QAA

Buckinghamshire New University

March 2010

Annex to the report

Contents

Introduction

A team of auditors from the Quality Assurance Agency for Higher Education (QAA) visited Buckinghamshire New University (the University) from 8 March to 12 March 2010 to carry out an Institutional audit. The purpose of the audit was to provide public information on the quality of the learning opportunities available to students and on the academic standards of the awards that the University offers.

Outcomes of the Institutional audit

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

- 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 team found the University has a coherent approach to quality enhancement, although it could benefit from increased consistency of application across the institution and better use of data.

Institutional arrangements for postgraduate research students

The audit team found that the University has effective procedures for the management of its research programmes, which meet the expectations of the *Code of practice for the assurance of academic quality and standards in higher education (Code of practice), Section 1: Postgraduate research programmes*, published by QAA.

Published information

The audit team found that reliance can reasonably be placed on the accuracy and completeness of the information that the University publishes about the quality of its educational provision and the standards of its awards.

Features of good practice

The audit team identified the following areas of good practice:

- the involvement of external consultants, students and employers in the curriculum development stage of the validation process (paragraph 29)

- the institutional monitoring of external examiner reports, particularly the traffic-light system of prioritisation for faculty attention (paragraph 41)

- the close working relationship between the University and the Students' Union (paragraph 69)

- the University's systematic approach to the enhancement of employability for its students (paragraph 112)

- the arrangements for admission, induction, supervision and support of its research students; in particular, the working agreement between supervisors and students (paragraph 158).

Recommendations for action

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

Recommendations for action that the team considers advisable:

- ensure consistency of approach to assessment across the range of its provision (paragraph 57)

- establish requirements at an institutional level for the management of work-based learning and work-related learning, taking due account of the *Code of practice, Section 9: Work-based and placement learning* (paragraph 81)

- create an effective, equitable and transparent approach to the management of workload for academic staff (paragraph 110).

Recommendations for action that the team considers advisable:

- improve the consistency, collection and use of the course level data which informs the annual monitoring process (paragraphs 34, 35, 62)

- ensure that the reports of all external examiners are routinely discussed by programme committees, including student representatives (paragraph 44)

- ensure that the current review of the University's virtual learning environment policy is completed and implemented as a matter of priority (paragraph 86)

- consider ways in which resource allocation might be made more transparent and strategically linked to the enhancement of the student learning experience (paragraph 89)

- ensure that all participating postgraduate research students are formally prepared for teaching and assessment roles (paragraph 172).

Section 1: Introduction and background

The institution and its mission

1   The University's origins can be traced to the Science and Arts Schools founded in 1893 which evolved into High Wycombe College of Art and Technology. In 1975, following a merger, the institution became Buckinghamshire College of Higher Education. Taught degree awarding powers were achieved in 1995 and, following achievement of university title, the name of the institution was changed in 2007 to Buckinghamshire New University.

2   The University's vision is 'to be a university making significant social and economic contribution to its region, with a growing national reputation for its work and achieving international recognition for its specialist areas of expertise'. At the time of the audit a new strategic plan was being developed for the period 2010 to 2015. This will be based on the University's concept of S&4Ps (Student experience delivered through People, Partnerships, Performance and Physical Environment).

3   The University operates over two campuses; one in High Wycombe and one in Uxbridge, both of which have recently been refurbished and a new building programme undertaken.

4   In 2008-09 the University had approximately 9,642 students. Just over half of these were on full-time courses, with 1,665 studying on Foundation Degrees, HNDs, HNCs and diplomas in higher education and 4,447 students studying for full and part-time undergraduate degrees. The University saw a 38.7 per cent increase in UCAS applications for 2008-09. There were 513 postgraduate taught students and 78 postgraduate research students. Postgraduate research students who registered prior to autumn 2008 continue to be registered for the awards of Brunel University, whereas those accepted after this time are registered with Coventry University.

The information base for the audit

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

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

7   In addition, the audit team had access to:

●   the report of the previous Institutional audit, April 2005

●   the report of a Major review of healthcare programmes, Buckinghamshire Chilterns University College and North West London Strategic Health Authority, November 2005

●   QAA's report of the Review of postgraduate research provision, July 2006

●   the institution's internal documents

●   the notes of audit team meetings with staff and students.

Developments since the last audit

8   A new Vice-Chancellor was appointed in January 2006 and has overseen a programme of change. Alongside achieving university title, the campus consolidation has been a successful development since the last audit. As part of this consolidation, the University has invested significantly in an extensive programme of new building and refurbishment both at High Wycombe and Uxbridge. This has seen the creation of a new building at High Wycombe (The Gateway, opened September 2009), which houses the majority of specialist learning and teaching facilities. The High Wycombe campus has also undergone an extensive refurbishment of existing rooms to create up-to-date teaching accommodation including a purpose-built Student Centre and offices for academic and professional service staff.

9   The Uxbridge Campus, opened in summer 2009, enables the University to fulfil a commitment to National Health Service (NHS) London to move the delivery of its contract provision within the M25 to provide a better match with the authority's main recruitment catchment area. This new campus supports the delivery of nursing and health-related provision as well as enabling greater scope for successful bidding with NHS London.

10   A revised academic structure was introduced in summer 2006 and operated in the main until the end of December 2009. It reduced the number of faculties from six to three and reflected the importance attached to working with employers and preparing students for employment. It was intended to be a first stage in the University realising its strategic aims by deliberately positioning itself to be more outward-facing and engaged with its major employment markets.

11   A further revision to academic and central service directorate structures was initiated in April 2009 reducing the three faculties to two. On the central directorate side, the opportunity was taken to revise and refine structures to group complementary activities together, seeking both efficiencies and synergies and encouraging a partnership model with faculties. This came into effect as of January 2010.

12   Another major change was the introduction of the Common Academic Framework (CAF). The key changes of the CAF were the move to year-long delivery of programmes, a four times 30 credit modular structure and a focus on formative and summative assessment as a means to introduce greater variety and innovations in assessment practice and enhance the student experience.

13   The audit team acknowledges the considerable efforts of management and staff during this period in preparing for and implementing these changes.

14   The audit team found that the University had responded appropriately to most of the recommendations from the last audit, but considered that further action was required in the areas of staff appraisal, peer observation and placement learning.

15   The previous audit recommended that it was advisable for the institution to ensure that the institution's policy on appraisal is consistently applied across the institution. The present audit team found that the University is still reviewing its staff appraisal policy and it was not clear to the audit team how the outcomes of individual appraisals contribute strategically to the University aims and objectives.

16   The last audit also recommended that it was desirable for the institution to consider ensuring that the peer observation system works in a way that will retain the flexibility of the current system but will enable greater dissemination of good practice within and between faculties. The present audit team found that implementation of peer observation was inconsistent across the institution.

17   Finally, the previous audit recommended that it was desirable for the institution to review practice and policy for placement learning to ensure that all placement providers for students undertaking work based learning required by a programme are suitably prepared, whether or not the placement is arranged by the student or the institution. The student written submission was critical of the University's approach to placement learning and the present audit team found that while some students benefited from their placement experience, others found it less satisfactory. The team has therefore made a further recommendation relating to this area (see paragraph 81).

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

18   Council is the University's governing body and is responsible for setting the strategic direction and policies governing all aspects of the University's activity. It delegates responsibility for the oversight of academic quality and standards to Senate. The University is in the process of strengthening its governance at Council level.

19   Senate delegates some authority and decision-making responsibilities to its sub-committees, which include: the two faculty boards; Quality and Enhancement Committee (QEC); Student Experience Committee (SEC); Research and Enterprise Committee (REC); Research Degrees Committee (RDC); Research Ethics & Governance Committee (REGC); and Equality and Diversity Committee (EDC). This structure is mirrored within the faculties, with the exception of the EDC.

20   Key personnel involved in the institutional management of academic quality and standards are the Deputy Vice-Chancellor; Pro Vice-Chancellor/Executive Deans; Deans; Head of Research and the Academic Secretary. The Academic Quality Directorate (AQD), reporting to the Deputy Vice-Chancellor, provides the institutional lead on ensuring that quality processes are implemented and maintained.

