-standing partners, one in the UK, the other overseas, with accredited institutional status for the CP for which they are responsible. In the case of the UK institution the University acts as the degree-awarding body, facilitating the development of the institution as a body with access to public funding for its UK-based students. The partnership is managed by an institution-specific Partnership Board outside of the committee structure, with membership drawn from senior staff from each institution, and chaired by the PVC DVT, who exercises overall institutional responsibility for liaison. The Pro-Vice-Chancellor (Administration) is a member of the partner institution's governing body. Described as a 'shadow school' of the University, with a presence on faculty committees, the partner appears to the audit team to operate in ambivalent territory. For some purposes it acts as a part of the University: for example, it has recognition agreements with another college for entry to University honours programmes and compacts with overseas institutions awarding University credits. For other purposes it acts as an accredited partner, operating within the University's quality and standards framework but with relative

autonomy. For example, it has its own internal review instruments and APEL and Mitigating Circumstances committees; its operations contain a number of permitted variations from the UMF; and it has expressed a desire to modify the University's requirement that external examiners agree all assessments. Such anomalies, whose genesis was in the period before the University began to systematise and centralise much of its management of CP, have been recognised by a seemingly thorough and well-conducted internal audit, which has informed the continuing debate on the nature of accreditation.

35 In the overseas institution, on the other hand, academic programmes currently operate within either franchised (postgraduate) or accredited (undergraduate) arrangements. While the partner institution has expressed a desire to move all its provision to accredited status, it became evident to the audit team that its senior staff, while appreciating the broad criteria applicable, are unclear as to the precise criteria for permitting such a development in its particular case; in fact, the team subsequently formed the view that no detailed criteria currently exist.

36 The operation of franchised and accredited models within the same institution provided the audit team with an opportunity to identify differences in the University's interaction with the partner. As a general rule, franchise programmes require the use of University processes for quality and standards, involve a high level of regular interaction with University staff and, consequently, a higher level of monitoring than accredited programmes. Although the accredited programmes lie within subject specialist areas available within the University, the institution relies primarily on external examiners for evidence of quality and standards. The partner institution concerned recognises this distinction, and has recently requested the University to provide it with an academic advisor to strengthen its access to University expertise and ensure that the University has continuing access to first hand evidence of its operations.

37 The audit team formed the view that

accreditation is to some extent a category of convenience for these two partnerships, and that the accreditation agreements are evolving in the direction of further autonomy. While the team accepts that such a move may be appropriate for proven partnerships, increased autonomy places a serious responsibility on the University to ensure that accredited partners are using local processes effectively to manage the standards and quality of self-designed programmes. Overall, the team formed the view that, while for accredited provision the processes for institutional and programme approval and periodic review are strong and robust, for regular monitoring the University is over-reliant on the partner's self-evaluation and on external examiners.

38 The audit team also noted that, while the level of devolution of responsibilities for quality management is now defined, the criteria for achieving accredited status in the first place are not. This appears to reflect the University's current position that it has no plans to extend accreditation to other partners. While the University has held discussions intended to clarify the general characteristics of accreditation with both accredited partners, these characteristics have yet to be translated into criteria against which a partner may apply to change the status of its programmes to accredited provision or for accredited status. Accordingly the team considers it advisable for the University both to strengthen its procedures for monitoring the quality and standards of accredited provision and to define generic criteria for achieving accredited status.

39 The audit team considered in detail the unique recognition and validation arrangement with an overseas partner. This differs from an advance standing arrangement in that it involves a University honours degree being classified on the basis of 60 credits earned by students from the final level of the partner college's own Advanced Diploma, 60 credits from a top-up programme delivered by the University in the UK over a twelve-week period and advanced standing for 240 credits. The arrangement has been approved as an

exception to the normal requirement for recognition agreements that a minimum of 25 per cent of the degree must have been obtained at the University. The team investigated the way in which the Advanced Diploma had been approved for recognition against University honours programmes and continued to be monitored for curriculum match, academic levels and student academic performance, the validation of the University award, and, insofar as it was possible to judge, the management of the student experience during the period of transition between institutions and while at the University.

40 The arrangement involves a two-stage process, both involving external expertise. The first stage requires a full and detailed site visit. This feeds into the second stage event, which validates the package as warranting an honours degree. For the assurance of standards the University appoints an external examiner, who, as well as reporting on University assessment, visits the partner, meets students, samples work from the Advanced Diploma, approves final examination papers and writes a visit report. In addition, assessment is sampled and double-marked by the University. For the assurance of the quality of the student experience, a sufficiently wide range of visits and developmental opportunities exists to suggest that the University takes seriously the importance of monitoring and supporting the partner's provision.

41 Overall, the audit team is of the view that the University's direct management of quality and standards during the UK semester is thorough and appropriate, and its monitoring of standards at the partner institution is generally assiduous. Two external examiner reports, however, express sufficient concern about standards achieved by students while with the partner to cause the team to question the appropriateness of the University's decision to agree an exception to its normal credit rules. While the comments have been carefully considered and have resulted in remedial actions, their existence underlines the risk inherent in an

arrangement such as this; and, while the team concludes that the recognition arrangement is generally well managed, monitoring the academic relationship between achievement at the partner institution and at the University requires, as the University acknowledges, constant vigilance.

42 The University identified the risk inherent in this arrangement at the most recent review of one programme, where a solution was agreed, for that programme only, whereby the final 60 credits currently gained by the partner award will be validated by the University as a combination of distance taught and distance learning provision, a solution which places the final year curriculum and its delivery firmly within the University's authority. This solution appears to the audit team significantly to reduce the risk and to be capable of extension. The team therefore considers it advisable for the University to reconsider the proportion of credit for an institutional award which may be given through a combined recognition and validation agreement.

43 The audit team also notes that the award certificate for students graduating from the recognition and validation programme states only that the degree was awarded by the University following an approved programme of study; it does not refer to the existence of a transcript or to the place of study. The transcript states that 240 credits were gained through advanced standing and refers to the partner institution only by placing its unexplained initials beside a module title and University module code: it does not specify that the initials refer to work undertaken overseas in a partner institution. Since the team considers it unlikely that the nature of study leading to the award will be understood by those who read either certificate or transcript, it is considered advisable for the University to ensure that certificates and transcripts in respect of programmes undertaken in CP do not omit any information needed for a full understanding of a student's achievement.

The awarding institution's intentions for enhancing the management of its collaborative provision

44 In its CPSED the University stated that it will improve the management of its partnership activities by means of improved information management and a series of process reviews following the EFQM business excellence model; and it will continue enhancing the quality of the student experience and assuring the standards of awards made in CP by means of its Learning, Teaching and Assessment Strategy (LTA), supported both by the work of its Learning Development Unit (LDU), and by the enhanced provision of specialist staff development for partner institution staff.

