University of Hull

Audit of collaborative provision

March 2011

Contents

Section 4: Institutional approach to quality enhancement in collaborative provision 19

Section 5: Institutional arrangements for postgraduate research students studying through collaborative arrangements 21

Section 6: Published information 21

Introduction

An audit team from the Quality Assurance Agency for Higher Education (QAA) carried out an Audit of collaborative provision at the University of Hull from 14 March to 18 March 2011. The purpose of the audit was to provide public information on the quality of the institution's management of the academic standards of its awards and the quality of learning opportunities available to students through collaborative arrangements.

Outcomes of the Audit of collaborative provision

As a result of its investigations, the audit team's view of the University of Hull is that in the context of its collaborative provision:

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

Institutional approach to quality enhancement

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

Institutional arrangements for postgraduate research students studying through collaborative arrangements

The University has no postgraduate research provision through collaborative partnerships.

Published information

The audit found that reliance could reasonably be placed on the accuracy and completeness of the information the University publishes about the quality of its educational provision and the academic standards of its awards offered through collaborative provision.

Features of good practice

The audit team identified the following areas of good practice:

- the supportive and developmental role of academic contacts and consultants, particularly in the context of curriculum design, staff development and quality enhancement (paragraphs 27, 113)
- the clarity of the University Code of Practice: Production of Student Handbooks, and associated templates, which result in consistent and comprehensive information for students (paragraph 136).

Recommendations for action

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

Recommendations for action that the team considers advisable:

- ensure that awards with the same title have the same content, assessment and external examining team (paragraph 34)
- make systematic use of management information, including statistical information, at university level (paragraph 63)
- improve University oversight of, and ensure timely and effective response to, issues and actions raised through monitoring processes (paragraph 72).

Recommendations for action that the team considers desirable:

- improve the timeliness of the approval and monitoring of recognised teacher status (paragraph 112)
- revise the process for approving the accuracy of marketing information prior to publication (paragraph 134).

Section 1: Introduction and background

The institution and its mission

1   The University of Hull was founded in 1927 as a University College of the University of London and received its Royal Charter in 1954. Following merger with the former University College Scarborough in 2000, provision is located on two campuses, Hull and Scarborough.

2   In 2009-10 the University comprised approximately 23,165 students, plus a further 2,738 students on directly-funded programmes validated by the University and delivered in further education colleges (FECs). The total number of students who studied on collaborative programmes in 2009-10 was 3,606.

3   The University's mission and strategy for its collaborative provision is to develop sustainable partnerships that are mutually beneficial. This is achieved by the validation of provision in local FECs, so that the University and its partners are able to offer opportunities to students who would otherwise be unable to access higher education.

4   Approximately 80 per cent of the University's collaborative provision is conducted with six regional FECs, and its framework for managing collaborative provision is founded on its relationship with these FEC partners. The University has established a Federation of Colleges with a view to:

- supporting the socioeconomic regeneration and developments across the sub-regions
- supporting the provision of higher-level skills across the region through access to higher education in collaboration with partner colleges
- promoting access by providing much of the localised higher education provision, providing opportunities for mature learners to study part time
- providing continuity of provision in the region when Lincoln University moved most of its provision to Lincoln

- providing support for FEC partners in applying for taught degree awarding powers and Foundation Degree awarding powers.

The information base for the Audit of collaborative provision

5   The University provided the audit team with a Briefing Paper and supporting documentation, including that related to the partner visits selected by the team. The briefing paper contained references to sources of evidence to illustrate the University's approach to managing the security of the academic standards of its awards and the quality of its educational provision. The team had a hard copy of all documents referenced in the Briefing Paper; in addition, the team had access to an electronic copy of supporting documentation, including key committee minutes and papers for the previous year.

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

7   In addition, the audit team had access to:

- the report of the Institutional audit (2009)
- the report of the previous collaborative provision audit (2006)
- reports produced by other relevant bodies (for example, professional, statutory or regulatory bodies (PSRBs))
- the University's internal documents
- the notes of team meetings with staff and students.

Developments since the last audit

8   Collaborative provision was last audited in 2006, when the previous audit team made a number of recommendations relating to the monitoring and management of collaborative provision to ensure parity between home and collaborative provision. As part of the list of recommendations, the University was asked to:

- ensure adequate staffing levels for its expanding collaborative provision
- clarify the revalidation and review processes for programmes at partner institutions
- keep under review the use of academic consultants
- introduce a more systematic approach to partner visits as part of programme approval
- develop a common information system for on-campus and collaborative partner provision
- strengthen the procedures for granting recognised teacher status
- ensure the maintenance of the currency of partner institutions' websites.

9   The current audit team was satisfied that the University had reflected and acted on the findings of the 2006 audit and had given attention to the action taken in the light of its recommendations. However, the team found some areas relating to the recommendations where there was still some further consideration required (see paragraphs 63, 112, 134). This is also reflected in some of the recommendations made in this report.

10   The University also underwent an Institutional audit in April 2009. An issue arose from the Institutional audit report related to the University's distance-taught provision. Although the University has not considered its distance-taught provision to be collaborative provision, the 2009 audit team regarded this provision as a collaborative arrangement according to the *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) published by QAA, and, therefore, recommended that it should be considered in more detail as part of the Audit of collaborative provision.

11   The University established a working group in May 2009 to consider distance-taught provision and the wider collaborations that existed within the University, and to develop frameworks to manage the quality and standards of provision in each type of collaboration. The group confirmed that the University's long-standing definitions of distance-taught provision remain appropriate. However, where any element of student support is being provided by the partner, the collaborative partnerships are redefined and subsequently excluded from this category. Consequently, the working group established two new categories of provision: 'distance taught plus' and 'collaboration'.

12   The University also took actions in response to the recommendations from the previous audits, and these were as follows:

- providing additional support in the University Quality Office (UQO) and at Faculty level, including an additional post in UQO with a specific remit for collaborative provision
- the development of a University Code of Practice on 'Non-comparable provision' to provide additional guidance and clarity of expectation regarding the use of Academic Consultants
- the strengthening and clarification of requirements regarding external comment as part of the programme approval process
- the further development of the programme approvals process for collaborative provision to include three stages and supporting documentation
- the development of a University Code of Practice to articulate its approach to ensuring that programmes and modules are, at all times, 'valid and relevant'
- the review and updating of recognised teacher status to clarify expectations regarding qualification levels and process.