21   There is a clear and comprehensive regulatory framework with academic regulations for undergraduate modular and non-modular awards and postgraduate taught and research degrees. These are readily available to staff through the Academic Staff Quality Handbook and to students and staff through a searchable section of the website.

22   While the University sets out these regulations, the audit team found instances of inconsistent application of them across the institution, particularly in programme committees, where the standardised agenda and requirements set out by Senate are not always covered.

23   Research students who registered before 2009 are registered with Brunel University. Those who registered in 2009 and beyond are registered with Coventry University. RDC is responsible for the quality and standards of research degrees with annual review reports being forwarded to the appropriate committee at Brunel and Coventry after Senate's approval.

24   The audit team found that the University operates a comprehensive set of processes and procedures that form a framework for the management of academic quality and standards that is generally fit for purpose. However, the team found that these were not always applied consistently across the institution. The team also noted that the University chose not to publish of list of attendees at institutional meetings because of data protection, though the information is available upon request. It was noted that constituents would not easily be able to check whether or not those elected to committees were attending and thus representing their views.

Section 2: Institutional management of academic standards

Approval, monitoring and review of award standards

25   For ease of reference, all aspects of programme approval (validation), monitoring and review are considered in this section.

26   Central oversight of validation, monitoring and review is maintained through the Quality and Enhancement Committee (QEC), supported by the Academic Quality Directorate (AQD). Responsibility for the routine operation of associated procedures for quality and standards rests explicitly with the two faculties. The audit team found that the University has well-documented processes in place for the validation, annual monitoring and review of its taught programmes, whether delivered by the University or through its collaborative partners, and these align with the *Code of practice*.

27   The academic standards of the University's awards are established and maintained through its validation processes and its systems for the management of the curricula and assessment. Standards are monitored through the annual and periodic review procedures. Full use is made of external reference points, which include *The framework for higher educational qualifications in England, Wales and Northern Ireland* (FHEQ), the *Code of practice*, subject benchmark statements and the requirements of professional, statutory and regulatory bodies (PSRB). The University makes full use of external expertise in programme design, approval and review and the robustness of standards is confirmed through external examiner reports. The monitoring of standards also includes the consideration of student progression and achievement data.

Approval

28   The University has comprehensive arrangements in place for the approval of new courses. Senate delegates responsibility for the oversight of these arrangements to QEC. Central coordination of the process is undertaken by AQD, which maintains the schedule and provides guidance to curriculum development teams. Routine operation of the process is carried out by faculties. The University has introduced a new standard validation process with three distinct stages.

29   Before a new course proposal can receive approval from Academic Planning Committee (APC), an outline proposal must be considered by the Faculty Management Team (FMT). This enables each faculty to develop its portfolio and the University to have clarity over its portfolio planning in respect of viability and synergies between subject areas. The University regards the curriculum development stage as the central and main stage for the faculty's focus. Extensive

documentation and guidance has been developed to assist course teams, including programme specification; module pro forma, course handbook, context document and procedures for required consultation with students and external academic and professional experts. Student involvement is through a formal requirement to comment on the quality of the student handbook. External consultation during the development phase and further independent external approval takes place at the final proposal stage, optimising their involvement to ensure currency of content, appropriate standards and the overall quality of the proposal. The audit team confirmed that the process was effective and robust. The involvement of external consultants, students and employers in the curriculum development stage of the validation process is identified as a feature of good practice in this audit.

30   Validation therefore takes place at faculty level via the Faculty Approval Panel (FAP), which assumes full responsibility for recommending the proposal to the QEC Validation Sub-group. Courses proceed to a university-level validation event where the proposed course requires approval by a PSRB or involves delivery of a new partnership agreement. The validation process, whether at faculty or university level, is intended to ensure that programmes are designed in accordance with the Common Academic Framework; that programme aims and objectives are clear and align with national standards, that curriculum content, teaching, learning and assessment methods are appropriate to enable to students to achieve awards; that sufficient learning resources and appropriate student support services are in place; that suitable quality assurance arrangements exist; and that PSRB requirements have been met. In its examination of documentation, the audit team found the procedures established by the University to be rigorous, effective and consistently applied.

Amendments to programmes

31   Clear and appropriate procedures exist for making amendments to validated programmes. Changes to modules, including the development of new modules for inclusion within a validated programme, are the responsibility of faculty quality and enhancement committees via the course amendment subcommittee depending upon the nature and level of the proposed change.

Annual monitoring

32   The University requires all awards to be monitored annually through its Annual Review and Evaluation (AR&E) process and this is one of the key processes by which it maintains the quality of students' learning opportunities. Full responsibility for the operation of the process is devolved to faculties.

33   Evidence-based action plans are produced at course/portfolio, school and faculty level, with each level of reporting informing the next. The Briefing Paper stated that the plans are derived from the consideration of a wide ranging evidence base, including currency of employees, external examiner reports, data-sets of student recruitment, retention, progression and achievement, student feedback, including the National Student Survey (NSS), course/programme committee minutes, PSRB reports and internal/external review reports.

34   In its examination of annual monitoring documentation, the audit team found that there was inconsistency in the quality of the action plans produced at course/portfolio level, particularly in the level of detail provided and in the references to the evaluation of supporting data.

35   The University states that the action plans are considered as live documents which are monitored throughout the year by the relevant committees, including course committees. Although the terms of reference for programme/course committees include the consideration of AR&E, the audit team found that this consideration varied widely in practice.

36   QEC appoints from its membership auditors to undertake an internal audit from an identified sample of a faculty's AR&E reports, adopting a risk-based approach founded upon external examiner reports, the NSS and periodic review reports. The reports are considered and approved by QEC and identify areas for action and good practice for dissemination. Senate receives and approves the report of QEC on AR&E in the autumn term. Additionally, Senate receives individual reports focusing on different aspects of the University's provision, such as summary reports of external examiners, boards of examiners, student achievement, academic misconduct and mitigating circumstances. Emanating from the AR&E exercise are the key themes for enhancement, such as employability, personal tutoring and personal development planning, and faculties are required to report on progress against those identified themes.

37   For collaborative provision, partner course teams are responsible for providing the University's home school with course action plans in the University's standard format. These plans are considered by the faculty and included in school level action plans. The University has recently introduced a process where partner colleges will be required to prepare a partner college action plan to collate common themes and actions from their individual course action plans.

Periodic review

38   The University's periodic review process re-validates programmes at no more than six-yearly intervals. The process for re-validation mirrors the validation arrangements, with an additional requirement that student, graduate and employer groups provide feedback on the operation of the curriculum. In addition, the University operates a separate process of periodic portfolio review, which is designed to provide a focus on academic standards, the scholarship of staff and their engagement with the pedagogy of their discipline, achieved through formal communication with external academic and professional peers and student engagement. Following all validation and periodic review events, event chairs meet to discuss the operation of the process, and any issues or good practice are reported to QEC.

39   Overall, the audit team found that the processes for programme approval, monitoring and review are suitable and operate in accordance with University requirements and that they contribute effectively to the assurance of academic standards and the quality of academic provision.

External examiners

40   The roles and responsibilities of external examiners are set out in detailed briefing packs and are supported by a dedicated website. Their duties in the assessment process, boards of examiners, assessment regulations and reporting requirements are reinforced through the requirement to attend induction days which are facilitated by AQD and the relevant faculty. Those newly appointed or inexperienced are mentored by experienced external examiners.

41   Arrangements for the nomination, approval and appointment of external examiners are clearly specified in guidance documentation; nominations are made by faculties against set criteria before presentation to Senate by AQD for endorsement. AQD maintains a central database to ensure appropriate coverage for the academic portfolio and monitors attendance at assessment boards. It reports annually to Senate on the profile of external examiners, particularly in respect of their institutional background and the operation of the appointments system. The analytical and evaluative report provides commentary on emerging themes, identification of good practice and indicates areas for improvement. The receipt of external examiner reports is monitored by AQD and reports are categorised according to set criteria in relation to standards and necessary action, helping to ensure timely and suitable responses from the faculties. The audit team noted that this report provides Senate with a comprehensive overview of the system. The institutional monitoring of external examiner reports, particularly the traffic-light system of prioritisation for faculty attention, is identified as a feature of good practice in this audit.