45 The audit team found evidence that the University is currently addressing all areas identified for CP enhancement. It is in the early stages of a major review of its Strategic Plan, with a view to developing a refined Plan; its performance data will be monitored by a newly purchased software tool; and, as noted above, (paragraph 27), it has recently undertaken a process review of its policy, strategy and management of CP, identifying a set of actions, the majority of which have now been undertaken.

46 University procedures require the identification of development and enhancement needs through annual monitoring. Based on discussions and the study of documentation, the audit team confirms that this process has led to the identification of needs which the University has subsequently addressed. The University communicates its enhancement intentions to partners and University staff involved with CP by means which include providing curriculum and other guides prepared by LDU, supporting curriculum and learning quality enhancement by a range of developmental activities, inviting partner institution staff to the annual Learning, Teaching and Assessment Conference (paragraph 84) and the Partnership Forum, which provides an opportunity for information exchange, discussion and sharing good practice between University staff (including link tutors) and their counterparts in partner institutions.

47 Organisationally the amalgamation of the former UK and International Partnerships Panels into a unified Partnerships Panel and the establishment of a Consortium Management Board to steer all its HEFCE-funded collaborative developments have, in the view of the audit team, contributed to the University's improved management of CP. The team formed the view that the University's intentions for the enhancement of quality of its CP are strategically and operationally sound and reflect its mission, and that its partnership plans, which build on a number of existing strengths, have the potential to strengthen further the higher education culture of partner institutions, thereby contributing to the enhancement of the student experience.

The awarding institution's internal approval, monitoring and review arrangements for collaborative provision leading to its awards

48 The University requires CPT to establish the appropriateness and viability of proposed new partners on the basis of background suitability checks, including academic standing, financial stability, reputation and compatibility with institutional strategy. The University then appoints a project leader from the relevant school, and this is followed, after further detailed scrutiny, by the submission of a formal proposal to the appropriate sub-committee of PDC. In parallel with these processes the CPT undertakes due diligence enquiries, the outcomes of which contribute to the risk assessment of the proposed partnership. PDC makes the approval decision on the completion of financial and contractual negotiations, and the collaborative contract is signed following programme validation.

49 Contractual agreements specify procedures for partnership termination and programme closure, either of which can be triggered by quality concerns, failure to recruit or breach of contract. The audit team studied the detailed procedures followed and considers them satisfactory. It also reviewed a small sample of closures, from which it found

evidence of the University honouring its commitment to current students and making appropriate arrangements for their progression.

50 The University's approach to the approval, monitoring and review of CP is an augmentation of its internal processes. All new programmes, from both new and existing partner institutions, require planning approval. This does not involve consideration of the academic content of a programme, being primarily concerned with the integrity of the business case, resource requirements and alignment of the proposal with faculty and institutional planning. The procedures for the two-stage programme validation process are specified in a series of procedures manuals specific to the categories of CP, and managed centrally by QUS with appropriate faculty involvement. Although there is some variability of emphasis for different types of collaboration, the requirements, including those for approval panel composition, which always involve external representation, are specified in procedures manuals. Following a pre-validation or pre-review meeting at which appropriateness and quality of event documentation are checked, a validation or review approval meeting takes place, following the same procedures as for internal provision.

51 The audit team explored in detail the validation or review process for a range of collaborative programmes. The documentation demonstrated that the proper processes are for the most part followed, that validation and review panels include the required external membership and that the Academic Infrastructure is appropriately addressed within the process as a whole. The team did note, however, that in one case, although a full programme review had been postponed, approval had been given to continue with the programme for another three years without a proper review of its academic content. While this occurred prior to the implementation of revised procedures, which, the University advised the team, make any repetition of this impossible, given that these procedures have yet to be fully tried

and tested, here and elsewhere the team encourages the University to monitor carefully the practices arising from them.

52 The audit team was also informed that the University plans to involve appropriately trained staff from partner institutions as panel members for validation and review events, and would encourage the University in this endeavour, as such an approach should strengthen the partners' understanding of requirements and procedures and enable partner staff to feed directly into quality enhancement. The team confirms that all key issues relating to quality and standards are adequately covered and that, subject to the specific comments above, the validation and review processes are competent and professional.

53 In its CPSED the University acknowledged that programme review is currently not informed by an evaluation of the continued appropriateness of the partnership from a business point of view. The University has identified this as an area for development, and has recently introduced a business review procedure, which will concentrate on the continuing viability of the partnership, monitor changes and identify any actions necessary to optimise the effectiveness of the partnership. However, as this process is new, the audit team was unable to assess its effectiveness.

54 The central tool of annual monitoring and quality enhancement is the annual Programme Assessment and Action Document (PSAAD), which specifies risk-weighted actions and items of effective practice, and includes a consideration of admissions, progression, completion and achievement profiles; the effectiveness of approaches to learning, teaching and assessment; the use of learning resources in support of student learning; student feedback and responsive actions; external examiners' reports and programme team commentaries on them; and, with effect from the current academic year it is hoped, student achievement data at module level. All partner institutions are required to prepare and submit to QUS a PSAAD for each programme for which they have responsibility.

QUS then compiles an annual overview report for PQSP, based on its assessment of the PSAADs provided.

55 Simultaneously QUS forwards collaborative PSAADs to schools for attention, also providing partners with feedback on the quality of their PSAADs and on issues raised in the report. On receipt of a PSAAD, schools are required to address all matters raised within it which lie within their control, identifying, in exception reports to the relevant faculty quality committee (FQC), matters requiring resolution at faculty or institutional level. All significant issues requiring attention at institutional level are reported to Academic Board through QSC in an annual Quality Audit Report (QAR). The QAR, which includes a range of responses from appropriate individuals and departments to matters raised by FQCs, as well as examples of effective practice and procedures for dissemination, is also submitted to SMG, which then uses it to inform institutional strategic planning and budget setting priorities.

56 The audit team notes that the draft QAR for academic year 2004-05 states that revised procedures for collecting and considering PSAADs from collaborative partners have led to an improved submission rate and more timely submission, and records high levels of partner satisfaction with the feedback and recommendations for action provided. Its analysis of a sample of PSAADs led the team to the view that they are subject to thorough scrutiny with effective action following, and that they respond appropriately to issues raised by external examiners and students and are effective in identifying good practice, but that their evaluation of data and analysis of the effectiveness of processes generally are less satisfactory. The University may therefore wish to review the quality of the analytic and evaluative dimensions of PSAADs. The team also invites the University to consider whether the current combination of exception and action reporting consistently and reliably provides it with an overview of recurring issues and themes emerging across partnerships.

57 The audit team also understands that the PSAAD process for accredited provision in particular is currently under review, with the possibility that it will in future focus on institutional rather than programme reporting. While the team appreciates that such a move would potentially permit the University to capture any overarching themes, it would be a matter of regret were this to be achieved at the cost of the effective and specific annual monitoring of student experience at programme level. The team is confident that the University will take all necessary steps to ensure that this does not occur.

