



QAA



Institutional audit

University of the West of England, Bristol

MARCH 2009



© The Quality Assurance Agency for Higher Education 2009

ISBN 978 1 84482 996 5

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

Registered charity numbers 1062746 and SC037786

Preface

The Quality Assurance Agency for Higher Education's (QAA) mission is to safeguard the public interest in sound standards of higher education qualifications and to inform and encourage continuous improvement in the management of the quality of higher education. To this end, QAA carries out Institutional audits of higher education institutions.

In England and Northern Ireland, QAA conducts Institutional audits on behalf of the higher education sector, to provide public information about the maintenance of academic standards and assurance of the quality of learning opportunities provided for students. It also operates under contract to the Higher Education Funding Council in England and the Department for Employment and Learning in Northern Ireland to provide evidence to meet their statutory obligations to assure the quality and standards of academic programmes for which they disburse public funding. The audit method was developed in partnership with the funding councils and the higher education representative bodies and agreed following consultation with higher education institutions and other interested organisations. The method was endorsed by the Department for Innovation, Universities and Skills (now the Department for Business, Innovation and Skills). It was revised in 2006 following recommendations from the Quality Assurance Framework Review Group, a representative group established to review the structures and processes of quality assurance in England and Northern Ireland, and evaluate the work of QAA.

Institutional audit is an evidence-based process carried out through peer review. It forms part of the Quality Assurance Framework established in 2002 following revisions to the United Kingdom's approach to external quality assurance. At the centre of the process is an emphasis on students and their learning.

The aim of the revised Institutional audit process is to meet the public interest in knowing that universities and colleges of higher education in England and Northern Ireland have effective means of:

- ensuring that the awards and qualifications in higher education are of an academic standard at least consistent with those referred to in *The framework for higher education qualifications in England, Wales and Northern Ireland* and are, where relevant, exercising their powers as degree-awarding bodies in a proper manner
- providing learning opportunities of a quality that enables students, whether on taught or research programmes, to achieve those higher education awards and qualifications
- enhancing the quality of their educational provision, particularly by building on information gained through monitoring, internal and external reviews, and feedback from stakeholders.

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

- the confidence that can reasonably be placed in the soundness of the institution's present and likely future management of the academic standards of awards
- the confidence that 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.

Audit teams also comment specifically on:

- the institution's arrangements for maintaining appropriate academic standards and quality of provision of postgraduate research programmes
- the institution's approach to developing and implementing institutional strategies for enhancing the quality of its educational provision, both taught and by research

- the reliance that can reasonably be placed on the accuracy and completeness of the information that the institution publishes about the quality of its educational provision and the standards of its awards.

If the audit includes the institution's collaborative provision the judgements and comments also apply unless the audit team considers that any of its judgements or comments in respect of the collaborative provision differ from those in respect of the institution's 'home' provision. Any such differences will be reflected in the form of words used to express a judgement or comment on the reliance that can reasonably be placed on the accuracy, integrity, completeness and frankness of the information that the institution publishes, and about the quality of its programmes and the standards of its awards.

Explanatory note on the format for the report and the annex

The reports of quality audits have to be useful to several audiences. The revised Institutional audit process makes a clear distinction between that part of the reporting process aimed at an external audience and that aimed at the institution. There are three elements to the reporting:

- the **summary** of the findings of the report, including the judgements, is intended for the wider public, especially potential students
- the **report** is an overview of the findings of the audit for both lay and external professional audiences
- a separate **annex** provides the detail and explanations behind the findings of the audit and is intended to be of practical use to the institution.

The report is as concise as is consistent with providing enough detail for it to make sense to an external audience as a stand-alone document. The summary, the report and the annex are published on QAA's website. The institution will receive the summary, report and annex in hard copy (*Handbook for institutional audit: England and Northern Ireland 2006 - Annexes B and C refer*).

Summary

Introduction

A team of auditors from the Quality Assurance Agency for Higher Education (QAA) visited the University of the West of England, Bristol (UWE, or the University), from 23 to 27 March 2009 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.