42   External examiners' reports are also reviewed as part of the University's periodic review process. The audit team's scrutiny of the recent periodic reviews confirmed that this took place and that enhancements at programme level had been effected, particularly in relation to staff development and programme content.

43   Processes are in place to ensure that external oversight of quality and standards for collaborative provision takes place. Where the same award is delivered by both the University and the partner, the same external examiner is appointed to cover all provision and to submit a separate report on both the partner and the University provision. Consideration of external examiner reports is conducted by the sponsoring faculty alongside University-delivered programmes within the University.

44   The University has set out terms of reference for its programme committees which include the consideration of external examiner reports with student representatives as part of the AR&E process. The audit team found that this consideration was not carried out consistently at all programme committees and therefore concluded that it is desirable for the University to ensure that the reports of all external examiners are routinely discussed by programme committees, including student representatives.

45   The audit team concluded, on the basis of the documentation provided to it and the responses it received in its meetings with staff and students, that the systems and processes for the appointment and use of external examiners at the University are robust and appropriately implemented, and make a significant contribution to the security of academic standards.

Academic Infrastructure and other external reference points

46   The University takes account systematically of the FHEQ in its quality assurance processes and its Common Academic Framework is aligned with the FHEQ. Programme teams and external advisers are required to make explicit comment on academic standards during the validation and revalidation of programmes. Validation and review panels are required to measure programme aims, outcomes, content and assessment against subject benchmarks and the FHEQ in order to confirm that programmes are correctly positioned. Programme specifications, which are informed by external reference points, are produced to a standard format and style and are published in programme handbooks and on the University website. The audit team viewed a range of samples and found in practice that validation panels confirmed alignment of the proposed provision with the FHEQ.

47   QEC coordinates the institutional response to the *Code of practice* to ensure that there is full engagement with the expectations of the *Code* as it is updated. The audit team found evidence of the mapping of the precepts of the *Code* with the approval of appropriate policy and procedural documentation. However, although the team found evidence of recent updating against sections of the *Code*, there were outstanding revisions necessary for completion in order to meet the expectations of the revised *Code of practice, Section 6: Assessment of students* and *Section 9: Work-based and placement learning*.

48   Where the provision involves accreditation by PSRBs, the University requires that standards and competences are fully integrated into the curriculum and tested and approved during the validation process and, where appropriate, a PSRB panel member is in attendance.

49   The University has engaged appropriately with the European Standards and Guidelines for Quality Assurance.

50   The audit team found that the University makes appropriate use of external reference points in assuring the quality of students' learning opportunities and the academic standards of its awards.

Assessment policies and regulations

51   Senate is responsible for the approval of institution-wide assessment regulations which are applied by faculties across all taught undergraduate and postgraduate programmes with the exception of some professional courses. All full-time undergraduate programmes, with the exception of nursing provision, were revalidated in 2007-08 in order to align with the new Common Academic Framework and the University reviewed its Undergraduate Taught Course Regulations in preparation for its introduction. Special guidance notes were produced for assessment boards for the application of the regulations in relation to progression and achievement. The audit team saw evidence of the extensive planning process and of the continuous monitoring and evaluation of its implementation.

52   The University has a generic assessment policy, approved in 2004, which provides the reference point for all faculties. The policy covers all aspects of assessment practice. Access to the policy is available to staff and external examiners through web pages. Additionally, the Academic Staff Quality Handbook contains guidance on delivering and assessing modules with signposts to various associated web pages detailing University policies.

53   The generic policy sets out the expectation that assessment is integrated into all curriculum planning and directly aligned with intended learning outcomes and that processes of summative assessment are appropriate and clear to both staff and students. Monitoring engagement with the assessment regulations is carried out through scrutiny of definitive documentation at programme validation and review events.

54   The Academic Quality Staff Handbook states that each faculty has an agreed method, location and timing for assignment submission and this is to be made clear to students in the course handbook. Through its scrutiny of the audit trail documentation, the audit team found that there was some inconsistency in practice between programmes in the communication of specific submission dates to students. Some students who met the audit team reported that they had not received a course handbook.

55   The University received a relatively low score from its students in the NSS in relation to the timeliness and quality of feedback on assessment. This was also reflected in the student written submission and in comments from students who met the audit team. Some external examiners had also reported variability in the quality of feedback given to students. The student written submission also raised concern in relation to the anonymity of marking. The team found the University was taking steps to address this issue and students who met the team were aware of general improvements.

56   Clear guidance is provided for programme teams on the setting and approval of assessment briefs. It is a requirement that all assessments (coursework and examinations) are formally considered by the programme team before publication to students. Additionally, programme teams are expected to consider the overall assessment pattern in respect of type, amount and scheduling. In its scrutiny of documentation, the audit team found that there was little evidence of programme management in the operation of these procedures.

57   The policy also states that the external examiners are responsible for ensuring that programme teams have formally approved the module assessments. The audit team found that some external examiners commented on the lack of consultation in this process and subsequently of the inappropriateness of some assessment tasks which had been completed by students. The University has established clear guidelines on the internal and external moderation of assessments. External examiner reports indicated instances where the procedures had not always been conducted as required. Overall, the audit team found that there was general inconsistency in the University's approach to the management of assessment, partly as a result of its failure to review its policy against the revised *Code of practice, Section 6: Assessment of students*. The team therefore considers that it is advisable that the University should ensure consistency of approach to assessment across the range of its provision.

58   Assessment boards are conducted in line with the processes and regulations set out in guidance for boards of examiners' meetings. From the documentation seen, the audit team found that regulations are applied consistently. The University monitors performance in the conduct of formal time-constrained examinations and in the conduct of boards of examiners, including responses to concerns raised by external examiners through review of regulations.

59   Notwithstanding those areas that would benefit from improvement, the audit team found the University's arrangements for the assessment of students were in general appropriate and effective.

Management information - statistics

60   Staff who met the audit team confirmed that the centrally provided data is useful and accurate for all categories of students. The Business Planning Directorate (BPD) has responsibility for collating and analysing data sources and identifying trends. The academic portfolio planning process outline proposals must include data concerning market demand, applicant and enrolment and are considered by APC.

61   Annual monitoring relies on progression and achievement statistics provided through the University's student record system (QL). BPD produces an annual Student Achievement Report which is approved by Senate and Council. Although the Briefing Paper stated that the report highlights the key points arising from an analysis of student progression and achievement data against a number of variables including ethnicity, gender, age and disability, the audit team found no evidence in the faculty annual monitoring reports that these had been considered. The Briefing Paper stated that data is considered at faculty and school levels, but that the University needs to develop data reports at course level in a user-friendly manner.

62   Standard programme committee terms of reference include the need for programme teams to consider AR&E course action plans. Through its scrutiny of documentation, the audit team concluded that consideration of data at course level was inconsistent and quite limited. The University uses feedback from students as module evaluation and expects this data to inform AR&E. Essentially, this is achieved through the production of module summary reports. In meetings with staff and from documentation, the audit team found that, although standard report formats exist, inconsistency was evident in the procedures used in the collection of feedback, particularly in respect of the level of detail and the principle of anonymity. The student written submission also raised concerns in the process of module evaluation and this was reinforced in the team's meeting with students. The team concluded that this represents a missed opportunity for course teams and therefore recommends it is desirable that the University improve the consistency, collection and use of the course level data which informs the annual monitoring process.

63   BPD reports on key performance indicators against which the University benchmarks its performance and progression against its strategic plan. Following discussion with staff, the audit team concluded that the new Data Quality Policy will augment current procedures in the consideration of data in relation to institutional management.

64   Overall, the audit team concluded that the University makes appropriate use of management data to ensure the security of academic standards.