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

13   Until 2010, the management of quality and standards for collaborative provision was overseen by the Quality and Standards Committee (QSC), chaired by the Quality Director, University Registrar and Secretary. It was supported by the following committees, all of which reported to QSC:

- the Collaborative Provision Committee (CPC)
- the Collaborative Programme Approvals Committee
- the Programme Approvals, Monitoring and Enhancement Committee.

The Educational Partnerships Committee, chaired by the Pro Vice-Chancellor (PVC) (Learning and Teaching) and reporting to the Academic Board, also had responsibility for some aspects of collaborative provision.

14   From the beginning of 2010-11 the University implemented a new committee structure, which reflects the management remits of the reconfigured Senior Management Team. Overall executive responsibility for collaborative provision now rests with the PVC (Learning and Teaching). The remit of QSC, including responsibility for collaborative provision, has been subsumed in the revised University Learning, Teaching and Assessment Committee, chaired by the PVC (Learning and Teaching), supported by the Programme Approvals Committee and the Collaborative Provision Forum.

15   There is a Joint Development Board (JDB) for each FEC partner, chaired by the PVC (Learning and Teaching), which provides a forum for supporting the relationship, including broad matters of academic provision. The oversight of collaborative programmes is undertaken by University faculties through a Joint Board of Studies, which reports to the relevant Faculty Learning, Teaching and Assessment Committee, JDB and previously CPC via annual summaries.

16   The detailed management of quality and standards is articulated in a framework comprising regulations approved by Senate, and in Codes of Practice which, prior to 2010-11, were approved by Academic Board, on the advice and recommendation of QSC. Regulations and Codes of Practice are published in the Quality Handbook and each Code of Practice is explicitly designated as mandatory, advisable, desirable or for-information, in terms of its applicability to collaborative provision.

Selecting and approving a partner organisation or agent

17   The process for the approval of a new partnership is described in the University Code of Practice: Educational Partnerships, and detailed in paragraphs 22 to 25 of this report. There are four levels of partnership, defined according to the complexity of the associated activity. The degree of scrutiny required is related to the risk associated with the activities permitted at each level.

18   Having been approved, each new partner signs a Collaboration Agreement, which clearly sets out the expectations of the University and the responsibilities of each party. Existing FEC partners have all signed a Collaborative Provision Agreement, which serves the same purpose.

19   Having obtained the appropriate level of partner approval, various forms of collaboration can be proposed, ranging from matriculation agreements (level 1) to joint awards (level 4). Each different type of activity is subject to a separate agreement, which specifies the University requirements in each case.

Written agreements with a partner organisation or agent

20   A standard Collaborative Provision Agreement between the University and each FEC partner sets out the expectations of each party. Agreements are ongoing, with appropriate review and termination clauses, and specific details of the provision are updated annually, including financial schedules. All legal agreements are produced by the University Solicitor's Office to ensure consistency and reduce risk by ensuring that appropriate safeguards are in place.

21   The processes for the establishment and management of a wider range of partnerships are articulated via the requirements of the University Code of Practice: Educational Partnerships, and use a standard set of Partnership and Collaboration Agreements. The Code requires partners to be granted the requisite level of partnership with the University before any collaborative activity is considered. The Code also details requirements for the review and renewal of partnerships, normally every three years.

Section 2: Institutional management of academic standards

Approval, monitoring and review of award standards

Partner approval

22   The University makes a distinction between the process of approving a new partner and that of approving a programme. The processes for the approval, review, renewal and termination of both UK and international partners are set out in a revised University Code of Practice, which was approved in March 2010 by the Academic Board. The code covers all partnerships including matriculation, progression and exchange agreements, and partnerships for sole or joint delivery of modules and/or programmes leading to University credits or awards. The Code of Practice requires that the University satisfy itself about the financial and academic standing of a potential partner institution and that the educational objectives of the partner are compatible with its own.

23   Four levels of partnership are defined within the Code of Practice, and the University's degree of scrutiny relates to the risk associated with the activities permitted at each level. Site visits and reports provide part of the evidence base for approval of partnerships at levels 2, 3 and 4. The Pro Vice-Chancellor (PVC) (Learning and Teaching) approves level 1, 2 and 3 partnerships, while for Level 4 partnerships approval is through the Senate. Partner approvals are reported to the Programme Approvals Committee.

24   Partnerships are reviewed within a maximum period of five years. Faculties submit a report on the overall effectiveness of the partnership to the PVC (Learning and Teaching), which in the case of level 4 partnerships must be approved by Senate. The Code of Practice also sets out the process for termination of partnerships, which includes the need for an exit strategy to protect the interests of students.

25   While at the time of the audit the revised Code of Practice was still relatively new, the audit team was able to confirm through scrutiny of the documentation that the process is operating in accordance with the code and that as appropriate, for example at the time of renewal, existing partnerships were being brought into line with its requirements.

Programme approval

26   Initial proposals for new programmes are developed in consultation with the designated academic contact or academic consultant. They are initially considered by Joint Development Boards for further education (FE) partners or as part of the annual planning round for other collaborations. The audit team was able to confirm that the University provides a comprehensive range of documentation to support programme design and approval including specific guidance for partners in subjects with no comparable University provision.

27   The audit team also heard, in meetings with staff from partners and the University, and through review of documentation, of the significant support given to partners by academic contacts and academic consultants during the development of new programmes and of the clear commitment from the staff undertaking these roles to partnership working. Additional support and guidance for partners comes from faculty administrative staff and staff development provided by the University Quality Office. The team considered the supportive and developmental role of academic contacts and consultants, particularly in the

context of curriculum design, staff development and quality enhancement, to be a feature of good practice (see paragraphs 66, 113).