To arrive at its conclusions, the audit team spoke to members of staff throughout the University and to current students, and read a wide range of documents about the ways in which the University manages the academic aspects of its provision.

In Institutional audit, the institution's management of both academic standards and the quality of learning opportunities are audited. The term 'academic standards' is used to describe the level of achievement that a student has to reach to gain an award (for example, a degree). It should be at a similar level across the United Kingdom (UK). The term 'quality of learning opportunities' is used to describe the support provided by an institution to enable students to achieve the awards. It is about the provision of appropriate teaching, support and assessment for the students.

Outcomes of the Institutional audit

As a result of its investigations, the audit team's view of the University of West of England, Bristol, 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 University has clearly identified enhancement of the student learning experience as being core to its mission, and enhancement has been a key driver of its strategic thinking. Although the University's approach has led to identifiable enhancements, its full potential has yet to be realised.

Postgraduate research students

The audit found that the arrangements for postgraduate research students, including those for support, supervision and assessment, were effective and met fully 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 information

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

Features of good practice

The audit team identified the following areas of good practice:

- the University's commitment to student representation and the effective engagement of students in the development of policy and practice

- University initiatives under the Student Experience Programme that support key aspects of the student learning experience.

Recommendations for action

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

Recommendations for action that the team considers advisable:

- reconsider its timetable for Internal Academic Review, prioritising those areas which have fallen outside the University's stated timeframe
- strengthen the means by which the University oversees and manages its collaborative activity as a collective entity
- complete the task of codifying the regulations, responsibilities, protocols and roles relating to collaborative provision
- ensure greater consistency in the operation of arrangements for postgraduate research students as described in the University's Code of Practice, and communicate its policies and procedures clearly to students.

Recommendations for action that the team considers desirable:

- reflect on the balance between the effectiveness of its processes for quality management and the burden those processes may place on staff
- consider ways of enhancing the integration of central and faculty support and guidance for staff in respect of learning and teaching
- explore means of recognising and rewarding teaching excellence at institutional level.

Reference points

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

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

The audit found that UWE took due account of the elements of the Academic Infrastructure in its management of academic standards and the quality of learning opportunities available to students.

Report

1 An Institutional audit of the University of the West of England, Bristol (the University or UWE), was undertaken during the week commencing March 23. The purpose of the audit was to provide public information on the University's management of the academic standards of the awards that it delivers and of the quality of the learning opportunities available to students.

2 The audit team was Mr Denis Calderon, Professor Debbie Lockton, Dr Anne Miller and Mr Lawrie Walker, auditors, and Miss Rachel Lucas, audit secretary. The audit was coordinated for QAA by Professor Paul Luker, Assistant Director, Reviews Group.

Section 1: Introduction and background

3 The University traces its history through Bristol Polytechnic to the Merchant Venturers' Navigation School, established in 1595, the Merchant Venturers' Technical College, Bristol Technical College, the West of England College of Art and the teacher training colleges of Redland and St Matthias. The University was designated as such and took its title under the *Further and Higher Education Act 1992*. In 1996, the Colleges of Health of Avon and Gloucestershire and of Bath and Swindon were incorporated into the University.

4 The University has four campuses in and around the city of Bristol. Most of its students (around 65 per cent in 2007-08) are based at the Frenchay Campus, which lies north of Bristol city centre. The other campuses are at Bower Ashton (south-west of the city centre), Glenside (about one mile from Frenchay) and St Matthias (about 2.5 miles from Frenchay). Additionally, there are what the University calls 'outposts' of the Faculty of Health and Life Sciences at Bath, Swindon and at Hartpury, Gloucestershire.

5 UWE engages in a range of collaborative provision. Its longest standing collaborative link is with Hartpury College which has been an affiliated institution and associate faculty of the University since 1997. The Bristol Old Vic Theatre School was designated an affiliated institution and associate school of the Faculty of Creative Arts in 2000. The University manages other regional partnerships through the UWE Federation, a network of further education partner colleges, and has a number of international partnerships.