58 Overall the audit team saw evidence of internal academic audit being used successfully, but noted also the view of the recent process review and internal academic audit that there is a need for greater rigour and harmonisation of institutional approval procedures. While the University responded to this suggestion by strengthening the approval of new partnerships, this change is too recent to permit comment. The team also noted the University's intention to strengthen partnership monitoring by adducing evidence from PSAADs as well as by means of a regular business review, focusing primarily on financial viability but drawing also on evidence from annual programme monitoring. It appears, however, to have moved in the opposite direction so far as academic review is concerned, abolishing institutional review for partnerships (other than for accredited programmes), incorporating it into programme review. This move appears to the team to reduce the likelihood of the University delivering its strategy of identifying themes in related programmes for each partnership through programme monitoring. Accordingly the team considers it desirable for the University to draw on a wider range of evidence to strengthen its monitoring and review of CP at the partnership level.

59 For the most part, the audit team considers the University's procedures for validation, periodic programme review and annual monitoring robust, well managed, fully engaged with University procedures and

appropriately involving external experts and students. Nonetheless it also formed the view that institutional level oversight focuses more effectively on compliance with procedures and the identification and monitoring of actions than on the identification of emerging themes across all partnerships and the evaluation of the suitability of current quality and partnership management. This inevitably restricts the University's capacity to maintain an appropriate institutional overview of these processes and to ensure that they contribute optimally to its policy development and quality enhancement agendas. The team acknowledges that the University has begun to collect information that will enable it to identify themes across all partnerships and draw conclusions at University level, and believes it would be desirable for the University to build on this by strengthening its oversight of issues and themes arising from quality management processes across its CP.

External participation in internal review processes for collaborative provision

60 The University stated in its CPSED that pre-validation or pre-review panels do not usually include external advisors, that in validation and review two external advisors are normally used other than in the case of franchise programmes and recognition agreements, and that it is currently reviewing the consistency with which external advisors are nominated and deployed on event panels. The composition of panels is clearly defined, and a study of a representative sample of validation and review reports leads the team to conclude that external expertise in approval and review procedures is used effectively and in accordance with University procedures.

External examiners and their reports in collaborative provision

61 The University stated in its CPSED that it uses external examiners and their reports in CP in the same way as it does for all its provision. They are appointed on the advice of the home faculty quality committee and briefed by

appropriate members of school. The audit team notes that the initial recommendation often comes from the partner institution, that link tutors act as an additional point of contact and advice, that the University is currently piloting a number of dedicated briefings for external examiners involved in CP, and that, in the case of franchise programmes, common external examiners are deployed at both the University and the partner institution, in order to ensure parity of standards.

62 External examiners' reports are fully and conscientiously addressed at faculty and institutional level; both the reports themselves and the formal written responses to them are included in the relevant PSAAD; and useful summaries of external examiners' comments appear in the Annual QAR. Although thus far the Report's summary has not distinguished between the responses from external examiners of CP and those of internal provision, in the present academic year the QUS has introduced a summary analysis of issues raised by all external examiners for CP, highlighting critical comments, and issued a complementary instrument noting issues identified in collaborative PSAADs. The audit team considers these two documents informative and helpful, and encourages their continued use as a means of providing data for an annual overview of the University's CP. From its study of the minutes of a number of faculty quality committees the audit team concludes that faculties take their responsibilities in respect of external examiners seriously.

63 A study of the most recent round of external examiner reports indicates that while the majority of examiners express satisfaction with the standards and quality of programmes delivered at partner organisations, a minority express some concerns, of which the most frequent are in regard to lack of evidence of internal moderation, an unclear relation between assessment criteria and marks given, difficulties in comparing student performance across and within partnerships, over-generous marking, the assessment of the intellectual skills required of a graduate and a number of

logistical issues. Nonetheless the audit team is satisfied, from its study of the documentation available, that responses are generated, usually in a timely manner, and that remedial actions follow. In cases where serious concerns were raised by external examiners the team found evidence of decisive action to resolve the problem, including one case involving sustained additional support being given by the link tutor and central staff development personnel. Overall the team concludes that the appointment and use of external examiners are generally well managed and contribute strongly to the monitoring and maintenance of academic standards within CP.

The use made of external reference points in collaborative provision

64 In reviewing the use made of external reference points in CP the audit team found clear evidence of the systematic application of *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ) within validation and review documentation. Equally, there is evidence of the existence and use of clearly written programme specifications which relate to subject benchmark statements, are checked at validation, monitored through PSAADs, and updated on the University's Product Catalogue. The team was advised by representatives of partner institutions that the University provides well-organised training workshops and procedures manuals to help them understand and use external reference points. The team confirms the view of the 2004 institutional audit team that the University has made full use of the Academic Infrastructure.

65 The University has taken particular care to check its collaborative procedures against the precepts of the *Code of practice for the assurance of academic quality and standards in higher education (Code of practice)*, published by QAA. The process review of CP identified areas for improvement in seven critical phases of the process: initial development and approval; contract development; programme development; validation; programme

operation; programme monitoring and review; and exit and closure - all of them significant features of the *Code*. With the agreement of Academic Board, the review was followed up by an internal academic audit of CP, comprising six separate audits of two days each. Audit teams included external members and partner representatives, and, in the view of the audit team, the process was well designed and professionally implemented. The process review and internal academic audit were instrumental in encouraging the University to redefine its policies and procedures for CP, leading to the revised policies contained in the 2005 CPOM and in the production of a detailed action plan which refers throughout to those sections of the *Code of practice* which bear upon CP. The action plan, which has been subsequently reviewed, has, in the view of the team, led to significant improvement in the way the University understands, organises and communicates to partners its CP arrangements. In this context, and as indicated above (see paragraph 27) the team considers the University's effective application of process review and internal academic audit to CP to be a feature of good practice.

Review and accreditation by external agencies of programmes leading to the awarding institution's awards offered through collaborative provision

66 The review and accreditation by external agencies of programmes leading to the University's awards offered through CP has only limited application, being restricted to a small number of programmes, for example in Engineering, where accreditation is sought jointly for both the overseas programme and the local element. The audit team did not investigate this area in depth, but a scrutiny of earlier audit reports suggests that the University is both open and responsive to the comments of external agencies, including professional, statutory and regulatory bodies.

Student representation in collaborative provision

67 The University requires partner institutions to establish arrangements for student representation on all CP. Some variations are permitted, but arrangements, which are approved at validation and subsequently reviewed, are in all cases expected to match those operating for internal programmes. The University stated in its CPSED that the normal expectation is for at least one student representative per academic level or cohort, but since this is not stated explicitly in the procedure manuals for validation and review or in formal contracts, it may wish to consider making explicit a threshold requirement for student representation to ensure that its expectation is clearly communicated to partner institutions.

68 All programmes are required to have a board of study or equivalent with student representatives. It is usual practice for meetings of these boards to include reports from student representatives as a standing item. Student representation is also evident in programme review; the review reports seen by the audit team demonstrated that meetings with student representatives take place, and that students' views are taken seriously in the development of recommendations for programme enhancement.