28   The University has a three-stage process for the approval of new programmes, which applies to both on-campus and collaborative provision; however, the audit team learned that the University was considering streamlining its approach to two stages. The process for UK partners is set out in a separate University Code of Practice, while the approval of other collaborative programmes largely follows the on-campus process. The difference is that final approval is given by the Programme Approvals Committee rather than being delegated to Full Approval Panels (see below). The two Codes of Practice are closely aligned.

29   The first stage, Development Consent, previously granted through the Educational Partnerships Committee and, since 2010, through the Programme Approvals Committee, considers likely demand for the programme, resources, and alignment with strategic priorities. The second stage, Planning Permission, given by Faculty Planning Permission Committees, confirms that resources are in place and that the programme structure and learning outcomes are consistent with University regulations and Codes of Practice.

30   The final stage is full approval, which has a requirement for external scrutiny of the academic standards of the proposed programme. Full Approval Panels for collaborative programmes make recommendations to the Programme Approvals Committee, which in turn makes the final decision to grant approval. Prior to 2010-11 approval was granted by the Collaborative Programme Approvals Committee for FE partners or by the Programme Approvals Monitoring and Enhancement Committee for other collaborations.

31   Through its review of the documentation, and discussion with staff of the University and its partner institutions, the audit team was able to confirm that the approval process is operating as described above, that it includes appropriate external input and that it makes explicit use of the Academic Infrastructure.

32   The audit team also saw evidence that conditions set by Full Approval Panels are being carefully monitored and followed up by the Programme Approvals Committee (previously by the Programme Approvals Monitoring and Enhancement Committee and Collaborative Programmes Approvals Committee) by means of the University Conditions Register, thereby addressing the recommendation from the 2006 collaborative provision audit that 'conditions and recommendations set at the time of approval are followed up expeditiously and clearly documented….'

33   However, the audit team found that the University has a small number of programmes, which had been approved with the same award title, but which may have different entry requirements and/or module content, assessment or external examiners. In one example the University offers the same award at its main campus and through one of its FE partners, but the two programmes have different content, assessment, entry standards and external examiners across the two locations. Assessment Boards are held separately and the external examiners do not attend the same boards.

34   The audit team learned, in meetings with senior staff, that the programme offered through the University's FE partner had been inherited from another validating institution and the University had chosen to retain the title following periodic review. The team formed the view that, notwithstanding the identification of the location of study on the student transcript and certificate, there was potential for applicants and other stakeholders such as employers to be confused by the different offerings. Furthermore, the potential for comparison of standards across the two locations was limited by the fact the external examiners were not part of the same team. Consequently, the team considers it advisable for the University to

ensure that programmes with the same award title have the same content, assessment and external examining team (see also paragraph 93).

35   The audit team can confirm that the University has appropriate procedures for the approval of amendments to programmes and that these were understood by staff in partner institutions. These are dealt with according to whether they are major amendments, which largely follow the same processes as new programmes, or minor amendments that can be dealt with at faculty level. The University's requirements for the withdrawal of programmes, which were commended as good practice in the 2006 collaborative provision audit report, require that satisfactory arrangements be in place until current students have completed their studies.

Monitoring

36   The University's procedures for annual monitoring of collaborative provision are at three levels. These are: at programme level, through the Annual Monitoring report (AMR); at faculty level, through the Quality Enhancement Report (QER); and at partner level through the Partner Quality Enhancement report (PQER). Procedures emphasise both review and enhancement (see paragraph 120).

37   The annual programme monitoring process mirrors that for on-campus provision except that reports are completed by the partner institution, with a section of the report allowing comment from the University academic contact. The audit team was able to read a number of AMRs, which were informed by a range of inputs including student and external examiner feedback and quantitative data, and included action plans and updates on previous years' actions. AMRs are considered by the relevant Joint Board of Study, with oversight by Faculty Learning Teaching and Assessment Committees. AMRs feed into Faculty QERs, which provide a faculty-wide perspective of both on-campus and collaborative provision. They include a summary of issues arising from Joint Boards of Study and external examiner reports and identify good practice.

38   The process for the production of PQERs essentially mirrors the QER process. These allow FE partners to comment on both individual programmes and the entire portfolio, and identify good practice for dissemination and areas for improvement either for the partner or for the University in relation to its management of collaborative arrangements. PQERs are discussed by partners through Joint Development Boards and are reviewed by a small team, which includes a representative from a partner as well as University representatives. QER and PQER analysis reports are considered by the University Learning, Teaching and Assessment Committee (previously by the Quality and Standards Committee).

39   While the audit team found the University's processes for monitoring generally appropriate, well documented and well conducted, attention is drawn later to a reservation concerning the timeliness of actions resulting from these processes (paragraphs 56, 72, 121, 135).

Periodic programme review

40   The University currently requires that periodic reviews of cognate programmes (subjects) be conducted on a five-yearly basis, although the audit team learned that the University is moving to a six-year cycle of review. The University defines its processes for periodic review of on-campus provision in a Code of Practice. The process focuses on the management of quality and standards and has been informed by the *Code of practice* published by QAA. Collaborative provision is generally included in the subject-based periodic review, except where the amount of collaborative provision within a subject is considered to

be substantial. In such cases, a separate periodic review, based on an amended Code of Practice is undertaken.

41   The University's periodic review process requires the preparation of a self-evaluation document (SED) by the department and a process of scrutiny by a review panel, which includes external representation. The University provides a range of supporting documentation, including standard templates for action plans and for the preparation of SEDs. Review reports are approved by the University Learning, Teaching and Assessment Committee (previously by the Quality and Standards Committee). At the time of the audit, two subjects had been defined as substantial in terms of periodic review and reviewed separately: Business and Arts and New Media.

42   In its Briefing Paper the University stated that from 2010-11 students will be included as members of periodic review panels. However, the audit team found that, while the code describes a number of ways in which students can be involved in the periodic review process, the stated composition of the panel does not include student members. Summaries of periodic review reports and copies of the approved action plans are made available to students on a section of the University Portal.