6 In 2006-07, the University had a total of 29,798 students, 80 per cent of whom were pursuing undergraduate qualifications, 19 per cent were on taught postgraduate programmes, and 410 were pursuing research degrees. The proportion of part-time students was 21 per cent (undergraduate), 69 per cent (postgraduate taught) and 54 per cent (postgraduate research).

7 The University's mission is to be, by the year 2012, an internationally acknowledged centre for knowledge exchange, drawing upon excellent teaching, scholarship and research in order to prepare students for the various needs and challenges of work and society. Its aim is to support students' learning across a spectrum of activity, offering lifelong learning, progression pathways and excellent standards in learning and teaching leading to high quality employment outcomes through the relevance and practicality of its curriculum.

8 As the University's Briefing Paper noted, at the time of the audit, the University was reaching the end of a period of restructuring from nine faculties to five (see paragraph 10). The five faculties of the University are the Bristol Business School; Creative Arts; Environment and Technology; Health and Life Sciences, and Social Sciences and Humanities.

9 Since the last Institutional audit, a sequence of significant and, at times unsettling, changes has occurred within the University. Most significantly, there have been two new Vice-Chancellors since 2006. Changes in leadership have been accompanied by restructuring of the organisation and a refocusing of its strategic direction through the introduction of a new Strategic Plan in 2006. The Strategic Plan commits the University to enhancement of the student experience, research and knowledge exchange, plus engagement with further education through the UWE

Federation. The University intends to consolidate its estate onto one campus at Frenchay, taking the opportunity to improve the working and social environment for staff and students, making better use of information technology, and developing a more global perspective.

10 Among the measures intended to lead to successful implementation of the strategic priorities are a closer functional relationship between the Board of Governors and the Academic Board; the introduction of a new senior management team with designated leadership in the priority areas of the Strategic Plan; restructuring of the University that includes the reduction from nine faculties to five noted earlier, and the introduction of revised academic governance arrangements and provision of professional administrative support for academic units under institution-wide leadership and direction. The audit team found, however, that the duration and complexity of the restructuring and reorganisation had created uncertainty and the team was presented with contradictory views by staff about the ways in which systems and procedures should operate.

11 The previous Institutional audit of the University in 2004 resulted in a judgement of broad confidence in the institution's current and likely future management of the quality of its academic programmes and the academic standards of its awards. The report identified five areas of good practice and made five recommendations, three of them advisable, and two desirable. The 2004 audit team advised the University to consider how to ensure the development of a shared understanding with respect to quality management in a devolved structure; reconsider minimum expectations that impinge on variability of the student experience (in assessment for example), and to consider how the academic audit process might yield more effective oversight. The desirable recommendations encouraged the University to seek to improve the common understanding of terminology used to describe the University's quality management processes, and to consider means to help increase understanding of central quality assurance processes and faculty responsibilities.

12 The University has made progress in addressing the recommendations of the last audit and to build upon features of good practice within its Strategic Plan, such as the effective use of Internal Academic Audit and the provision of excellent information about its policies and procedures for quality management. However, the audit team found that it was not yet possible to evaluate the full impact of revised approaches, many of which were still subject to further development and final implementation at the time of the audit.

13 Academic Board, chaired by the Vice-Chancellor, has overall responsibility for the quality and standards of all academic awards including research degrees. In practice, these responsibilities are delegated to standing committees of the Board, as follows. The Learning, Teaching and Assessment Committee, through its own subcommittee, the Quality and Standards Committee, maintains an overview of quality management and enhancement, in the context of the Learning and Teaching Strategy. The Quality and Standards Committee directs the operation of the main quality management processes at university and faculty levels for all taught provision, including collaborative provision. Three committees consider related aspects of research activity. Research Committee has a strategic development role, while the Research Degrees Committee and Research Degrees Examining Board oversee faculty arrangements for postgraduate research students and examination of them, respectively. Faculty boards have delegated responsibility for managing academic standards and the quality of learning opportunities provided to all students.