Section 3: Institutional management of learning opportunities

Academic Infrastructure and other external reference points

65   The University's engagement with external reference points is considered in Section 2. The audit team confirmed that the University engages appropriately with the Academic Infrastructure, including the *Code of practice,* and other external reference points for the management of students' learning opportunities.

Approval, monitoring and review of programmes

66   The University's procedures for the approval, monitoring and review of programmes are considered in their totality in Section 2. The audit team found approval, monitoring and review procedures are suitably designed, appropriately implemented and that they contribute to the management of students' learning opportunities.

Management information - feedback from students

67   Feedback from students is integral to the University's management of both academic standards and students' learning opportunities. The University uses a range of information to inform institutional understanding of the student learning experience and to provide evidence for enhancement. Progression and achievement data is used within the programme review process and the results of the National Student Survey are subject to careful scrutiny and subsequent action planning. The University acknowledges that at the level of the module summary reports there are concerns about the process of obtaining student feedback and students have expressed concerns about issues of confidentiality. Concerns about module evaluation have been raised at the Student Experience Committee. The Students' Union, with the encouragement of the University, has produced a teaching quality survey to provide direct feedback from the students on their experience of learning and teaching at the institution. It is planned to repeat this in partnership with the Group for Innovations in Learning and Teaching (GILT) as part of the institution's enhancement strategy.

Role of students in quality assurance

68   The Students' Union is seen as a 'key partner' in monitoring and improving all aspects of the student experience. As part of this, the University has delegated the management and operation of the Student Representation System to the Students' Union who work in partnership with the faculties and the University to ensure effective representation at all levels of the University's committee structure. Students are well represented on all of the University's committees. They are also members of boards dealing with academic misconduct, appeals and mitigating circumstances.

69   Other evidence of the partnership can be seen in the key role that the Students' Union played in the development of the 'Big Deal' initiative for student finance and welfare, in the jointly appointed Student Representation Manager and the new Student Representation Policy which came into effect from September 2008. The audit team identified the close working relationship between the University and the Students' Union as a feature of good practice.

70   Students are involved in the processes of approval, monitoring and periodic review. A trial was conducted in 2008-09 where students were members of the faculty programme approval panels, though this had not worked as well as planned therefore a decision to discontinue the practice was made. Students do however contribute to curriculum development, primarily through the development of course handbooks. Validation documents are then sent up through the committee structure for comment which allows for further student input. Revalidation allows the same level of student input. The audit team considered that this student input makes a valuable contribution.

71   In the annual review and evaluation process students are expected to consider course reports at programme committees. The audit team found that although the terms of reference required this not all programme committees involve students in this process.

72   A summary of school reports is compiled by the dean and is considered at the faculty Quality and Enhancement Committee (QEC). A formal report is then submitted to faculty board which is in turn considered by QEC along with an auditor's report. Students are able to comment at each stage of this process.

73   Panels for periodic portfolio review have a student member but these are proposed by the faculty. The institution may wish to consider what impact this has on the independence of such appointees.

74   Training of student representatives is conducted by the Students' Union. The training covers representatives who sit on programme committees as well as other committees such as FQEC and QEC. While the training that is offered appears to be comprehensive, some students reported to the audit team that they felt they were not prepared enough for meetings. The University may wish to give further consideration to the evaluation of training needs for student representatives.

Links between research or scholarly activity and learning opportunities

75   The University expects all academic staff to be engaged in scholarship and where possible advanced scholarship and research, and until recently this was managed through appraisal in the context of the Research, Scholarship and Knowledge Transfer Strategy. This strategy has been superseded by the Applied Research Strategy and the development of academic staff is now managed with reference to the new strategy. The strategy outlines objectives for staff research and scholarship output and there is an expectation that all academic staff will undertake appropriate staff development to support their scholarship, and should have at least one demonstrable scholarly outcome or output over the previous two years. There is also an encouragement for all staff to join an Applied Research Group. Performance of individual members of staff is monitored through appraisal.

76   The appraisal process has been under review and the University is in the process of devising and implementing a competency-based appraisal system in the light of its new People Strategy where personal objectives are linked to corporate University objectives (see paragraph 105). The new appraisal system should monitor and strengthen the relationship between staff scholarship and research, and the student learning experience.

77   The University conducts a Periodic Portfolio Review on a six-yearly cycle. The periodic review process provides a focus on academic standards, the scholarship of academic staff and their engagement with the pedagogy of their discipline. As part of the process there is a staff details pro forma which lists staff research and scholarly activity for the previous three years. The process is discipline-based and is not directly linked to staff appraisal or staff development or the institution's Applied Research Strategy.

78   Since 2007, the University has encouraged the embedding of research-informed teaching in the faculties through the Learning Enhancement Project scheme. Individual or groups of staff from within the University and its partners are invited to apply for funding under the scheme and successful applications are determined by the extent to which the proposed project theme aligns with the University's Learning, Teaching and Assessment Strategy and whether they are considered to raise the profile of pedagogic research to enhance the student learning experience. At the time of the audit 26 such projects had been completed or were in progress across the University and its partners.

Other modes of study

79   The University puts great emphasis on all forms of work-based and placement learning as part of its mission to be industry facing and as part of its drive to increase the employability of its students. The Learning, Teaching and Assessment Strategy states that 'Every student on a taught undergraduate programme will undertake some form of work-related learning'.

80   The University revised its Placement Learning Policy effective from February 2009, to reflect its range of provision and the recently revised *Code of practice, Section 9: Work-based and placement learning*. The Policy makes clear however that it relates only to 'Placement Learning' which is defined as placement: integral to the programme, assessed on specific learning

outcomes, hosted by the employer, involving the University in an active relationship/partnership with the employer and requiring successful achievement for completion of the award. The University identifies other types of student experience in work place environments such as 'work-based learning' and 'work-related learning', but they are specifically not included in the Policy.

81   A desirable recommendation in the 2005 Institutional audit report invited the institution to 'review practice and policy for placement learning to ensure that all placement providers for students undertaking work-based learning required by a programme are suitably prepared'. The student written submission produced for the present audit was very critical of the University's management of the student experience in workplace environments and made recommendations relating to this area of the University's provision. It is evident from this that students were concerned about the level of information and support they receive. Work–based and placement learning is managed at programme, school and faculty level and there is variability across the University's provision in terms of the support employers and students receive. The audit team recommends that it is advisable that the University establish requirements at institutional level for the management of work-based learning and work-related learning, taking due account of the *Code of practice, Section 9: Work-based and placement learning*.

82   Delivery of other modes of learning is supported through a blend of e-learning opportunities and campus facilities. There have been a number of Learning Enhancement Projects (LEPs) to support this area of provision and the Briefing Paper stated that all such provision is supported through the University's virtual learning environment (VLE).

83   The VLE Policy (2005) was under review at the time of the audit. Student feedback has highlighted a number of problems with the consistency of use and the quality of the VLE provision and such concerns have been discussed by the Student Experience Committee.

84   In response to students' ongoing concerns about the use of the VLE among art and design tutors, one faculty during 2008-09 initiated a project called 'BLiTZ on BLACKBOARD', aimed at encouraging all academics to engage with and use Blackboard more fully and consistently.

85   In the new Gateway building of the High Wycombe Campus, the Flexible and Distributed Learning Centre (FDLC) provides training and support to academic staff on the use of Cisco WebEx and Blackboard. The University's review of the VLE policy is considering ways in which staff development might be made more strategic in relation to the e-learning modes of delivery in the institution.

86   The audit team recommends that, in the light of ongoing critical feedback from students relating to staff use of the virtual learning environment and the reliability of electronic resources, it is desirable that the University ensures that the current review of the virtual learning environment policy is completed and implemented as a matter of priority.