69 The audit team was told by CP students that arrangements for student representation are generally effective. All students who met the team understood their status as students of the University and of the collaborative nature of their programmes, confirmed that their views are effectively represented through the formal committee structures, and gave examples of how informal networks and contacts with staff have enabled potentially difficult issues to be resolved at an early stage. Most reported regular contact with their link tutor, whose role they regarded as an additional means of ensuring that their views are represented to the University.

70 The University requires partner institutions to have in place complaints and appeals procedures consistent with those operating for internal programmes. It expects cases brought under these procedures to be dealt with in the first instance at partner level, but instigates an investigation using its own procedures where issues remain unresolved. The students who met the audit team were aware of both sets of procedures, and, based on its meetings with students and staff at partner institutions, the team is of the view that complaints and appeals are handled effectively, and issues resolved in a timely manner. Nonetheless, the recent process review of CP identified some instances of a lack of consistency between partner and University complaints and appeals procedures. The University responded in September 2005 by introducing a revised contract template to make the requirements for these policies and procedures more explicit, by distributing to all CP students a leaflet setting out their entitlements and by including a content checklist for student handbooks in the appropriate procedure manuals to ensure the provision of a consistent level of information. The University's response to the process review is, however, very recent, and it will doubtless monitor its effectiveness on a continuing basis.

71 Student representation at programme level is well established and was valued by the students who met the audit team. Procedures for reflecting the student perspective in monitoring and review appear robust. Nevertheless, while the audit team found evidence of student representation within partner institutions at strategic levels, it did not see evidence of CP students being strongly represented on University committees, and the University may wish to consider the feasibility and desirability of promoting such representation within its committee structure.

72 Overall the audit team formed the view that the University is committed to student representation in the quality management and enhancement of its programmes and is largely successful in hearing and responding to the student perspective within CP.

Feedback from students, graduates and employers

73 The University stated in its CPSED that it devolves responsibility for capturing student feedback to partner institutions, ensuring at validation that appropriate mechanisms will be in place and the matter seriously addressed by programme teams. It operates a range of mechanisms for collecting student feedback, including module evaluation questionnaires, end of year evaluations, discussions with students, surveys (conducted on an annual basis in respect of students attending the University as part of the combined recognition and validation arrangement) and board of study minutes. A summary of student feedback and the response to it is incorporated within PSAADs, which remain the primary means through which the University receives such feedback, supported by commentaries on issues raised at meetings at which students are represented; though the recently introduced augmentation of link tutors' reports and PSAAD commentaries by a mid-year report are expected to give link tutors an increasingly significant role in communicating the views of CP students to the University.

74 The audit team was advised by students that they consider their views are noted and acted upon, and was provided with persuasive evidence that this is so. Its scrutiny of a range of collaborative PSAADs demonstrated effective monitoring of student feedback at programme level and the existence of appropriate action planning and monitoring of responsive actions. The team saw examples of student related issues being addressed at institutional level through this process.

75 The University made only limited reference to feedback from employers or graduates in its CPSED, reporting only that its alumni network has a website where graduates can contact the University and that it has established a specific network for graduates in Malaysia. In addition, it has undertaken a first-destinations survey of recent graduates of its recognition and validation programme. It made little comment about employer feedback beyond a general statement that it is used to inform programme development.

76 The University did not offer an evaluation of the effectiveness of its mechanisms for obtaining feedback from students, graduates and employers. Nonetheless, the audit team formed the view that the procedures for collecting and responding to student feedback from CP are sound, and that the student perspective is a significant dimension of quality enhancement. On the basis of the documentation available to it, however, the team concluded that the University's engagement with graduates and employers is currently variable, and the University may accordingly wish to give further consideration as to how their views can be collected and incorporated with more consistency into the assurance of quality and standards within CP.

Student admission, progression, completion and assessment information for collaborative provision

77 The University claimed in its CPSED to have made significant progress in implementing its new student record system since the institutional audit, and that this system has the potential to provide a full range of student data for use in the analysis of assessment, progression and awards. In terms of CP, however, the system is currently fully operational only for indirectly funded students. In particular, while the two partner institutions delivering accredited provision have direct access to the system, all other partners are required to forward their data for manual input by faculty staff.

78 The University requires partner institutions to collect and evaluate statistics on admissions, progression, completion and final destinations and present them annually in their PSAAD. As indicated above, however, (paragraph 56), the audit team considers the quality of evaluation by programme teams variable, and it was able to find little evidence either of the analysis being linked closely to PSAAD action plans or of the data being consistently or rigorously considered within the University. In the light of this, the University may wish to consider how it

can further develop the ability of CP teams to analyse and evaluate data, and how that analysis, once achieved, can contribute optimally to quality enhancement and the assurance of academic standards.

79 For assessment board arrangements to be approved at validation they must include a statement of who is responsible for compiling assessment data. This allocation of responsibility is currently variably located among partner institutions, being in some instances the responsibility of the partner and in others that of the University. The University intends its new record system to be the single source of data for assessment boards by the start of academic year 2006-07.

80 The audit team saw evidence from the outcomes of annual monitoring that the accuracy and consistency of data have improved since the institutional audit, and notes that the University has implemented a plan to facilitate academic planning information flow through key committees. Nonetheless, while such progress is to be welcomed, it agrees with the University that it is not yet in a position to exploit to the full the potential of its new student record system to ensure the effective use of statistical data to influence strategic planning in CP. Accordingly the team considers it desirable for the University to improve its analysis and use of data in the management of quality and standards in CP.

Assurance of the quality of teaching staff in collaborative provision; appointment, appraisal, support and development

81 The University stated in its CPSED that the suitability of staff appointed to teach on its CP is confirmed at validation and programme review. The University does not normally become involved in appointments, but acknowledged in its CPSED the importance of satisfying itself that staff teaching on CP are appropriately qualified and that the partner college has effective measures to monitor and assure their proficiency. While validation, monitoring and review are the normal

mechanisms for achieving this objective, and while the University claims to be notified of changes to staff teaching on its programmes, it has also recognised the need for a more systematic process of notification and closer monitoring of the adequacy of staffing arrangements. It has begun to respond to this need by requiring staffing information to be reported in both the PSAAD and the link tutor's recently introduced mid-year report, and for it to be monitored by the appropriate director of school.

82 The audit team noted that while the University requires all staff teaching on degree courses to be qualified to degree level or beyond, this requirement is not specified formally in relation to CP. While the team learned of instances in which the University had refused to allow programmes to proceed on the basis of inadequate qualifications amongst the proposed teaching staff, it also learned of an instance where a programme had been validated on the basis that insufficiently qualified staff would in the future secure appropriate qualifications. Given this apparent inconsistency it is advisable for the University to make explicit its requirements for the qualifications of staff in partner institutions who contribute to its programmes.