14 The University's Quality Management and Enhancement Strategy utilises four main processes, approval, annual monitoring, periodic internal academic review and internal audit. Award and Programme Approval and Validation is used to consider new provision (see paragraphs 18 and 19). Annual Monitoring and Evaluation of taught and research provision is organised at subject, department and faculty level (see paragraphs 20 and 21). Internal Academic Review is a forward-looking process that features critical review and revalidation of provision on a six-year cycle (see paragraphs 22 and 23). Internal Academic Audit annually explores the effectiveness of faculty arrangements on a theme, determined by Academic Board, that draws

on the outcomes for the previous year's quality management and enhancement processes (see paragraph 24). Comprehensive, detailed reports to Academic Board describe the operation of quality management and enhancement processes within faculties during a cycle. The audit team felt that the length, complexity and discursive nature of some reports detracted from their effectiveness and that there is scope to provide key information in a more focused, action-oriented way, to optimise its impact.

15 Faculty leadership and direction is provided through an executive dean, associate deans, a faculty academic registrar and heads of departments. In addition to faculty boards, all faculties use a minimum of three committees to manage quality and standards, learning and teaching, and research and knowledge exchange. Faculties have delegated responsibility for curriculum design, new module approval, operation of faculty-managed programme approvals, annual monitoring of taught and research degree provision, nomination of external examiners, liaison with student representatives and response to student feedback.

16 The University considers itself to have sound processes and systems for quality management and enhancement, and recognises the need for improved integration of processes and strategic developments, better provision of management information and further devolution to faculties of operational responsibilities. The audit team found that the University operates a comprehensive set of processes and procedures that form a framework for the management of standards and quality that is generally fit for purpose. However, the team concurred with the University's own analysis and identified scope for furthering the shared understanding of this framework, based on excellent information on the Academic Registry web pages. The team concluded that the workload associated with some processes seemed high and that the University might reflect on this (see paragraph 25).

Section 2: Institutional management of academic standards

17 The University states that its approach to quality management and enhancement is characterised by robust processes and systems informed by the Academic Infrastructure. Fundamental to these processes are the University's programme approval, monitoring and review processes, assessment regulations and admissions policy. The University's framework for the management and enhancement of academic standards is described in the Quality Management and Enhancement Strategy and Framework. This states that responsibility for quality management and enhancement is shared between faculties and the centre, with faculties reporting the outcomes of processes to central University committees and the reporting of outcomes of internal academic audit to the Learning, Teaching and Assessment Committee via the Quality and Standards Committee.

18 The process for the approval of programmes is documented in the Award and Programme Approval Handbook and the Academic Regulations and Procedures. In 2006-07, the University devolved some responsibility for validations to faculties, where the validation is of an existing programme introducing a new pathway or a new mode of delivery. In all other cases validations are centrally managed. Programme approval is, essentially, a three-stage process. First, an initial outline proposal including a market impact assessment of proposed programmes is considered for approval by the Quality and Standards Committee and endorsed to proceed to validation. An initial scrutiny is undertaken by a panel to clarify any ambiguities within a proposal prior to a validation event taking place. Validation panels comprise members from the Quality and Standards Committee, members from within the University and external members nominated and approved according to institutional procedures. The chair confirms that conditions imposed have been met to the Quality and Standards Committee, which then approves the programme for delivery. A similar process occurs for programmes subject to limited-term approval. The Quality and Standards Committee receives an annual report on validations and approvals.

19 From scrutinising available documents, the three-stage approval process appeared to the audit team to be burdensome. The team noted that such a concern had been raised in 2007 at the predecessor to the Quality and Standards Committee but, after debate at that committee, it was concluded that the preliminary scrutiny part of the process was invaluable in ensuring that all relevant information was available to the validation panel.

20 The University requires that all taught provision at module and programme level and supervised research leading to an award is annually monitored and evaluated. Faculties are required by Academic Board to establish procedures and arrangements for the monitoring and evaluation of provision that align with the University's framework. Summary reports to the University, which outline the faculty's approach to monitoring and evaluation, are produced by scheme and award management committees and received by faculty boards. The reports are presented by the Executive Dean to the Quality and Standards Committee following approval by faculty board. The audit team noted that one faculty in its overview report had recommended that the University reconsider its approach to annual monitoring and evaluation and consider the efficacy of the process, which the faculty felt was resource intensive and led to a duplication of reporting. Such duplication of reporting was also noted in the annual report from another faculty. The team felt that there was some substance to these views, although recognised that some duplication was not required by the University (see paragraph 25).