Resources for learning

87   The Briefing Paper stated that the Learning Resources Strategy 2008 to 2012 was under review. The current strategy is not supported by a resource allocation model or a resource allocation policy. The audit team found that the principles of resource allocation were not clear from the documentation. The Strategy document states that 'Learning resources are established within the University on a partnership model whereby resources are provided by and within a faculty or by and within a central service.' Resource allocation is managed at the senior management team level and then devolved to faculty and central service level. There is also mandatory consideration of resources in the new validation process.

88   The audit team found a lack of transparency regarding resource allocation at university level and at the levels of faculty and central service. It is not clear how the allocation of resources is managed to realise the strategic aims of the University as outlined in the Strategic Plan or how the allocation of resources is managed to enhance the students' learning experience. The student written submission and the NSS reported concerns about resourcing issues, particularly in terms of learning resource centre provision. Students who met the audit team also expressed serious concerns about resource provision in some academic areas. The team concluded that a more transparent approach to the management of resources could enable all stakeholders to understand the decisions taken and priorities set, at management levels and give ownership of the resource allocation process to stakeholders.

89   The audit team recommends, as part of the current review of the Learning Resources Strategy, that it is desirable that the University consider ways in which resource allocation might be made more transparent and strategically linked to the enhancement of the student learning experience.

Admissions policy

90   The University revised its admissions policy effective from August 2009. This has been prepared to address the precepts of the *Code of practice, Section 10: Admissions to higher education*. The policy aims to ensure transparency, clarity fairness and consistency in the process for all applicants for admission to undergraduate and taught postgraduate courses.

91   The University has a Widening Participation Strategy and intended activities and targets are specified in the University Widening Participation Action Plans, which are reviewed annually, and amended objectives set as appropriate.

Student support

92   As already stated the institution has recently consolidated its campuses from three to two and this has led to the main student support services being consolidated into one location at High Wycombe, with services being mirrored at Uxbridge. The institution is planning on conducting a student experience survey which will examine how effective this support is although students who met the audit team seemed generally positive.

93   The institution retains oversight of student support through the student experience committee (SEC). This will be further strengthened through the development of an annual audit and monitoring process.

94   Possibly the biggest contribution to student support is The Big Deal which offers a range of innovative support to students. The Students' Union proposed changes to the model and now a range of activities is provided alongside a bursary of £500 as well as a course contribution that can pay for other items such as professional memberships or course materials. This has been well received by students. The University was shortlisted for the Times Higher Education Award for 'Outstanding Support for Students'.

95   The Student Charter, which is currently under revision, details what students can expect from the University with regards to student support. Students are made aware of what services the University provides primarily through the student handbook/diary. They are also made aware of support through flyers, electronic noticeboards and the VLE.

96   Staff are made aware of what support is available to students via the Academic Staff Quality Handbook. The Learning Development Unit, at the time the handbook was updated was not an institution-wide service, therefore was not mentioned, only a link to careers was made available, though again this is under review.

97   In some schools, all students are invited to sit the Sherwood Diagnostic Test which can identify if any additional learning support is needed. The University may wish to consider rolling this out to all schools across the institution.

98   The student centre, where all the support services are clustered, is open from 10am to 4pm and access can therefore be difficult for part-time students. In meetings, staff indicated that the institution is considering how to remedy this, including looking at opening hours and providing online resources.

99   Students highlighted the personal tutor system as an issue. The University is looking at this and is currently conducting a survey in conjunction with the Students' Union and the personal tutor system is also part of an institutional action plan.

100   The institution may also wish to look at how the personal tutor system is managed within schools, faculties and at an institutional level as the current policy does not set out a process in which to do so. Within this, the University may also wish to consider the independence of personal tutors.

101   The University operates a peer-assisted learning (PAL) scheme and this was welcomed by students who met the audit team. There are however some issues around the scheme including the recruitment and retention of students and variability of experience across the institution. The University had at the time of the audit just appointed a new PAL coordinator.

102   The audit team found the institution's arrangements for student support to be broadly effective and where they were less so the University was looking to address the issues in partnership with the Students' Union.

Staff support (including staff development)

103   The University has a clearly-articulated People Strategy. An important element of this strategy is the 'Putting Students First' Initiative which is a management development programme offered to all staff. The programme includes attendance and feedback from students and is designed to enable staff to see the University's aspirations, management systems and organisational procedures from the student perspective.

104   An employee wellbeing assessment was undertaken in September 2007 which indicated significant areas where action was needed and significant areas where there was a clear need for improvement. As a follow up, the University recently took part in a national work satisfaction survey. Although the results of this survey are not yet in the public domain the Senior Management Team has indicated that it will use the results to inform future policies relating to staff wellbeing.

105   To complement the People Strategy the University has a set of policies and procedures for staff support and development. The University has a Learning and Development Policy which outlines induction and mentoring procedures for new staff. There is an appraisal scheme which has as a central element an annual appraisal interview. The last Institutional audit made an advisable recommendation that the institution 'ensure its policy on appraisal is consistently applied across the institution'. The University is currently reviewing its appraisal scheme. The current appraisal process is supported by an Appraisal handbook and an Employee Development Report. It is not clear however how the outcomes of the individual appraisals under the present system are used strategically to help achieve the University's aims and objectives.

106   The institution's peer observation scheme was subject to a desirable recommendation in the last audit in 2005. The recommendation encouraged the institution to ensure that the peer observation system works in such a way that will retain the flexibility of the current system but will enable greater dissemination of good practice within and between faculties'. The Learning and Development Policy (July 2008) re-affirmed the institution's commitment to the process. A revised

Policy was issued in June 2009 to be implemented in September 2009. The revised policy stresses that it has a new set of emphases and objectives: 'Whereas the current Peer Observation Policy (2000) was perceived by many academics as being exclusive, private and linked to the judgement of staff performance, the new policy should be seen as being inclusive, transparent and linked to the enhancement of the student experience'. The new system is not obligatory but it is 'expected that academics would normally undertake at least two peer observation 'sessions' a year'.

107   The implementation of peer observation has been variable across the institution and there are indications that its place in the institution's enhancement strategy still needs some time to become fully embedded.

108   Opportunities for staff to undergo appropriate professional development were outlined in the Briefing Paper. New staff who do not have a higher education teaching qualification are required to participate in the institution's Postgraduate Certificate in Learning and Teaching in Higher Education within two years of taking up their appointment. The University also runs a Teaching Fellowship Scheme and, since 2007, has been encouraging the development of research informed teaching by sponsoring staff in Learning Enhancement Projects (see paragraph 78). These opportunities are also available for staff from collaborative partner institutions.

109   The institution has an Academic Career Development and Promotion Policy which outlines career pathways for academic staff in teaching and scholarship and in research. Both pathways allow for promotion to Professor.

110   The University has undergone significant change and restructuring over the last few years. There is an acknowledgement in The People Strategy that such restructuring has meant that many employee groups, academics in particular, have workload concerns. Students also expressed concerns about the way in which staff workload is managed and in particular the system for ensuring that the curriculum did not suffer because of staff absence through illness. The audit team recommends that it is advisable that the University create an effective, equitable and transparent approach to the management of workload for academic staff.

Section 4: Institutional approach to quality enhancement

111   The University's current enhancement strategy was published in 2007. It sets out the key principles, and the expectations for enhanced teaching quality, student support and external reputation; and how these expectations will be achieved. While many members of the University engage in enhancement, during the course of the audit the team formed the view that since 2006 the foci of enhancement have necessarily been senior management driven in order to assure continuous improvements and attain University status. These have included key academic and organisational processes, structural change, clarity of policies, collaborative arrangements, research activity, buildings, equipment, and the University-Students' Union relationship. During the audit, the team discussed and viewed the traffic-light marked performance data sets used by senior management team; these illustrated the attention paid to tracking change, improvement and enhancement.

112   Examples of institution wide enhancement were included in the briefing document. These concerned the Common Academic Framework (CAF), formative assessment, feedback to students on assessed work, employability and personal tutoring. The audit team found evidence of enhancement in all five areas, though the institution wide application of some of these was inconsistent. For example, feedback on assessed work in particular is much criticised in the student written submission and some students who met the team did not feel the personal tutoring system was effective. In contrast, explicit inclusion of employability in the curriculum has added to students' learning experience. The team considered the University's systematic approach to the enhancement of employability for its students to be a feature of good practice.