83 The audit team examined two examples of staffing problems at partner institutions, and is satisfied that the University was kept informed of the situation by the link tutor and was able to offer appropriate guidance and support. In each case, a detailed report of events and their resolution appeared in the PSAAD. It was clear that the constructive and supportive nature of the relationship between the partner and the University had allowed a timely and active response, and that both partner and University had ensured that as far as possible the problems had minimal impact on the quality of students' experience or on their level of performance.

84 The University claims to encourage partner institutions to engage in research-informed teaching, and all partner institution staff teaching on CP are expected to undergo

annual appraisal. The audit team explored the perceptions of the staff of partner institutions as to how the University supports the overall development of a higher education culture within their institutions. As a matter of policy the University encourages staff in partner institutions to engage in further professional study leading to higher qualifications; staff are given time to do this and, where they register for a programme of study at the University the fee arrangement is identical to that appertaining for University staff. Both senior managers and academic staff confirmed that their aspirations have been significantly furthered by their partnership. For example, access to the activities of the Learning Development Unit (LDU) and the Centre for Staff Development (CSD) is available without charge to all staff of the partner institution, not simply those contributing to CP, and the University claimed in its CPSED that significant numbers of such staff use University resources to update their academic qualifications. A range of University staff, from central services as well as academic units, provides training opportunities and guidance on the management of quality and standards in higher education; in some cases University processes and procedures for quality assurance and enhancement, including the PSAAD, have been widely adopted within partner institutions. The team heard in particular about the value of attending the Learning, Teaching and Assessment Conference which had allowed staff from different partner institutions to meet and interact and to become involved in the broad social, cultural and academic environment of the University as a whole.

85 The audit team's impression that the University's approach to collaborative activity is more than simply commercial and instrumental was supported by both documentary evidence, and in discussions with link tutors and educational developers within the University, which together demonstrate the existence of an active dialogue among partnership staff, external examiners and link tutors. The team also found evidence of a culture of detailed engagement with external examiners' reports

and other parts of the PSAAD documentation. Overall, the team considers the University's application of integrated institutional expertise in support of the continuing development of a higher education culture amongst partners a feature of good practice.

Assurance of the quality of distributed and distance methods delivered through an arrangement with a partner

86 The University's CP includes a small amount of flexible and distributed learning delivered through an arrangement with a partner. The audit team was able to explore these arrangements in relation to a small sample of collaborative links by means of documentation.

87 The University explained in its CPSED that where flexible and distributed learning involve an overseas partner, programmes are distance taught by University staff using premises and resources provided by the partner. Distance learning programmes, which mainly comprise continuing professional development, involve delivery by a combination of distance learning and sometimes staff contact. The University ensures comparability of academic standards of awards gained through distance education with those of other provision through the usual mechanisms of programme approval and review, external examiner reports and annual monitoring.

88 The University's Distance Education Guidelines provide advice on curriculum design and delivery, learner support, assessment and learning resources. As distance taught and distance learning programmes do not involve delivery by partners these are validated and reviewed as internal programmes on the basis of normal quality procedures but with particular emphasis on student support and the appropriateness of learning materials, and including the approval of a sample module. The small sample of programme approval and monitoring reports available to the audit team confirm appropriate scrutiny, though the team believes the process would be strengthened by

the provision of specific guidance for distance education validation panels.

89 Responsibility for quality assurance of distance education largely lies with the University. For both types of distance education programmes University staff set the assessment and undertake all marking and moderation, and the University's regulations for assessment and external examining apply. Partner institutions are responsible for all aspects of local student support, and their capacity to provide it is established at partner approval stage where these issues, together with their financial standing and reputation are considered. All quality and standards issues arising from programme operation and external examiner reports are monitored in PSAADs.

90 On the basis of the available documentation, the audit team found that the University has sufficient and appropriate arrangements in place to assure the quality of distributed and flexible learning programmes delivered through arrangements with partner institutions.

Learning support resources for students in collaborative provision

91 The University manages all its learning support resources through two central service teams, Learning and Information Services (LIS) and Computer and Information Services (CIS), whose operational roles for different categories of CP are clearly set out in CPOM. The University's approach to learning resource support for CP involves assuring itself at validation (normally by means of both a report from the Director of LIS based on a visit and a self-assessment from the candidate institution) that a partner institution is in a position to provide appropriate resources to support each programme it seeks to offer. In this context, LIS is charged with providing additional breadth and depth of learning materials, not with substituting for deficits in partner resources; it also provides specialist advice to partner institutions' learning resource staff, maintaining an office to provide advice and support for off-campus students and staff accessing its

provision, a service augmented by the dedicated Off-Campus Gateway on the University website, which advises off-site users on accessing information technology resources. The University claimed in its CPSED that this Gateway plays an important role in supporting distributed learning. The University's virtual learning environment (VLE) is also available to CP students, but the audit team was advised that many partner institutions have their own VLE, with which students may be more comfortable; in fact the team found more generally that many CP students have a preference for using their own institution's learning resources.

92 Access to University learning resources has in the past varied according to the category of provision, with only indirectly funded programmes having automatic full access. The University has now, however, approved a new approach intended to give equal access to all HEFCE funded programmes. Senior managers and academic staff in partner institutions cited this as a welcome development which should enhance the quality of the educational experience of students in directly funded provision. The University holds an annual conference to update partner institutions' librarians or their equivalent on available services, supported by a continuing discussion forum for consideration of issues as they arise.

93 Evidence from the audit team's meetings with CP students demonstrated that they are aware of the range of learning resources available to them through the University and are generally satisfied with what is provided. Students confirmed that appropriate training opportunities exist to ensure that they are able to access the University electronic resources effectively.

94 The University's main instrument for monitoring learning resources is the PSAAD, and the link tutor is responsible for ensuring, on a continuing basis, that key LIS services are being effectively delivered. The audit team viewed a range of validation and review reports, and is satisfied that the University has effective processes for approving and

monitoring the effectiveness of learning resource provision in CP, that it is working with its partner institutions to monitor provision, and that it has procedures for responding appropriately and promptly to address identified deficits and for the purpose of enhancement.

95 Overall, the audit team found that the University has effective policies and procedures in place for managing the quality assurance of learning resource provision in CP. Students and academic staff in partner institutions are generally satisfied with the level of such resources available to them, and the University offers a high level of support in helping partner institutions develop and enhance their own resources. The new contractual arrangements for learning resource access was welcomed by the partners involved, and the team anticipates that the University will monitor carefully the impact of this approach on the availability of LIS and CIS resources generally.

Academic guidance and personal support for students in collaborative provision

96 The University does not require collaborative partners to implement any specific system of academic guidance and personal support or operate to a minimum standard. Proposed arrangements are approved at validation, reviewed during periodic review, when panels are required to ensure that appropriate mechanisms are in place, and monitored annually through PSAADs.