21 In 2007-08 and 2008-09, outcomes from monitoring and evaluation processes were referred to a group consisting of members from both the Quality and Standards Committee and Learning, Teaching and Assessment Committee. This group produced a detailed report to both committees which contained recommendations that became embedded in the Learning and Teaching Development Plan 2007-08 and 2008-09.

22 Internal Academic Review occurs on a six-year cycle and reviews subjects and/or programmes. The review panel includes external membership. The required documentation includes a self-evaluation and outcomes from other processes such as annual monitoring, student performance data, recent professional statutory or regulatory body reports and external examiners' reports. The Executive Dean presents the outcome of the review to the Quality and Standards Committee, together with an action plan. The review is reported to Academic Board as part of the Quality and Standards Committee's annual report. In some cases, the review is held in conjunction with professional body visits. From the examples it saw, the audit team found the process to be rigorous, although the self evaluation documents provided by subject teams were variable in detail and analysis. In addition, the monitoring of action plans arising from such reviews also appeared to the team to be variable.

23 The Briefing Paper stated that the previous Vice-Chancellor had suspended the process of Internal Academic Review for 2005-06 and 2006-07 in order to conduct a number of strategic reviews within the University. The University acknowledged that this suspension of the process was a cause for concern but that it felt that it was now catching up. The audit team noted, however, that within the timetable for future Internal Academic Reviews, some areas would be considerably outside the University's stated timetable of six years. Given that the Academic Regulations and Procedures state that 'internal academic review is concerned with academic standards and the quality of the subjects and/or programmes of study leading to University awards', the team would advise the University to reconsider its timetable for Internal Academic Review, prioritising those areas which have fallen outside the University's stated timeframe.

24 A further quality process undertaken by the University is Internal Academic Audit. The Briefing Paper stated that its purpose is to provide an opportunity for the University to review the effectiveness of faculties' management of devolved responsibilities for quality management and enhancement. The audit process comprises a small group of members of Academic Board, or its subcommittees, that looks at documentation regarding a faculty's quality processes together with evidence of their effectiveness, and interviews staff. The internal audit team prepares a report that lists either essential or advisable actions for the faculty to undertake and points of good practice.

The theme for each audit is determined each year by the Quality and Standards Committee, which, in so doing, draws on the outcomes from the previous year's quality management and enhancement processes. The theme for 2009 was the implementation of the University's Code of Practice for Research Degree Programmes. Faculty boards prepare a response to the audit report and the Quality and Standards Committee receive the report and the faculty response and reports such to Academic Board.

25 The audit team examined all the University's processes for approval, monitoring and review and, while it concluded that such processes make an effective contribution to the institution's responsibility for the management of academic standards, the team agreed with comments made in internal reports that such processes are very resource intensive. This led the team to question whether some of the purposes of the processes might be achieved in a less resource intensive way that avoids duplication (especially that not required by the University) without reducing the efficacy of those processes. Therefore, the team recommends that the University consider the desirability of reflecting on the balance between the effectiveness of its processes for quality management and the burden those processes may place on staff.

26 The University operates a two-tier structure of examining. A chief external examiner of a modular scheme is responsible for ensuring that the assessment process has been carried out fairly and rigorously, whereas a field external examiner has responsibility for security and comparability of standards at subject/module level. The University clearly sets out the criteria for the appointment and the roles and responsibilities of both. External examiners are nominated by faculties and appointed by Academic Board. Reports are received by Academic Registry and faculties. Academic Registry produces an annual report for the Quality and Standards Committee that identifies issues and good practice. Faculties report their responses to external examiners' reports via annual monitoring. The audit team concluded that the University's processes for external examining were rigorous and make an effective contribution to assuring the academic standards of programmes and awards.