43   The audit team was able to scrutinise the reports of a number of periodic reviews and can confirm that the process is generally operating in accordance with the Codes of Practice. Review panels include appropriate external representation and there was evidence of student involvement, particularly in meetings with the panels. The reports scrutinised by the audit team identified areas of strength and matters for further development, and issues to be addressed by the University were identified separately from those for the attention of the department or faculty.

44   Recommendations to the department feed into departmental action plans, which indicate timescales for addressing actions. Faculties report on progress, including any actions not completed, through the Quality Enhancement Review process. However, the audit team noted that, where the review of collaborative provision was included within a subject, there was variation in the extent to which consideration of this provision was reflected in the final report.

Partner audit

45   The University's programme of audits of FE partners was introduced in 2005 prior to the IQER process and audits of all partners were undertaken during 2005-06 as part of a proposed regular cycle. The process was commented on favourably in the report of the 2006 collaborative provision audit. In 2009-10 the University decided through its Collaborative Provision Committee that the Code would be subject to a major review in the light of the requirements of IQER to ensure that there is no duplication in procedures for FE partners. At the time of the audit, the University was proposing to terminate the process of Partner Audit and hence no new audits had been conducted since the original cycle.

46   The audit team concluded that, with the exception of the recommendation relating to award titles and its reservation relating to timeliness of action (see paragraphs 34, 39), the University's procedures for approval, monitoring and review are well documented, consistently implemented and well understood by its partners, and contribute to the assurance and management of award standards in its collaborative provision.

Academic Infrastructure and other external reference points

47   The University makes comprehensive use of relevant components of the Academic Infrastructure in its approval, monitoring and review procedures. Programme specifications are produced to a standard template and are required as part of the approval process. Independent external opinion on academic standards forms part of programme approval and periodic review processes and procedures take account of professional, statutory and regulatory body (PSRB) requirements where appropriate.

48   The expectations of the Academic Infrastructure and other external reference points are communicated to partners via the University regulations and Codes of Practice and the audit team found that staff in partner institutions were generally familiar with these requirements.

49   The audit team formed the view that the University is making effective use of the Academic Infrastructure and other external reference points in assuring the standard of its awards.

Assessment policies and regulations

50   All collaborative programmes operate under the University Code of Practice: Assessment Procedures. In line with University departments, FE partners are required to develop individual policies in relation to three aspects of assessment: penalties for late submission, penalties for over-length assessments and deadlines for feedback on assessment. A further Code of Practice governs the examination process. For FE partners, boards of examiners are normally held in the partner institution and chaired by a member of partner staff, with attendance by staff from the University. Boards of examiners for all other collaborations are held in the University and chaired by a member of University staff. Training for chairs and secretaries of boards of examiners is mandatory.

51   The University also sets out procedures for the moderation of assessment in collaborative provision. Responsibility is devolved to faculties to determine what must be moderated, subject to minimum requirements. The audit team heard in meetings that moderation normally involves the scrutiny of summative assessment tasks by University staff prior to them being considered by external examiners. It also involves confirmation that marking processes have been undertaken in accordance with University requirements. In one overseas partnership, staff from the University teach students with local tutor support, and in this case University staff set and mark all assessments.

52   Staff from partner organisations informed the audit team that they understand, and are confident in implementing, the University's assessment requirements and procedures. Students confirmed consistently that they were clear about assessment requirements, which are communicated through module handbooks or the equivalent. Students also confirmed that they received information about their right of appeal and the right to make a complaint (see paragraphs 107, 136).

53   The audit team concluded that the University's arrangements for the assessment of students studying through its collaborative provision are making an effective contribution to the assurance of the academic standards of its awards.

External examiners

54   The University Code of Practice: External Examining relates to both on-campus and collaborative provision. Faculties are responsible for nominating external examiners

following consultation with partner institutions. The University Learning, Teaching and Assessment Committee (previously the Quality and Standards Committee) is responsible for the appointment of external examiners under delegated authority from Senate. Induction is offered to newly appointed examiners through both documentary and face-to-face mechanisms. The University confirmed that, where the same or similar programmes are offered at the University and one or more partners, the same external examiner would normally be used for these programmes. There might be exceptions, for example if an external examiner was already considered to be working at capacity.

55   External examiners are required to make an annual written report using the University pro forma. This covers academic standards, assessment, teaching and learning and administrative procedures. In the case of a collaborative programme, the partner institution addresses the issues raised and informs the relevant University academic department. The partner's response is considered by the next Joint Board of Studies, and minutes of these boards scrutinised by the audit team demonstrated that external examiners' reports were being considered, that formal responses were being made and resulting actions monitored.

56   Notwithstanding this, the audit team had concerns over the timeliness of actions resulting from monitoring processes, including issues raised in external examiner reports (see paragraphs 72, 135). Issues of serious concern may be reported directly to the University Learning, Teaching and Assessment Committee (previously the Quality and Standards Committee) and raised with partners through Joint Development Boards. The University Quality Office also produces a summary of strengths from all external examiners' reports covering collaborative provision.

57   The audit team was able to scrutinise a sample of external examiner reports, which, while confirming that standards are generally appropriate, also raised some issues, for example the setting of an inappropriate level of assessment tasks in some programmes in one partner institution.

58   In meetings with the audit team University staff confirmed that the University's expectation was that external examiners' reports and responses should be shared with students in collaborative partners. Students who met with the audit team were generally unable to confirm that they had seen external examiners' reports. The team would encourage the University to ensure that all students have access to external examiners' reports.

59   Notwithstanding the reservations regarding the timeliness of responses and lack of clarity around students having sight of external examiner reports, the audit team concluded that the arrangements for external examining were functioning as the University described and make an effective contribution to the assurance of the standards of its awards.

Certificates and transcripts

60   The University devolves responsibility for the production of transcripts or European Diploma Supplements for students on directly-funded programmes in FE partners to those partners. The responsibilities of both the partner and the University are set out in a University Code of Practice. It is a requirement of the code that an agreed sample of final year students' transcripts is seen by the relevant University faculty or department. Transcripts for students on other collaborative programmes are produced by the University. The University produces all award certificates. The audit team was able to confirm that transcripts and certificates relating to collaborative provision indicated the place of study.