97 In its CPSED the University reported that from both its own procedures and external reports it is satisfied that the quality of support and guidance provided to students in CP is extremely good, a view confirmed by the audit team on the basis of its examination of relevant evidence, which indicates that panels give appropriate consideration to the mechanisms for providing academic support and guidance in all categories of CP. The team does note, however, that the PSAAD template does not include a specific section on

guidance and support, which is accordingly addressed under other relevant headings. While the team found no evidence that monitoring is deficient, it may be helpful for the University to satisfy itself that the reporting template is adequate to ensure the matter is satisfactorily addressed.

98 Students who met the audit team similarly confirmed the high standard of their academic support and personal guidance, the effectiveness of their induction programmes, the accessibility of, and support provided by, their personal tutors and the satisfactory nature of the written guidance with which they had been provided. Some reported involvement in personal development planning (PDP) and had received tutorial support in respect of its more reflective aspects. Most students on validated and franchise programmes reported positively on meetings with the link tutor, though some would have welcomed earlier contact, preferably during induction. Although aware of the support services available to them at the University, none had used them due to similar services being more conveniently available in their own institutions.

99 Students progressing from an international partner to the University are interviewed in their own country by a University staff member, and provided with appropriate information, including the availability of English language support classes and cultural aspects of living in the UK; where it is considered appropriate, bespoke web pages are prepared for international students in connection with their intended programme of study, and students from these programmes confirmed to the team they contained relevant and high quality information.

100 Overall the audit team formed the view that the University's CP students generally receive high quality academic support and personal guidance, both of which are appropriately approved, conscientiously monitored and effectively evaluated.

Section 3: The collaborative provision audit investigations: published information

The experience of students in collaborative provision of the published (including electronic) information available to them

101 The information published by the University and partner institutions for prospective CP students consists primarily of marketing materials, including web-based information, leaflets and prospectuses. For current students the published information comprises programme specifications, programme handbooks, student handbooks and information contained on University and partner institution websites. The audit team saw examples of published information from across this range.

102 The University requires all relevant marketing and publicity information to be submitted to its Corporate Communications team for prior approval to ensure that it fairly and fully reveals the status of the programmes offered. On the basis of its investigations the team is satisfied that partner institutions are aware of their responsibilities in this respect and generally meet them. Recent enhancements to the link tutor role mean that in future such tutors will assist the Corporate Communications Team and the relevant faculty or school in monitoring information given to students and will be asked to confirm in their mid-year report that marketing and publicity materials comply with requirements.

103 The University stated in its CPSED that it is keen that student handbooks, which are normally written by staff of partner institutions, are increasingly consistent. It has accordingly produced a standard content checklist, which appears in the relevant procedure manuals, and validation and review panels are expected to ensure that the handbooks reflect its content. In addition, the audit team notes that student information is to be the subject of the University's next internal academic audit. The

team viewed a range of student handbooks, and is satisfied that, while their style varies, the standard content list is invariably addressed. The team also sampled papers presented to validation and review panels and the subsequent reports, and is satisfied that panels are giving due consideration to the quality and standard of student handbooks.

104 Students who met the audit team confirmed their satisfaction with the accuracy, quality and amount of information they receive and the advertising and marketing material to which they have been exposed. It was also clear to the team that students have been fully informed about assessment regulations, assessment criteria and mitigation, appeals and complaints procedures. Overall, therefore, the audit team concludes that the University has effective procedures for ensuring the appropriateness, accuracy and reliability of published information relating to CP, and that students are satisfied that the information to which they have access meets their needs and is accurate and reliable.

Reliability, accuracy and completeness of published information on collaborative provision leading to the awarding institution's awards

105 The audit team is satisfied that, in respect of its CP, the University has addressed the advice of the 2004 institutional audit team to ensure the consistency of published information. The responsibility for signing off externally published materials is now firmly located with the Corporate Communications team, and the supporting roles of the link tutor and the relevant faculty or school has been clarified in CPOM.

106 The University Product Catalogue project ensures that the majority of programme specifications are available on-line, as well as being available in the relevant student handbook, and the audit team was informed that 97 per cent of programme specifications are now in the public domain. Programme specifications are checked and approved at validation and review, and updated annually

for inclusion in PSAADs. On the basis of its consideration of a range of specifications and associated documentation the team is satisfied that the University has satisfactory procedures for ensuring that they are current and contain accurate, reliable information.

107 The University stated in its CPSED that it is making good progress towards meeting the requirements of the Higher Education Funding Council for England's document 03/51, *Information on quality and standards in higher education: Final guidance*, responsibility for which is located with QUS. The University claims to have provided all required information to date, including external examiner reports and periodic review reports, and intends to link the Product Catalogue database of programme specifications to the HERO TQI website when HERO has established the necessary links.

108 The audit team considers the University's published information on its CP to be accurate and reliable. The University is alert to the requirements of the Higher Education Funding Council for England's document 03/51 and is moving in an appropriate manner to fulfil its responsibilities in this respect.

Findings

Findings

109 An audit of the collaborative provision (CP) offered by Liverpool John Moores University (the University) was undertaken during the period 27 to 31 March 2006. The purpose of the audit was to provide public information on the quality of the programmes of study offered by the University through arrangements with collaborative partners, and on the discharge of the University's responsibility as an awarding body in assuring the academic standard of its awards made through collaborative arrangements. As part of the collaborative audit process four of the University's collaborative partners were visited. This section of the report summarises the findings of the audit. It concludes by identifying features of good practice that emerged during the audit, and making recommendations to the University for action to enhance current practice in its collaborative arrangements.

The effectiveness of the implementation of the awarding institution's approach to managing its collaborative provision

110 The strategy of Liverpool John Moores University (the University) is to maintain the strength of its collaborative provision (CP) and to seek new partners consistent with its overall mission and capable of providing income generating and educationally sound programmes. It has no current plans to increase the number of UK further education partners delivering other degree programmes. Internationally, the University is seeking to build strong partnerships with larger organisations capable of delivering a range of suitable programmes. The University keeps its CP portfolio under regular review.

111 The University recognises seven different types of partnership with differing levels of partner and programme autonomy. To some extent these reflect historical arrangements, but partnership definitions have been largely rationalised to ensure that programmes are delivered within a clear operational framework,

as defined in the Collaborative Programmes Operations Manual (CPOM). CPOM provides guidance on the establishment, approval, and review of partnership arrangements and identifies the contractual responsibilities of the University and its partners. Overall, the University is developing a wide-ranging set of policy and guidance documents to assist its staff in the establishment and maintenance of collaborative arrangements and to ensure an effective approach to quality assurance and enhancement. It has also recently restructured its arrangements for CP to separate responsibilities for management and quality assurance, with the aim of ensuring objectivity and robustness.

112 At programme level, link tutors, who are carefully selected members of academic staff, are charged with developing and maintaining each partnership and ensuring that quality assurance and quality enhancement procedures are active and effective. They appear well supported, and form, as a group, a central layer in the management and enhancement of the student experience. The formal programme review document is the Programme Self-Assessment and Action Document (PSAAD), an extremely thorough document and central to annual monitoring. Issues arising from PSAADs are fed back to the Quality and Standards Committee for the consideration of strategic implications.