27 The University states that its approach to curriculum design, approval, monitoring and review is rooted in the Academic Infrastructure. The evidence seen by the audit team in respect of approval, Internal Academic Review and annual monitoring clearly demonstrated the use of *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ), subject benchmark statements and action taken as a result of professional body visits. In addition, the team saw examples of how the *Code of practice* had been used as a benchmark for the review and development of its policies and processes. The team considered that the institution's use of the Academic Infrastructure and other external reference points was effective.

28 The University's Academic Regulations and Procedures provide clear and comprehensive guidance relating to awards of the University, credit and assessment. The regulatory framework was revised for the 2008-09 session, with the aim of codifying existing documentation into a single point of reference. Any changes to regulations are approved by Academic Board. The regulations include the University Assessment Policy, which explicitly refers to the *Code of practice* and which places prime responsibility for devising and implementing assessment strategies with faculties. Internal Academic Review specifically looks at assessment criteria and marking guidance. Student handbooks seen by the audit team refer students to the relevant academic regulations. The timeliness and quality of feedback were identified as issues by the students in the student written submission. The joint Learning, Teaching and Assessment Committee/Quality and Standards Committee Scrutiny Group presented a paper to the Quality and Standards Committee which identified a number of issues of good practice in relation to assessment timing and content, and had been identified through annual monitoring, internal academic audit and external examiners' reports. However, the University still recognises that assessment is still an issue in the National Student Survey. Notwithstanding this, the team concluded that, overall, the University's arrangements for the assessment of students were effective in relation to the maintenance of academic standards.

29 The University's procedures require that the annual monitoring of provision and internal academic review be informed by statistical data. The faculty overview reports presented to the Quality and Standards Committee and the underlying scheme and award reports, seemed to the team to be variable in their production and analysis of statistical data. However, the team also noted that in the annual monitoring and evaluation reports of two faculties, issues had been raised in respect of access to data by scheme and award boards. The Learning and Teaching Development Plan for 2008-09 also identified statistical data as a key priority for the University.

30 While noting the concerns above, an analysis of faculty and university-level committees revealed to the audit team consideration of data as part of routine business. In addition, the team noted that Academic Board had approved receipt of an annual report entitled Institutional Oversight of Academic Standards and Quality which would give the Board access to detailed data and a timetable of when such would be considered. This has been facilitated by the prioritising of the Planning and Business Intelligence Unit to produce management information to support key performance indicators and to underpin institutional quality management and enhancement processes. As a result, the team was able to confirm that the University's use of statistical data is effective in assuring the academic standards of programmes and awards.

31 Overall, the audit found that the University's management of academic standards is robust and operating as intended. The application of the institution's regulations and policies is largely consistent and the associated guidance reflects consideration of the elements of the Academic Infrastructure. There is effective use of external input in approval and review processes and effective use of management information in the establishment and maintenance of the academic standards of awards. There is also strong and scrupulous use of external examiners in the summative assessment of provision. All of these features support a judgement of confidence in the soundness of the University's current and likely future management of the academic standards of its awards.

Section 3: Institutional management of learning opportunities

32 As noted above (paragraph 27), the audit team saw examples of where the *Code of practice* had been used as a benchmark for the review and development of new policy. Examples given included the University's Research Degree Programmes Code of Practice 2006, which draws heavily on the *Code of practice, Section 1*. It also illustrated how the UWE Federation Code of Practice and the Academic Regulations and Procedures used the *Code of practice, Section 2: Collaborative provision and flexible and distributed learning (including e-learning)* as its reference point. The review of the assessment feedback policy took as its starting point the *Code of practice, Section 6: Assessment of students* and, as a result, the policy on student minimum entitlement to feedback on assessed performance was introduced in February 2006, and was the focus of Internal Academic Audit 2007-08.

33 All procedures in relation to approval and review of programmes are clearly documented in the Academic Regulations and Procedures, which are supplemented by clear and helpful Registry guidance. As also noted earlier, both processes involve external panel members whose role is clearly defined. While the regulations define the role of faculty boards in relation to monitoring and evaluation, together with the evidence which should be contained in such monitoring, the audit team found that the programme reports attached to the faculty summary reports presented to the Quality and Standards Committee were very diverse, particularly in their analysis of statistical data (see paragraph 29).