Management information - statistics

61   The University stated that a key source of statistics in relation to collaborative provision is the programme-level annual monitoring report, which feeds into the QER and PQER processes, enabling data to be considered at the level of each partner and at faculty level. From its study of AMR, QER and PQER documents, the audit team would concur that these processes provide statistical information, which allows monitoring of award standards at individual programme, faculty and partner levels.

62   The Briefing Paper notes that in order to support its evaluation of partnership activity, particularly with regard to the renewal of matriculation and progression agreements, the University was investigating ways of monitoring more systematically the performance of students who have progressed to programmes at the University. In meetings with staff from the University, the audit team heard that this was likely to be achieved by flagging such students on the University's information system so that their progress and achievement could be specifically monitored.

63   However, the audit team found no evidence that data was being used systematically at University level to inform strategy and policy for collaborative provision or, for example, to compare standards across partnerships. In meetings between the team and senior staff of the University it was acknowledged that the University was currently not making effective use of such data at institutional level. The team noted that a similar issue had been raised in the 2006 collaborative provision audit report. The team, therefore, considers it advisable for the University to make more systematic use of management information, including statistical information, at University level.

Overall conclusions on the management of academic standards

64   The audit team concluded that confidence can reasonably be placed in the soundness of the University's present and likely future management of the academic standards of its collaborative provision.

Section 3: Institutional management of learning opportunities

Approval, monitoring and review of programmes

65   The University seeks to ensure the availability of appropriate learning opportunities for students through the processes of approval, monitoring and review set out in the Quality Handbook and related Codes of Practice. These provide clear specifications for the implementation of those processes.

66   Joint Development Boards have terms of reference that include matters relating to learning and teaching, and student support and resources. These boards and the related Joint Boards of Studies at programme level are considered important in terms of the overall management of the provision and regularly consider the approval, monitoring and review of programmes, student feedback, staffing and other learning resources. There is a key role exercised by the academic contact or academic consultant, who is required to ensure the suitability of learning opportunities and to support programme staff from the partner institution from the early stages of programme development through to the day-to-day running of programmes (see paragraphs 27, 113). Evidence scrutinised by the audit team demonstrated the significance and the importance of this role, and the way it was perceived as one of a critical friend.

67   The University Strategic Plan, currently under review, includes an aspiration to provide an outstanding student experience. The Learning and Teaching Strategy stresses fair access and widening participation within that context. However, there is no specific mention of collaborative provision in either document.

68   The programme approval processes are described in paragraphs 26 to 30. In terms of learning opportunities, institutional validation and review processes include consideration of resourcing, including IT, library resources, accommodation, and staffing. The approval of a new programme at a partner includes consideration of resourcing and the potential quality of the student learning experience. The audit team found that the process operates as intended, with the interests of the students being considered and protected.

69   Programme monitoring for collaborative provision operates in the same way as for on-campus provision, as described in paragraph 37. The Partner Quality Enhancement Report (PQER) process requires the partner to reflect on the operation of individual programmes and the whole portfolio, identifying key themes either for development or for the identification of good practice and its dissemination.

70   Annual monitoring reports play an important role in the monitoring of student learning opportunities in that they follow a detailed standard format. This includes comments about the monitoring of feedback from assessment, issues with regard to recruitment and progression statistics, responses to external examiner reports and learning resources. Actions taken in response to Annual Monitoring Reports and ongoing responses to review and validation are recorded and an action plan is developed.

71   PQERs are discussed in partner institutions, as described in paragraph 38. The audit team found that appropriate mechanisms are in place to monitor the way in which programmes are being delivered and to act on the issues that emerge. The team came to the conclusion that it was possible for some matters to reoccur in these processes without the University making a timely response. For example, the audit team found repeated comments on the need for the provision of adequate resources at a partner institution.

72   Consequently, the audit team considers it advisable to improve University oversight of, and ensure timely and effective responses to, issues and actions raised through the monitoring processes (see also paragraphs 56, 121, 135).

73   Arrangements for periodic review are the same as for on-campus provision, with the exception that if there is a substantial amount of provision in a given subject then a separate periodic review of the collaborative provision is carried out (see paragraphs 40 to 44). The audit team saw examples of the process which demonstrated that it was mostly rigorous, involving external and student input, and included the review of matters such as learning resources, making recommendations as appropriate (see also paragraph 44).

74   Procedures for the approval, monitoring and review of programmes in terms of learning opportunities are clearly defined and implemented effectively and consistently across the further education partners, with the reservation noted above concerning timeliness, and are appropriately used by the University. In general, the audit team regarded the University's approval, monitoring and periodic review process as generally effective in managing the learning opportunities of its students.

Academic Infrastructure and other external reference points

75   The audit team found that the University makes use of the sections of the *Code of practice* in developing and reviewing its regulations and procedures for collaborative provision. It works with its partners to ensure that their own policies and procedures are aligned with the *Code of practice* and with other external reference points.

76   External examiners have a role in providing independent feedback on the quality of the learning opportunities for students in partner institutions and are asked to comment on the relevance of the curriculum and the learning, teaching and assessment strategies. The audit team found examples in external examiner reports of comments about learning opportunities being raised, reported and acted upon through annual monitoring. There is evidence of the consideration of the matters raised in the PQER process.

77   Overall, the audit team considered that proper and effective use was made by the University of the Academic Infrastructure and other relevant external reference points with regard to the management of learning opportunities in the context of collaborative provision.

Management information - feedback from students

78   The University considers feedback from students to be important as a key source of direct information on the quality of learning opportunities. Consideration of feedback from students is included in the approval, monitoring and review processes.

79   The University seeks module feedback, through standard forms, from all students for every module for each year of their programme. The annual monitoring of programmes pro forma includes a detailed section on student feedback. Evidence that the audit team scrutinised confirmed that effective use was made of the data collected through this process. Students are made aware in student handbooks that feedback will be carefully considered by partners. The feedback from modules is considered by Joint Boards of Study, as well as in the annual monitoring and PQER processes. Feedback from students is also collected through staff-student committees, the minutes of which are considered at Joint Boards of Studies. From the evidence seen by the team, this was considered to be effective.