113 Overall, it is considered that the University's strategic approach to its CP is clear and explicit, appropriate to its mission and context, and adaptable to national and international developments. In particular, the audit found that the University is successfully contributing to the development of a higher educational culture amongst its partners, particularly by the effective deployment of staff development opportunities, to which central service personnel as well as academic staff contribute, and in its support for a high-quality learning environment. The University's application of integrated institutional expertise in support of the continuing development of a higher education culture amongst partners is considered a feature of good practice.

114 The role of the link tutor is crucial to the success of partnerships and programmes and to the enhancement of the quality of the student experience. This role has been reviewed, has demonstrably contributed to enhanced provision in CP and is found to receive appropriate support and encouragement from the University. Accordingly, the continued development of the link tutor role and the resulting enhancement of the quality of the student experience is considered a feature of good practice.

The effectiveness of the awarding institution's procedures for assuring the quality of educational provision in its collaborative provision

115 The procedures for programme approval, monitoring and review are documented in procedures manuals; partnership approval, management and review procedures are specified in CPOM. All documentation has been recently updated, and some elements, such as institutional visits as part of due diligence and regular business reviews, have yet to be implemented.

116 The University approves new partnerships through a process which includes the consideration of broad partnership issues, but gives less consideration to the continued suitability of a given partner to offer programmes leading to the University's awards or to a partner's capacity to deliver a substantially larger portfolio. After initial background checks, partnership development proposals are forwarded to the appropriate University body, and after further inquiries final planning approval can be granted. The University only operates a partnership review procedure in the case of two accredited institutions, which are reviewed through a process of institutional review; in all other cases aspects of partnership review are combined with programme review, though this will in future include a regular business review. The audit found that procedures for the monitoring and review of institutional partners (as opposed to programmes) could be made more robust,

and it is considered desirable for the University to strengthen its monitoring and review of CP at the partnership level.

117 In its CPSED the University reported that programme validation and quinquennial review for CP arrangements are an augmented version of that used for internal provision, although the emphasis varies according to the type of collaborative programme under consideration. Approval and review are undertaken by panels containing external representation, and focus on change over time, taking into account past monitoring and external reports, student feedback, which is conscientiously collated, and appropriately address key aspects of the Academic Infrastructure. The outcomes are reported and monitored both at faculty and institutional level, and a University overview of all collaborative validations and reviews, largely focusing on event outcomes and tracking of improvement actions, is presented to the Partnerships Quality and Standards Panel.

118 The audit found the processes of programme validation and review thorough and effective. Nonetheless, institutional level oversight of CP appears more effective in ensuring compliance with procedures and identifying and monitoring actions than in identifying emerging themes across all partnerships. This inevitably restricts the University's capacity to maintain an appropriate institutional overview and advance its policy development and quality enhancement agendas. The University has recently begun to address this issue, and it is considered desirable for it to build on this work by strengthening its oversight of issues and themes arising from quality management processes across its CP.

119 In its CPSED the University stated that programme self-assessment is strengthened by the fact that reports are considered both at faculty and University level. PSAADs, which include a link tutor commentary, are prepared by the partner and initially considered by schools. Schools address issues under their control, and submit an exception report to the appropriate faculty quality committee identifying issues to be resolved at faculty or

institutional level. All partner PSAADs are also considered at University level by the University's quality support team (QUS), which plays a pivotal role in the process, including providing feedback to the main participants and writing the Annual Quality Audit Report for the Quality and Standards Committee and Strategic Management Group for approval of actions.

120 The audit found that PSAADs are a valuable tool in monitoring the quality of the student experience in CP. They are generally thoroughly scrutinised and responded to at both faculty and University level. Nonetheless, the University is encouraged to consider whether the process of exception reporting combined with a focus on action reporting consistently and reliably provides it with an overview of recurring issues and themes emerging across partnerships.

121 The University's service groups in the areas of learning, study and infrastructural support work actively with partner colleges and programme teams to ensure the adequacy of service provision and the maintenance of a high quality learning environment. The University's staff development programme is available to all staff in partner institutions, not just those directly involved in CP.

122 The University requires that staff teaching on CP are adequately qualified. The audit found, however, that the procedures for enforcing this requirement are not wholly robust, and it is considered advisable for the University to make explicit its requirements for the qualifications of staff in partner institutions who contribute to its programmes.

123 Overall, the audit found that on the basis of the available evidence broad confidence can reasonably be placed in the present and likely future capacity of the University to satisfy itself that the learning opportunities offered to students through its collaborative arrangements are managed effectively and meet its requirements.

The effectiveness of the awarding institution's procedures for safeguarding the standards of its awards gained through collaborative provision

124 The academic standards of all the University's awards are set initially through a validation process which includes external expertise and is cross-referenced to the Academic Infrastructure. The audit found the process effective in ensuring that programmes are aligned with *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ), meet appropriate professional and statutory body requirements and engage with Subject benchmark statements.

125 Awards gained through CP operate within the assessment regulations of the University Modular Framework. Nonetheless, the audit found several examples of licensed variations to the scheme: in the case of accreditation arrangements, for example, once a programme, designed by the partner, has been approved by the University as being of a standard equivalent to its own awards, it can be delivered, assessed and quality assured using approved local arrangements. Especially given the complexity of the University's CP categories, it is not always clear from University documentation where the final decision to approve changes to regulations is taken. It is therefore considered advisable for the University to ensure that its procedures for the initial approval and subsequent modification of regulations operated by partner institutions are in all cases transparent and rigorous.

126 The University also operates a combined recognition and validation arrangement with two overseas partners. Marks gained during the final stage of study of the partner's award are included in the calculation for the University's award. While the audit found that the arrangement is generally well managed, and monitored in a manner sufficiently robust to assure the standards of those elements of the award delivered directly by the University, the academic relationship between achievement at the partner institution and at the University

requires constant vigilance in the monitoring of student achievements at the partner institution. Overall it is considered advisable for the University to reconsider the proportion of credit for an institutional award which may be given through a combined recognition and validation agreement.

127 Other than in the case of accredited provision, members of the University's academic staff monitor the standards of assessment through double marking and moderation (a process overseen by external examiners) and the audit found that this is conscientiously done. In addition, the University has initiated the developmental use of cross moderation among partner institutions. A sample of assessment board minutes and external examiner reports scrutinised during the audit indicates that the assessment of CP students is generally well managed.

128 The use of external examiners and their reports in CP is the same as for all University provision, though external examiners overseeing accredited provision and the recognition and validation arrangement provide additional scrutiny of curriculum and assessment documentation, and those responsible for franchised provision examine both internal and CP provision as an aid to ensuring consistency. The audit found that responses to external examiners are diligently supplied, generally in a timely manner, and that actions follow. In cases where serious concerns are raised evidence was found of decisive, responsive action being taken.