34 The Academic Regulations state that the emphasis of Internal Academic Review 'should be on the evaluation of student achievement of the appropriate academic standards, and of the learning opportunities offered to students to support their achievements'. The criteria for review and documentation required are clearly specified. Faculties have authority to modify approved modular and non-modular programmes, awards, modules and units of study. The regulations stipulate clear criteria and processes for such modifications, which must include external scrutiny and consultation with students.

35 The audit team noted that there was no University process for the closure of programmes but did see examples of how programmes had been closed in the past and the faculty processes involved. In all cases, the decision to close a programme had been taken by the faculty executive, reporting into the University. In one case, students had been involved in the decision and in another the faculty concerned stressed that the student experience was a priority during the period in which the programme was closed. While the team saw no evidence that the student experience had been compromised in any of these cases of closure, it felt that the University may wish to consider whether a written policy would ensure consistency of practice and assure the University that the student experience is maintained appropriately through closure.

36 The audit team found that issues raised by students informed decision-making at all levels of the monitoring and evaluation process as well as internal review and audit processes. Extensive consideration is given to the outcomes of both the National Student Survey, and the University's own annual internal student satisfaction survey, which was introduced in 2001. Postgraduate students complete either the Postgraduate Research Experience Survey or the Postgraduate Taught Experience Survey, as appropriate. Each faculty has a committee that focuses upon all aspects of the student experience and there is a significant number of student representatives on these committees.

37 The audit team noted that there is not a standard University module questionnaire and that faculties managed their equivalent of the student experience committee in slightly different ways. The team found that the University's arrangements for student feedback are effective.

38 There is a high level of student representation throughout the committee structure and student experience committees have been introduced at both institutional and faculty levels. Student representatives have been closely involved in the development of policy and procedures and the Students' Union has been closely involved at all stages of planning for the University's major new site development at Frenchay. The audit team found the University's commitment to student representation and the effective engagement of students in the development of policy and practice to be a feature of good practice.

39 The University's Strategic Plan commits the institution to ensuring that the curriculum continues to be properly informed by research, which is confirmed in supporting strategies and action plans. The University has formally defined the role of a 'UWE Academic' as one who engages in subject, professional and pedagogic research as required to support teaching activities and to research teaching practice in ways appropriate to level and role.

40 Students who met the audit team spoke positively about the ways in which their teaching was informed by research. However, staff indicated that, while teaching was enriched by discipline-based research, there was limited familiarity with the broader concept of research-informed teaching. An internal network has been established to share and disseminate good practice, but the view of the team was that stronger central coordination, guidance and support would enable a more effective cross-institutional network to be developed to foster a more informed approach to the development of learning and teaching with enhanced staff support and guidance (see paragraphs 54 and 55).

41 At the time of the audit, the University offered a limited amount of flexible and distributed learning but a draft plan had been developed for technology enhanced learning. Students who met with the audit team noted the value of support offered through the University's virtual learning environment but also highlighted the variability of staff use in terms of both extent and quality. A central E-Learning Development Unit has been established to provide guidance and support. Staff told the team that the Unit was beginning to work closely with faculty staff.

42 The University had, at the time of the audit, relatively little work-based learning provision. However, in view of the anticipated growth in this area, the University was in the process of revising its work-based learning plan, originally introduced in 2003, to reflect current developments in the field and the growth of vocationally relevant qualifications, and to incorporate the *Code of practice*.

43 The University's Learning, Teaching and Assessment Strategy aims to develop inclusive, flexible and accessible curricula, learning spaces and resources that enable personalised learning in-campus, placement and work-based settings. The quality of learning resources is considered at the proposal stage for all new programmes. It is also regularly evaluated through the annual monitoring and evaluation and Internal Academic Review processes from which appropriate actions are identified in institutional and faculty plans.