80   The audit team concluded that the data gathered from students for management information purposes makes an effective contribution to assuring the quality of the student experience.

Role of students in quality assurance

81   The main way in which students comment on their experience and receive feedback in partner institutions is by means of the staff-student committees. Students also receive feedback by means of contact with staff in partner institutions. Any particular or recurring issues raised by students will be considered by Joint Boards of Studies and ultimately, if serious enough, may be considered by the relevant Joint Development Board.

82   Students are represented on Joint Boards of Studies, although their level of involvement is variable. The University acknowledges this and has tried to facilitate student attendance by providing videoconferencing facilities, circulating agendas well in advance, and providing an online Joint Board of Studies. The Joint Development Boards also have a place for a student representative, but it has proved difficult to engage students in these groups. The audit team concluded that the level of student involvement in University quality assurance procedures is variable and would encourage the University to continue to address this issue.

83 Overall, the University's arrangements for student involvement in quality management processes to maintain and enhance the quality of students' learning opportunities are effective at the level of the partner and in monitoring and review processes. There is potential for the University to make more structured use of student representation from partner institutions in its own processes.

Links between research or scholarly activity and learning opportunities

84 The audit found through scrutiny of the documentation and meetings with staff that the University has taken measures to support the ongoing development of staff delivering higher education programmes in partners. It has been clearly working with its further education college (FEC) partners in promoting a culture of scholarly activity and encouraging innovation in curriculum development and teaching methods. The activity takes place at a number of levels, including University, faculty and departments. Events have included presentations to staff in partners and at institutional level, the Annual Learning and Teaching Conference, and the Annual Collaborative Provision Conference.

85 The audit team met staff in the partners, who were very positive about these events and the opportunities that were offered through the partnership with the University. Two of the larger FEC partners have established research networks, which provide opportunities for staff involved in higher education courses to be engaged in scholarly and research activity.

86 The audit team concluded that the way in which the University had taken on a development role with staff in partners was effective and well received by those partners.

Other modes of study

87 Following the Institutional audit report in 2009, a working group was established within the University to consider distance-taught provision (see paragraph 11). Two new categories of collaborative provision were established and designated: 'Distance taught plus', where administrative support is provided by a third party, and 'collaboration', where academic as well as administrative support is provided by a third party. This redesignation makes the distinction between the University's collaborative provision and other provision much clearer.

88 The University's expectations about the supervision of students undertaking work-based learning while studying at partners are subject to procedural guidance, and partners must detail relevant support arrangements in the programme approval process. There is additional guidance covering work-based learning as an integral feature of Foundation Degrees, drawing attention to the involvement of employers in the delivery, assessment and supervising arrangements for these courses.

89 Through its approval, monitoring and research processes the University establishes and oversees the quality of the learning opportunities for students in the workplace. The audit team saw evidence that due attention was given to this aspect of courses, noting that external examiners specifically commented on the efficacy of work-based learning arrangements. Student handbooks for individual programmes also served to confirm that the University requirements for placement were being upheld in its collaborative provision.

90 The audit team confirmed that the University has effective mechanisms to maintain the quality of collaborative partner students' learning opportunities through flexible and distance learning, and learning through work placement.

Admissions policy

91   The University has a very clear admissions policy: either a partner has devolved admissions authority, and is subject to a separate Code of Practice, or the University handles the admissions procedure in accordance with its standard Code of Practice. The requirements and process for gaining devolved admissions authority are clearly set out, and all but one of the FEC partners has this status.

92   Partners with devolved authority can award accreditation of prior learning (APL). The process for granting devolved authority checks that appropriate procedures are in place for judging APL applications. Where APL is granted, this is reported to the Joint Board of Studies and reviewed in the PQER.

93   The entry requirements for specific programmes are set at the planning permission stage. Any changes to these can only be approved through the formal programme amendments process. The entry requirements for all programmes at a partner institution with devolved authority must be attached to the original application for devolved authority. The Code of Practice states that 'Entry requirements should be the same as for any comparable programme(s) offered by the University', although it goes on to state that in particular instances different entry requirements may be justified on grounds such as widening participation. A key element of this requirement is what constitutes 'comparable programme(s)'. The audit team found evidence of programmes with the same title offered at the University and a partner where the difference in entry requirements of 60 UCAS points may be explained on grounds of widening participation. It found other courses with the same title but different content where the difference in entry requirements (120 UCAS points) was so large as to suggest that the University did not regard these programmes as comparable (see also paragraphs 33, 34).

94   If a partner wishes to admit an applicant who does not meet the normal entry requirements, the case must be referred to the University. These special cases are approved or denied by the relevant Dean and are reported in PQERs.

95   Appropriate staff development for staff involved in admissions is a requirement for those partners with devolved admissions authority, and University staff met by the audit team confirmed their involvement in providing such training.

96   The Collaborative Handbook makes clear that partner institutions must give students a formal induction, and students met by the audit team confirmed that this does take place. However, it was clear from their comments that, with respect to their right of access to University facilities, the induction experience was quite variable. Some good examples of induction were reported and the University may wish to consider facilitating the sharing of this good practice among its partners.

97   The audit team concluded that the University has effective admissions processes and maintains good oversight of partners with devolved admissions authority.

Resources for learning

98   As described in paragraph 68, institutional validation and new programme approval includes consideration of staffing, information technology, library and other resources and these are reviewed as part of the annual monitoring process.

99   When external examiners raise resource issues these are followed up in Annual Monitoring reports (AMRs) and PQERs. The Joint Board of Studies may also consider

issues relating to resources. Where a Joint Board of Studies identifies an issue that it cannot deal with it can feed this up to the Joint Development Board for action, and the audit team saw evidence of this process leading to the provision of kennelling facilities at a partner.

100   Student cohort sizes are reported at Joint Boards of Studies and this provides the opportunity to respond to the needs of programmes with unexpectedly large cohorts. However, this does not always lead to timely action, an example being the shortage of specialist staff to act as supervisors for final-year dissertations (see also paragraph 71).