129 The audit found that the appointment and use of external examiners is generally well managed and contributes strongly to the monitoring and maintenance of academic standards within CP. Nevertheless, in a small number of instances ambiguity or disagreement between different documents was also noted, as were cases of external examiners not understanding all aspects of their contractual obligations. In particular the audit identified instances of disagreement between statements in the Memorandum of Co-operation and the Schedule of Services, and of some

arrangements being out of step with the current provisions of CPOM. While the University intends to update its contracts with HEFCE-funded partners in the near future, given the importance of contracts as the legal foundation for CP, it is considered advisable for the University to review all partner contracts on a regular basis.

130 The external examiners testify that the data sets which inform the assessment and awards process are accurate, though not always clearly presented. The University acquired a new software tool in 2003, however, and is expanding its application, though its potential for improved monitoring of activity and performance has not yet been fully exploited or applied to all aspects of CP. While the audit found a general increase in the confidence of data users, information on student performance was mainly reactive, with only limited critical interpretation being supplied. Accordingly it is considered desirable for the University to continue to seek ways of improving its analysis and use of data in the management of quality and standards in CP.

131 The audit found, on the basis of a scrutiny of a sample of award certificates and transcripts in respect of some programmes of study undertaken wholly or partially overseas, that the precise nature of the study undertaken, particularly in respect of language and location, is not always sufficiently explicit. It is therefore considered advisable for the University to ensure that certificates and transcripts in respect of programmes undertaken in CP do not omit any information needed for a full understanding of a student's achievement.

The awarding institution's use of the Academic Infrastructure in the context of its collaborative provision

132 In reviewing the University's use of the Academic Infrastructure in CP the audit found clear evidence of the systematic application of FHEQ within validation and review documentation, and of clearly written programme specifications that relate to subject benchmark statements, are checked at

validation, monitored by means of PSAADs, and updated on the University's website. The University provides well-organised training workshops and procedures manuals for understanding and using external reference points for partner institutions, taking particular care to check its procedures against the relevant sections of the *Code of practice for the assurance of academic quality and standards in higher education (Code of practice)*, published by QAA. The University is considered to have engaged appropriately with FHEQ, subject benchmark statements, programme specifications and the *Code of practice*, published by QAA.

The utility of the CPSED as an illustration of the awarding institution's capacity to reflect upon its own strengths and limitations in collaborative provision, and to act on these to enhance quality and safeguard academic standards

133 The audit found the University's CPSED to be an example of its capacity to reflect upon its own strengths and limitations in CP. With its accompanying documentation the CPSED was considered a useful introduction to the types and scope of CP within the University, identifying the main organisational and procedural elements used to manage quality and standards, and offering a degree of critical self-evaluation commensurate with the nature and provenance of such a document. The features of good practice identified in the course of the audit are closely allied to the University's own evaluation. Some of the audit's recommendations are suggested in the CPSED, but more fully indicated within the documentation arising from internal review processes. Accordingly the audit considers the CPSED reinforces the view that the University is sufficiently self-monitoring to safeguard academic standards and enhance quality.

Commentary on the institution's intentions for the enhancement of its management of quality and academic standards in its collaborative provision

134 The audit found that the University is strongly committed to the enhancement of CP, and that its quality assurance procedures enable it to identify areas for further development. It expects effective practice and an evaluation of its impact to be identified through annual monitoring. The audit found evidence that this process has identified areas of good practice as well as development and enhancement needs.

135 The University stated that it intends to enhance its management of quality and academic standards in CP through a range of developments in information management, a series of process reviews following the European Foundation for Quality Management Excellence Model (EFQM), improvements in teaching, learning and assessment and the enhanced provision of specialist staff development for partner institution staff. These intentions are congruent with its strategy for CP. Reviewing these areas, the audit found the University justified in claiming that these are important contributors to the enhancement of the quality of its CP.

136 The University provides a variety of enhancement opportunities for staff of partner institutions, including guidance and support for curriculum development, programme validation and review and learning quality enhancement workshops. Opportunities for individual staff development are available through subject meetings with University staff, general and bespoke programmes delivered by the Centre for Staff Development and participation in the annual Learning, Teaching and Assessment Conference. Partner staff are also actively engaged in fora for information exchange, discussion, debate and sharing of good practice such as the Partnership Forum and the Consortium Management Board. The contributions made by link tutors and by the Learning Development Unit appear

particularly noteworthy. Overall, the audit found the University's application of integrated institutional expertise in support of the continuing development of a higher education culture amongst partners is a feature of good practice.

Reliability of information provided by the awarding institution on its collaborative provision

137 The University made available a range of published material related to CP, including marketing and publicity documentation, programme specifications, programme and student handbooks, and a wide range of web-based information. It approves and signs off all relevant information provided by partner institutions, both marketing information and handbooks, which are produced to a standard checklist of content and approved at validation and review. The audit concluded that the University has effective policies and procedures for ensuring the reliability of information on CP, in respect of which it has responded appropriately to the recommendation of the 2004 institutional audit to implement strategies to ensure the consistency of published information across all processes and at all levels of operation.

138 The audit found the University's published information on CP accurate and reliable. The University is alert to the requirements of the Higher Education Funding Council for England's document 03/51, *Information on quality and standards in higher education: Final Guidance* and moving appropriately to meet its responsibilities.

Features of good practice

139 Of the features of good practice noted in the course of the CP audit, the audit team noted in particular:

- i its consultative approach to enhancing formal procedures for managing quality and standards in collaborative provision (paragraph 21)

- ii its continued development of the link tutor role and the resulting enhancement of the quality of the student experience (paragraph 23)
- iii its effective application of process review and internal academic audit to collaborative provision (paragraphs 27, 65)
- iv the University's application of integrated institutional expertise in support of the continuing development of a higher education culture amongst partners (paragraph 85).

Recommendations for action

140 The University is advised to:

- i ensure that its procedures for the initial approval and subsequent modification of regulations operated by partner institutions are fully communicated to and understood by those responsible for implementing them (paragraph 30)
 - ii ensure the timely review of all partner contracts, including those in respect of accredited provision (paragraph 32)
 - iii strengthen its procedures for monitoring the quality and standards of accredited provision and define the criteria for achieving accredited status (paragraph 38)
 - iv reconsider the proportion of credit for an institutional award which may be given through a combined recognition and validation agreement (paragraph 42)
 - v ensure that certificates and transcripts in respect of programmes undertaken in collaborative provision do not omit any information needed for a full understanding of a student's achievement (paragraph 43)
 - vi make explicit its requirements for the qualifications of staff in partner institutions who contribute to its programmes (paragraph 82).
- 141 It would be desirable for the University to:
- i strengthen its monitoring and review of collaborative provision at the partnership level (paragraph 58)

- ii draw on a wider range of evidence to strengthen its oversight of issues and themes arising from quality management processes across its collaborative provision (paragraph 59)
- iii improve its analysis and use of data in the management of quality and standards in collaborative provision (paragraph 80).