113   While the senior management team retains a strategic overview of enhancement, it is given impetus throughout the University by the central function of the Business Planning Directorate which acts as an internal consultant for enhancement projects, change management and events. The Briefing Paper offered six examples of the Directorate's work. These were followed in some depth by the audit team and reflected well-reasoned aims for enhancement and sound approaches. The team formed the view however that the University could consider whether quantitative key quality indicators should be determined at the outset of such projects to illustrate that enhancement is taking place during and as an outcome of the processes of change and enhancement.

114   Enhancement is promoted and monitored through the Quality and Enhancement Committee (QEC) and the Faculty QEC. Minutes from these committees provided evidence of the monitoring of key enhancement issues, open and reflective discussion, planning for improvement and actions taken. As the minutes only are available to staff online, the audit team considered engagement with enhancement would be increased and better promoted if they were complemented by the tabled papers and summaries of verbal reports. The team also noted a limited use of data to inform levels and progress of enhancement.

Student involvement in enhancement

115   The increasing involvement of students in many aspects of the institution's work, including its approaches to enhancement, is a strength of the University. Senior management decision making is informed by the Students' Union and students are involved with curriculum design, institutional and faculty committee structures including validation and review, and help ensure the focus and accuracy of published information. The Big Deal (see paragraph 94) has been generally well received by students and places some of the decision making concerning some enhancement activity in the hands of students. Given that the initiative is relatively new, understandably some concerns and suggestions for improvement were reported by students to the team.

116   While there are many forums for the student voice to be heard and the Students' Union is considered 'an equal partner in the identification and promotion of quality enhancement', three opportunities for significant enhancement raised by students are not as yet fully resolved. These concern the consistency of approach to assessment, the need for a consistent approach to module feedback and resultant enhancement action and the implementation of the virtual learning environment policy. A further opportunity raised during the audit concerned the need and benefits to the University of student representatives being routinely included in discussions concerning external examiner reports at programme committees.

Staff involvement in enhancement

117   The University considers the professionalism of its staff central to its enhancement strategy. A number of development opportunities have been implemented to support this. These include the HEA accredited PGCLT in HE for newly appointed academic staff, the University Teaching Fellowship Scheme, Special Teaching Awards and funded Learning Enhancement Projects (LEPs). Added to this, a University team of staff participated in the 2008-09 HEA Change Academy with a project called 'Embedding Employability within the Curriculum to Enhance Student Learning' which had clear linkages with University objectives. Similarly linked are LEPs. The example LEP reports seen by the audit team concerned a range of subjects, aimed to enhance student learning, with clear linkages to the Teaching, Learning and Assessment Strategy. While the reports gave useful descriptions of the projects, which appeared to be successful, the very limited data presented prevented a comprehensive understanding of the projects' impact on enhancement, though some student feedback of some form is referred to. Similarly, the projects' recommendations, which were completed in 2008 and 2009, provide no statistical targets for enhancement. Given the institution's commitment to LEPs, of which 26 had been completed

at the time of the audit the University could consider including an approach to data as used at senior management team level to include targets, leading and lagging indicators, comparative data where available and trend analysis; all of which would help assure project members that enhancement is taking place and to inform decisions concerning further enhancement.

118   Evidence from 2007-08 and 2008-09 indicates that centrally-supported staff development is well organised and evaluated. This is designed to support the People Strategy which aims to have '…the right people at the right time competent and motivated to deliver the goals of the organisation'. While the audit team saw examples of staff engagement with enhancement activity and anecdotal evidence of staff support for change, the limited amount of perception data available from the majority of staff did not allow the team to gauge levels of commitment to the goals of the University and consequently its Enhancement Strategy. This data was confined to a wellbeing survey carried out in 2007 which indicated much dislocation between staff and the University. As the results of the 2010 survey had not been discussed in full with staff at the time of the audit, they were not available to the team.

119   The University disseminates its good and emerging good practice to staff and other stakeholders in a number of ways. This includes via committees structures, staff development, leaning and teaching coordinators, link tutors, peer observation, annual reviews, publications the intranet and more. These approaches to dissemination appear to be effective, however the University could consider collating them in one place in order to allow all staff easy access to the information and to help prompt further enhancement. At the same time the University could benefit from an institution-wide definition of good practice and how, and with what, measures of good practices are determined.

External examiners; approval, monitoring and review of programmes

120   The University presented clear evidence of the influence of external examiners on institutional enhancement. This was found in the analysis and monitoring of external examiner reports, which includes a traffic-light system to identify priorities for action, course responses, action plans, the sequence of reporting through committees to senior management team meetings and from students and staff met by the audit team.

121   The processes of approval, monitoring and review were also found to support enhancement. In particular, the involvement of external examiners, students and employers in the curriculum development stage of validation was considered to enhance the process and to be a feature of good practice.

Section 5: Collaborative arrangements

The institution's approach to managing collaborative arrangements

122   The University currently operates three types of collaborative partnerships: regional collaborative provision (involving five colleges and comprising the majority of the University's collaborative provision); accreditation of courses or modules designed and delivered by five external organisations (in which students receive academic credit from the University) and co-delivery of provision with four employers in the medical and aviation sectors.

123   Partnership agreements are made formal with Memoranda of Academic Co-operation and Financial Agreements. The former normally are for a three year period, the latter are reviewed annually. New partnerships development is overseen by the Academic Planning Committee which reports its findings and advice to the senior management team.

124   Articulation agreements to permit the direct entry for students of five institutions are established, but these are not active. Similarly, there is no international partnership activity.

125   The audit team found that the University's approaches to the management, quality assurance and enhancement of collaborative provision were well aligned with those deployed across the institution. While the DVC is responsible for the strategic management of collaborative partnerships, these approaches are overseen by the Academic Quality Directorate (AQD) which acts as a facilitator and liaison point for collaboration. Documents, minutes of meetings and discussions with staff confirmed the usefulness of this function. A key role of AQD is to ensure consistency across the provision. This is guided by the University's Collaborative Provision & Partnerships Operational Framework, the Collaborative Provision & Partnership Policy and its Higher Education in Further Education Strategy, and supported in practice by Operations Manuals. These frameworks and documents were found to be clear, comprehensive and used.

126   The scale and nature of current partnership arrangements are a result of a major review in 2008-09. This was in large part as a result of the cap on funded full-time undergraduate numbers and the implementation of the key features of the University's 2008 Higher Education in Further Education Strategy. As a result, student numbers were reduced and limitations placed on the development of new courses. In addition, the University withdrew from the validation of level 6 courses from 2010 with partner colleges, though their students have the opportunity to progress to this level at the University. While these constraints changed the dynamic of partnerships, the audit team read and heard clear evidence of how the transition to the new circumstances were managed in a careful and balanced way to safeguard the present and future interests of participating institutions, students, quality and standards.

127   Inter-partner/University management data is held by the University and made available to partners with associated analysis and reports. The examples seen by the audit team focussed on student numbers, retention, progression, results and fully segmented student backgrounds. The briefing document explains that in addition to this data the University has developed comprehensive academic planning summaries, including the status of applications to inform discussions and decision making with partners.

Operational management

128   University and partner staff who met the audit team were clear concerning what was expected of them in terms of delivery and practice in line with policy and broad alignment with the *Code of practice.* Both the University and partners use the operations manuals to make transparent the demands of each party in planning, quality and standards, day to day delivery and operations, published material, and internal and external review. Course checklists, contact lists, collaborative review workshops records, tables which mapped actual practice against the *Code of practice*, and the minutes of Principals' meetings served to assure the team of the detailed consideration given to these arrangements. The number of completed required fields of Annual Review and Evaluation Evidence Based Action Plans were however found to be variable. These nevertheless provided useful, if sometimes anecdotal, evidence and actionable objectives. Other than student numbers information, quantitative data in support of views and findings expressed in the plans were very limited. Given this, the University could consider the inclusion of data which support the narrative and makes clear the measurable levels of enhancement anticipated as a result of actions taken.