101   The University requires partner institutions to issue Student Handbooks that use a template set out in the relevant Code of Practice. Students and staff at partner institutions regarded these handbooks as an excellent resource. The audit team regarded the clarity of the University Code of Practice: Production of Student Handbooks, which results in consistent and comprehensive information for students, to be a feature of good practice (see paragraph 136).

102   Students at all partner institutions felt that they were able to raise issues relating to learning resources and that, generally, they were listened to. They were on occasions given reasons why the issues they raised could not be resolved (for example, planning restrictions on building alterations on one campus), but on other occasions students felt that issues became protracted without resolution or appropriate feedback.

103   With the exception of the issue of timely response outlined in paragraph 100, the audit team regarded the University's arrangements for oversight of the provision of learning resources to be effective.

Student support

104   The Student Handbook is a key source of information regarding student support. It contains details of local student support services. In addition, there is a clear statement about access rights to the University's library facilities and an indication that students can use the University's Careers Service. While students were generally aware of their library rights, they were less sure about access to other facilities such as careers advice.

105   The Collaborative Handbook requires partners to have a model for the implementation of progress files and Personal Development Planning (PDP). Local PDP provision is described in the course handbook and issues relating to PDP are reported to Joint Board of Studies and in AMRs.

106   Students have the opportunity to raise issues relating to student support in Student-Staff Committees, and the minutes of these meetings are considered at Joint Boards of Studies even if no students are present. When students are present they are specifically asked for their views on issues related to student support.

107   All students are issued with the document 'Guide for students on programmes leading to an award of the University of Hull'. Among other things this sets out how students may lodge complaints and appeals (see also paragraph 52). The contractual agreement between the University and the partner requires the partner to have its own appeals and complaints procedures and partners must report on the number of appeals and complaints in their PQERs.

108   The audit team concluded that the arrangements for student support and their oversight are making an effective contribution to the management of the quality of learning opportunities.

Staffing and staff development

109   The University's requirements in relation to staffing and staff development are clearly set out in the Collaborative Handbook. Partners are required to have an appropriate staff development policy, a peer observation scheme and an appraisal scheme. PQERs report on staff appraisal and peer observation systems. FEC Partners have developed their existing peer observation schemes to be more suitable for HE provision.

110   The University operates a recognised teacher status scheme. This scheme is graded, with staff being given full or restricted status. Restrictions can relate to the level at which teaching is permitted and also the type of activity (teaching, setting assessments, marking, and so on) which an individual is approved to undertake. All staff teaching on University programmes must have recognised teacher status before they commence their duties. Joint Boards of Studies have a role in monitoring this and recognised teacher status is a standing agenda item on the first Joint Board of Studies meeting of each academic year, which takes place in November or December.

111   Generally the minutes of these meetings record that all staff have recognised teacher status. However, sometimes the minutes record statements such as 'These were all in the process of being done' and there are instances where staff are noted as requiring recognised teacher status in December, and still requiring recognised teacher status at the subsequent meeting in May.

112   The audit team found that the University has responded to the recommendation of the previous collaborative provision audit regarding recognised teacher status by strengthening the procedures. However despite this, there have still been occasions when the granting of recognised teacher status has been less timely than desirable. Monitoring recognised teacher status at the November/December meeting of the Joint Board of Studies, when programmes have been running for two to three months, may not be the most appropriate timing. The team, therefore, considers it desirable for the University to improve the timeliness of the approval and monitoring of recognised teacher status.

113   In addition to the staff development provided by partner institutions, the University makes a significant contribution to the development of staff in partner institutions teaching on its programmes. The academic contacts and consultants play a crucial role. Academic contacts and consultants provide both staff development events (for example focusing on preparing students for the analytical and critical thinking required in assignments and dissertation supervision) and one-to-one support of individual staff. The audit team viewed the supportive and developmental role of academic contacts and consultants, particularly in the context of curriculum design, staff development and quality enhancement, to be a feature of good practice (see also paragraphs 27, 66).

114   Staff at partner institutions can attend staff development events at the University including the Annual Learning and Teaching Conference (paragraph 84). In addition, faculties and schools run their own events, such as the Business School Partner Institution Networking Conference and FASS practitioner workshops. Staff at partner institutions met by the audit team valued the staff development opportunities that were available.

115   With the exception of the issues relating to recognised teacher status, the audit team judged the University's procedures regarding staffing and staff development to be effective.

Overall conclusion on the management of the quality of learning opportunities

116   The audit team concluded that confidence can reasonably be placed in the soundness of the University's present and likely future management of the quality of the learning opportunities available to students through its collaborative provision.

Section 4: Institutional approach to quality enhancement in collaborative provision

117   The University's approach to quality enhancement is articulated in two documents, the Learning and Teaching Strategy and the Approach to Quality and Standards. Although the audit team was unable to foresee how the recent restructuring of University, including its key committees, would impact on the Learning and Teaching Strategy, the team formed the view that quality enhancement remains embedded in many aspects of the University's structures and procedures.

118   The University appoints an academic contact for each of its collaborative programmes or, when the University does not have comparable on-campus provision, an academic consultant is recruited instead. The academic contact acts as a 'critical friend' to the partner institution and makes an important contribution to quality enhancement by disseminating good practice in both directions between the University and partner institute. Although the role of the academic consultant differs from that of academic contact, the quality enhancement aspects of the role are not weakened (see paragraphs 27, 113).

119   Joint Boards of Study provide routine oversight of collaborative provision at discipline level. This oversight includes quality enhancement and the dissemination of good practice.

120   The University considers that Partner Quality Enhancement Reports (PQERs) provide an effective means through which to identify and disseminate good practice and to identify improvements that can be made to the quality of partner provision or systems and processes. The report template asks for examples of how good practice identified in one department or teaching area has been disseminated to others. It reports on issues and recommendations arising from earlier PQERs so that a picture of activity over time may be established.