129   The audit team found clear evidence of the effectiveness of the partner and faculty link tutor roles in documents, minutes and discussions with staff. Evidence illustrated how link tutors and associated staff maintain the regular connections between the institutions; keep overviews of the delivery, quality and outcomes of courses; identify and seek to address issues and challenges, report to the host college and faculties, and help facilitate enhancement as a result of internal and external review.

The student experience

130   The Briefing Paper stated that 'improvement in students' participation at Bucks has been achieved. The next step is to ensure this is replicated in the University's partners. The student written submission adds the 'institution finds it very difficult to gather the voice of students from its collaborative partners…The new institutional framework for student reps does not take account of collaborative provision students'. While this was the position at the time these documents were written, the audit team heard and saw evidence from Students' Union officers that progress was under way. Key challenges have been identified along with actionable points to strengthen the linkages between partner colleges and the University. The team formed the view that these form a firm starting point to further unite partner and University students and their Unions.

131   Students undertaking University awards through a collaborative partner are entitled to access University libraries and electronic resources; Students' Union membership and its free activities and events. Similarly, the team found that the University's Disability Service and its Money Advice team worked with partner colleges to support students. Specifically, the University's Disability Service contacts all applicants who declare a disability through UCAS and, in collaboration with colleges, screens, assesses and registers partner students. The team noted that some partner students have made successful applications to the University's Access to Learning Fund.

Staff support

132   The audit team found that support for partner college staff takes the form of attendance at annual Collaborative Provision Review and Development Workshops, enrolment on University courses, access to a spectrum of workshops and conferences; and termly meetings of all link tutors to support the close working relationship between faculties and partners, to share experiences and discuss new developments. Records of workshops viewed by the team were comprehensive, focussed on key themes, strengths and challenges and formed a sound basis for actionable improvements. Around 80 partner staff attended each workshop. While these workshops appear to be a useful source of information and an exchange of ideas, the University may wish to consider the benefit of working with partners to regularly survey the perceptions and experiences of partner staff working in higher education. The University might also wish to consider sharing the benefits of the revised peer observation policy, given it is designed to be 'inclusive, transparent and linked to the enhancement of the student experience'.

133   It was noted that approaching 60 partner staff had enrolled on University courses between 2007 and 2010 with fees waived in almost all cases and 50 per cent in the remainder; though the audit team understood that a 25 per cent discount now applies. As already indicated, the link tutor system is a fundamental part of the mutual support between partners and the University. On the basis of the evidence viewed and heard by the team, the system appears to work well.

External examiners and assessment

134   All external examiners of University awards are appointed by the University. Where awards are delivered by the University and partner institutions the same external examiner is appointed for both locations; a separate report is produced for each. Sample reports viewed by the team provided evidence of a common approach across institutions in accordance with policy. The quality of teaching and learning was found to be comparable; though inevitable differences in approaches and resources between institutions were noted by examiners.

135   Joint examination boards conform with University regulations. They are held at the University, chaired by University staff, and attended by partner link tutors and representative staff. Alongside the main purpose of the boards they have been found to be useful in making comparisons of student performance between the University and partners. Where a board considers students from a partner only, it may take place at the college; with University staff attending, chairing and servicing the board, all in accordance with University regulations.

136   It was noted that collaborative partner students who wish to appeal against a board of examiners' decision follow the University's academic appeals process.

137   The setting and moderation of assessments is the responsibility of the University. The Briefing Paper stated that 'a sample of all scripts and examinations papers is moderated by the home faculty prior to moderation by external examiners'. Documents provided assured the team these processes were followed in line with policy.

Monitoring and review of collaborative provision

138   The Briefing Paper stated 'Partner course teams are responsible for providing the University's home school with either the University's format Course Action Plans or their own comparable format AR&E report as required by the AR&E process. These reports are considered by the faculty and any pertinent matters included into the school level action plan'. As mentioned above, a number of plans were found to vary in terms of completed required fields. They did however provide useful evidence and actionable objectives, if limited amounts of supporting data. Overall, the team found that, when combined with the link relationships between institutions and faculties, external examiners policy, and the active roles taken by AQD and QEC, monitoring processes were effective.

139   The Briefing Paper states the '…University is in the process of finalising a periodic review process for its work with partner FECs'. This process, 'Collaborative Provision Partnership Review' draws from periodic portfolio review. The first reviews will take place in summer 2010.

Admission and recruitment

140   The University acknowledges that the time and resource needed by collaborative partners to develop an equivalence of admission expertise is a challenge. To address this, the University secured funding from the Progress South Central LLN for a conference concerning admission to HE in FE. The region's four universities and their 23 partner colleges attended the event, which aimed to disseminate good practice in the admissions process.

141   Recruitment to full-time undergraduate awards is through the UCAS process and is managed centrally by the University's Admissions Team. Where partners have delegated responsibility, arrangements must be consistent with the University's processes and entry criteria as detailed in the approved Programme Specification.

Section 6: Institutional arrangements for postgraduate research students

142   The University offers programmes of supervised study leading to the degrees of Master of Philosophy and Doctor of Philosophy of Coventry University. The research degrees were awarded by Brunel University from 1992 until 2008 and some 66 students are currently registered with Brunel.

143   One of the conditions of approval of the University for running degrees registered through Coventry University was that Buckinghamshire New University must have in place a University-wide policy and approval framework for ethics. This is now in place and includes a University level Research Ethics and Governance Committee. Each faculty has a research ethics committee while the NHS ethics procedures are used for any project involving NHS patients.

144   The University has its own research degree regulations based on those of Brunel University but they have recently been updated to include common aspects of the regulations of Coventry University. In addition there are separate codes of practice for research degrees at each University.

145   The audit team met students registered for the degree of Doctor of Philosophy (registered with Brunel) who had found no confusion in these changes and were supportive of these codes of practice.

146   Each faculty has a faculty research degrees committee (FRDC) which reports to the Research Degrees Committee (RDC), which includes student representation and is responsible for research degrees policy, reporting annually to Senate. RDC undertakes annual monitoring by reviewing students' progress and undertaking an analysis of feedback from students. RDC currently includes representation from both Brunel and Coventry University.

147   Most aspects of the administration of research degrees are handled centrally by a Research Unit.

The research environment

148   Students have opportunities to present at both faculty organised seminars and events and are actively supported for attendance and presentation at national and international conferences. The Faculty of Design, Media and Management awards a prize for best presentation. Current students have published in peer reviewed journals and engaged in technology transfer activity with local companies. The student publication record shows a strong external focus.

149   Computer resources, working space and library resources were scored at below the sector norm in the Postgraduate Research Experience Survey (PRES). The University considers this to be a reflection of the moves between sites. The audit team found that these criticisms were not voiced by the research students met during the audit.

150   Students have expense supported access to the British Library in addition to access to the libraries on the High Wycombe and Uxbridge campuses. Students also have access to seminars and libraries of the M25 consortium of universities with some 59 members.

151   There has been recent student feedback on opening hours of the libraries, this has resulted in pilot opening until 3am in March and April 2010, this is seen as a further example of the relationship between the University and its students.

152   There is a dedicated research librarian who gives presentations on the access and use of literature databases, the team felt however that more work is needed in this aspect of the research environment. The team received oral evidence from students that access to literature could be confusing but the team considered that the institution is dealing with this perceived problem.

153   The University's record of timely completion of research degrees compares favourably with the sector norms.

154   The audit team found the research environment at the University to be appropriate, supportive and satisfactory.

Selection, admission and induction of students

155   All students undergo a formal application and interview process with the faculty head of research and the proposed first supervisor. The application includes the research proposal of 2,500 words and certification of English competence if appropriate. Students sign an agreement with the University where they formally agree inter alia to the annual review process, remuneration, the possibility of teaching experience and training to be agreed, working hours and vacation length.

156   Students attend an induction day to meet relevant key staff from the faculty, the Research Unit and Library; they also receive a copy of the Research Student Handbook. This document is written in a 'frequently asked questions' style and covers all parts of the research degree experience at the University.

157   Shortly after starting research, the supervisors and the student are required by the University to sign a working agreement. This document is updated annually and includes the student's training requirements, dates of supervision meetings, and roles of the supervision team and proposals for transfer to PhD or date of submission of the thesis.

158   Through its meetings and scrutiny of documents, the audit team found evidence of strong and effective approach to the management of postgraduate research students. The audit team considered that the arrangements for admission, induction, supervision and support of research students, particularly the working agreement between supervisors and students, to be a feature of good practice.

Supervision

159   All students have a team of at least two appropriately qualified supervisors. Workload of supervisors is limited to a maximum of six students. The University has introduced an accreditation scheme for supervisors. To remain accredited, supervisors must attend continuing professional development workshops related to research supervision and be research active. At the time of the audit there were 44 accredited supervisors.

160   Meetings for supervisors are held at least annually; recent topics have included research supervision and research assessment. The team saw evidence that these meetings are well attended with good feedback by staff. The PRES survey found that 100 per cent of students who participated rated their supervisory support and guidance as meeting or exceeding their expectations.

161   A detailed record is kept of supervision meetings with new timed work to be concluded before the next meeting and a report on work completed since the last meeting. The signed record is agreed between student and supervisor.

162   Students who met the audit team participated in this process and were very supportive, reporting that these notes were completed on a monthly basis but that other regular supervisory meetings were also held.

163   The audit team found the University's arrangements for research degree supervision to be rigorous and appropriate.

Progress and review arrangements

164   The process used by the University in the progress and review of research student performance is well documented in the research degree regulations and in the research student handbook. Students write a yearly report which is formally discussed at a meeting with the supervision team and the faculty head of research. Set objectives are tested and the meeting results in continuing registration, reconsideration at a later date or registration for the MPhil degree without transfer to PhD. The student receives a report of the meeting.

165   Each faculty produces an annual report for RDC which includes a section on student progress with a review of training and proposals for new or updated postgraduate skills courses. The report also collates student comments from faculty meetings and feedback from other sources with suggestions for enhancement.

166   A comprehensive annual review of research degrees is also prepared for RDC and Senate. This critically examines all aspects of student performance, issues and responses and evaluation of supervisor training and student skills support.

167   The transfer to PhD from MPhil occurs at 12 months for full-time students and 18 months for part-time students. A similarly constituted panel as that above considers a transfer progress report written by the student. The result can be transfer, revision or resubmission.

168   The audit team found the University's arrangements for review and its treatment of progress statistics for research students to be rigorous and appropriate.

Development of research and other skills

169   Research skills required are agreed yearly between the supervisory team and the student and remain part of the working agreement. These are revisited and updated on a yearly basis, completion being signed off when annual progress is reviewed.

170   Research students seen by the team were very supportive of academic staff that mentored them for their role in the classroom and particularly in giving help when assessing and grading students' work.

171   However, the University states that students who teach have to attend six half day workshops entitled 'Preparing for Teaching' offered by the Department of Education, Learning & Teaching. The audit team found that both staff and students were unclear about whether this course was mandatory. The team also met a student who was currently teaching but had not followed this course.

172   The audit team considers it desirable for the University to ensure that all participating postgraduate research students are formally prepared for teaching and assessment roles.

Feedback mechanisms

173   Research students sit on both Faculty and University Research Degree Committees. These committees have a student issues standing agenda item. Recent issues have been summer library access; this has been resolved by use of the M25 consortium, British library and online access.

174   The University also participates in PRES and the RDC discusses a report on issues from that survey on a yearly basis. Most recently career guidance and literature database access have been addressed though relevant careers and library staff giving presentations at postgraduate training workshops.

175   Feedback from staff and external examiners is included in the annual report to RDC and Senate. External examiners have been positive and supportive of viva voce arrangements, including the role of chair.

Assessment

176   Viva voce examinations are chaired by an academic member of staff from another School of the University, the panel consists of an internal and external member appointed by Brunel University (Coventry from 2012) recommended by the faculty head of research and endorsed by both FRDC and RDC. The internal member advises on regulations and advises the student on the presentation and format of the thesis and compliance with university regulations.

177   Each examiner produces a report prior to the viva examination to the Research Unit which considers literary presentation, contribution to knowledge and a knowledge and understanding of the topic and the research techniques used in the study.

178   All examiners are sent an Examiners and Chairs Handbook on appointment which details regulations assessment criteria and the practice to be followed.

179   The team considered the assessment arrangements for research students to be satisfactory.

Representations, complaints and appeals arrangements

180   Students seen were aware of the complaints and appeals procedures of the University. Students have the right to ask to use the Brunel or Coventry procedures.

181   There is only one use documented in the last 10 years, this was an appeal using mitigating circumstances which was granted resulting in a second viva.

182   The procedures are readily accessed, written in understandable language and straightforward. Again, the audit team considered these procedures to be satisfactory.

Section 7: Published information

183   Communication and marketing functions are shared between the central Directorates of Strategic Marketing and Communications (SMC), Student Recruitment and the two faculties. Each faculty has a marketing manager who coordinates the faculty's published materials and drafts course materials in line with the University's corporate writing and style guidance. Marketing managers also liaise internally with the student services manager and the Strategic Marketing and Communications (SMC) Directorate and ensure that all publications are authorised for publication. SMC also monitors the Unistats website to ensure the accuracy and reliability of the University's data as published there. The University adds commentaries on this site on its teaching and learning strategy and National Student Survey results. This data is produced by the Business Planning Directorate.

184   The University also stated in its Briefing Paper that external examiner reports are shared with students through the student representative system and through course committees. The audit team found that copies of all reports were shared with the Students' Union executive, but that discussion of reports at course committees was inconsistent and absent from many of these meetings. The University is aware of this and has plans to ensure that external examiner reports are dealt with consistently in future.

185   Material relating to the management of quality and standards is readily available on University and faculty websites. Faculty and module handbooks are available on the University virtual learning environment (VLE). These publications contain current information on assessment, in addition to outline syllabi and often brief lecture content, week by week. However, the team found that some module handbooks were missing from the VLE and that nomenclature also varied; being referred to as handbooks, module guides or module plans. These publications are reviewed annually and are additionally reviewed if changes are made to the *Code of practice*. The University is aware of the inconsistent use by staff and students of the VLE and has actively tried to correct this through a campaign. The audit team heard in meetings with staff that this work has been partially successful and will continue.

186   There is a comprehensive Academic Quality Handbook for staff which includes web links to the University's standard template for programme specifications and standard module proforma. Staff also produce a module plan that includes assessment dates, module outcomes and learning objectives. The University publishes guidance for staff in the construction of a programme specification for use in the validation process.

187   Each student signs for a copy of the faculty student handbook each year. This has a University section with a helpfully written frequently asked question style and a course related section containing the programme specification being followed by the student.

188   Students who met the audit team confirmed that pre-enrolment information was generally accurate and were also very supportive of recently introduced student input into prospectus content, BORIS (Bucks Online Realtime Information System). This is an online copy that can be checked and edited by chosen stakeholders including students. The University planned to review the benefits of this system in spring 2010. The team also learned in meetings with students and staff that students are asked for comments and input to course handbooks.

189   Materials produced by collaborative partners follow the same processes as materials produced by the University, being approved by faculty marketing managers and SMC. Meetings with staff confirmed that students in collaborative partner institutions could also be involved in the checking the accuracy of published information as appropriate.

190   The University is aware from feedback that there are student concerns related to published information and is currently working on the clarity of marking criteria, the further development of the on-line editing facility (BORIS) and the VLE campaign mentioned above. Feedback from students has also raised concerns about hidden costs associated with some courses and the University intends to publish these costs on UCAS profiles in the future.

191   Overall, the audit team found that reliance can reasonably be placed on the accuracy and completeness of the information that the University publishes about the quality of its educational provision and the standards of its awards.