121   As described in paragraph 38, completed reports are reviewed by a team established by the University Learning, Teaching and Assessment Committee (ULTAC). Each panel comprises at least one member of University staff nominated by the Chair of ULTAC, a member of staff from a partner institution and a member of staff from the University Quality Office. The panel evaluates the report and provides feedback to the partner institution. The purpose of the evaluation is to draw out examples of good practice worthy of dissemination across the University and to other partners and to identify potential areas for development for the partner and the University. However, while this mechanism was generally effective, the audit team considered that the length of time taken before ULTAC receives the PQER reports can be excessive**.**

122   Further education college (FEC) partners report that the PQER process is valued, allowing them the opportunity to reflect on their delivery and to consider areas for improvement. This was borne out in the meetings between the audit team and staff from partner institutions.

123   The ULTAC has a key role in the enhancement of the practice of learning and teaching. The Quality and Standards Committee (QSC) formerly had complementary oversight of the enhancement of the systems and procedures for managing academic quality and standards. QSC was dissolved in the University restructure, so ULTAC has taken on a wider remit, covering the enhancement of both practice and systems. The audit team was unable to express an opinion on the effectiveness of new systems and procedures as they had yet to operate over successive cycles.

124   The University states that the Collaborative Provision Committee (CPC) has an important role in quality enhancement and all FEC partners are represented on it. In the University restructure, CPC has been replaced with the Collaborative Provision Forum (CPF), which retains representation from all FEC partners. While the identification of strengths and areas for improvement, and disseminating good practice, are included in the terms of reference of CPF, the new forum has only met once. Consequently, the audit team was not able to express an opinion on the effectiveness of the new arrangements.

125   Prior to its dissolution, a Quality Enhancement Forum was held prior to each meeting of the CPC. The topics were agreed at CPC and a plan for the year put in place. Topics over the last two years have included: Using the University of Hull Visual Identity (university-led), Benchmarking HE in FE data (partner-led), Higher Ambitions - flexible study (university-led), and Personal Development Planning (partner-led). The audit team was informed by senior staff that, following the University restructure and the replacement of CPC with CPF, the University intends to continue to hold a Quality Enhancement Forum in connection with each meeting of the new CPF, although it had not been possible to do so the first time that CPF met.

126   While the Quality Enhancement Forums are open to all partners, only FEC partners have representation on CPF, with which the forums are associated. The audit team reached the view that quality enhancement in non-FEC and non-regional partnerships would be strengthened by wider representation on CPF. This would be particularly important if the University further develops its range of non-FEC partnerships.

127   The University stages an Annual Learning and Teaching Conference. The audit team saw publicity material for the 2010 'Research and teaching – Correlated or co-related?' and 2011 'Refreshing the Learning and Teaching Strategy' conferences. Staff from partner institutions regarded these conferences to be helpful in their own development.

128   The University has established University Centres at Doncaster and Grimsby, in acknowledgement of the size and stability of provision in these partners. The status associated with the centres reflects a level of autonomy and maturity. In providing further opportunities for the dissemination of good practice, the potential benefits of these Centres for quality enhancement were noted by the audit team.

129   It was evident to the audit team that quality enhancement is embedded in the systems and processes of the University. They heard of many individual examples of good enhancement activity being implemented. The team, however, encourages the University to streamline its quality enhancement reporting system to allow more rapid action, and actively to seek inclusion of non-FE and non-regional partners to benefit from the enhancement opportunities provided by CPF and its associated Quality Enhancement Forums.

130   The audit team concluded that the University has a comprehensive range of activities, which constitute a strategic, thorough and effective institutional approach to quality enhancement in relation to collaborative provision.

Section 5: Institutional arrangements for postgraduate research students studying through collaborative arrangements

131   The University has no postgraduate research provision through collaborative partnerships.

Section 6: Published information

132   The University recognises its responsibility for the accuracy of all public information relating to its awards, including publicity and marketing materials produced by partner institutions. It makes its expectations clear in Codes of Practice on Production of Handbooks by Partner Institutions and Approval of Collaborative Provision Publicity and Marketing Information.

133   The student written submission reports a positive opinion of the published information, a view that was largely reinforced by students met by the audit team. However, the team was made aware of a number of exceptions concerning information about the resources to which students would have access. The student written submission makes clear that the students feel that there could be better communication with students in the partner colleges about their resource and access rights. This was explored by the audit team in discussion with students, who confirmed that there had been isolated issues around student expectations of access to facilities, contact hours and additional costs.

134   The accuracy of published material is monitored by academic contacts and through Joint Boards of Studies and Periodic Review. There is an annual audit of publicity and marketing material by the University Quality Office and by way of the Partner Quality Enhancement Report that goes to the relevant Joint Development Board. The audit team was informed by senior staff that there is no requirement for preapproval of publicity or marketing material, leading to the possibility of inaccurate or misleading information entering the public domain and not being noticed until the next annual audit. The team, therefore, considers it desirable for the University to revise the process for approving the accuracy of marketing information prior to publication.

135   The audit team noted that the University had taken action on the desirable recommendation from the previous 2006 audit concerning the maintenance of the currency of relevant entries on a partner institution's website, but also noted that the new procedures were not always as prompt or as effective as necessary. The team identified instances of non-current programme information remaining on partner institutions' websites, and noted the University's failure to take prompt action to have erroneous information removed. The team considered that this could be addressed by the University acting on the recommendation in paragraph 72.

136   The compatibility and accuracy of the information provided in Student Handbooks is assured by the Code of Practice on Production of Student Handbooks by Partner Institutions and its associated templates. Handbooks are checked by University faculty staff and during Periodic Review. The resulting handbooks include clear and accessible module content, learning objectives and assessment information. In the main, students were satisfied with the accuracy of the information that they had seen published both by the University and their partner organisation, were aware of the University and its role in validating and quality-assuring their programmes, and had access to information about the appropriate channels for particular concerns, complaints and appeals. The audit team identified as an instance of good practice the clarity of the University Code of Practice: Production of Student

Handbooks, and associated templates, which result in consistent and comprehensive information for students (see paragraph 101).

137   The audit team found that, notwithstanding the issues raised in this section regarding institutional oversight of publicity material, reliance can reasonably be placed on the overall accuracy and completeness of the information that the University publishes about the academic standards of its awards and the quality of the learning opportunities offered to students through collaborative provision.