44 Students expressed their praise for the library resources at the University, in particular the 24-hour opening of the main campus library and the quality of service delivered by library staff. However, students did raise concerns about difficulties in accessing computers, a lack of group working spaces and issues around timetabling. The University has responded to these concerns by establishing a group that has student representation specifically to explore these issues and to consider appropriate strategies to deal with them.

45 As noted in paragraph 9, the University is planning a major redevelopment of the main campus, with the primary objective of enhancing the academic and social experience of students. The Students' Union has been closely involved in the planning process. It is the view of the audit team that the institution's arrangements for resources for learning are effective.

46 Admissions procedures for undergraduate and postgraduate taught provision are managed centrally by the Admission and International Recruitment Service, while admissions for postgraduate research students is managed by Research Degrees Committee. These arrangements ensure consistency and that appropriate training is available for all staff involved in student admissions.

47 In 2006, the University introduced the Student Experience Programme which aims to provide institutional-level leadership, coordination and management of a number of connected initiatives designed to enhance the student experience. These include the 'Welcome' project encompassing induction and other critical points throughout the whole student journey; the Graduate Development Programme, which focuses upon the development of study skills and personal development planning; the Employability Project; the development of the University Charter; and Peer Assisted Learning. The programme is coordinated by the Dean of Students and is overseen by the Student Experience Executive, which has representation from each of the faculties and student representatives. It was evident to the audit team that considerable investment of time and resource had been made in introducing the programme to first-year students and that it has had a major profile in annual monitoring and evaluation processes at faculty and institutional levels. The Graduate Development Programme is being extended to later programme stages, where it will have a particular focus upon employability skills. The team found that the Student Experience Programme has made a positive impact upon the quality of the student learning experience even though the programme is at an early stage of development. In particular, it found that the student welcome weekend and student portal developments had been very successful in the eyes of the students. The team found that some University initiatives under the Student Experience Programme that support key aspects of the student learning experience to be a feature of good practice.

48 Faculty student advisers have been appointed in each faculty to provide non-academic support and guidance to students. The advisers, who are trained for the role and, network across faculties. Their impact was commented upon positively by students who met the audit team.

49 The audit team met students taking full and part-time, undergraduate and postgraduate taught programmes all of whom stated their awareness of and satisfaction with the range of support and guidance available to them both centrally and in the faculties.

50 It is the view of the audit team that institution's arrangements for student support are effective. This included support from the Careers Development Unit, which has developed an electronic employability learning tool for use in level 2 of the Graduate Development Programme.

51 Staff support is managed through a devolved and diverse set of arrangements at central and faculty level. The University induction process and its supporting website provide appropriate information and guidance for all categories of new staff. The University's appraisal system, which is managed at faculty level, operates on a two-year cycle and incorporates peer observation.

52 The University provides specific support programmes for different categories of teaching staff. The successful completion of the Academic Development Programme, which is accredited by the Higher Education Academy, is a probationary requirement for new teaching staff. Specific provision is also made for staff with more limited teaching responsibilities.

53 There is no institutional scheme for recognising and rewarding excellence in teaching. The University acknowledged that there was insufficient internal recognition and reward for outstanding teaching and that it was, at the time of the audit, exploring ways in which this could be introduced. The audit team agreed, which led it to recommend that the University explore means of recognising and rewarding teaching excellence at institutional level.

54 Centrally-led staff development activity for learning and teaching revolves around areas in which there is institutional strategic steer. Major developmental workshops were held in 2007-08 and 2008-09 on priority areas including assessment and feedback, the student experience, technology enhanced learning and a programme of workshops to support staff involved in curriculum design. The University sets aside four institutional staff development days which are used in ways determined by individual faculties. However, the need has been identified for more effective sharing of good practice both within and across faculties and for better integration of central and faculty-based staff support, with the draft Learning and Teaching Development Plan recommending the establishment of a central Learning and Teaching Development and Innovation Unit.

55 It is the view of the audit team that the University's arrangements for staff support and development are reasonably effective. However, the team felt that this could be improved and considered it desirable that the University consider ways of enhancing the integration of central and faculty support and guidance for staff in respect of learning and teaching.

56 The audit team found that the University's systems for the management of learning opportunities were broad in scope, fit for purpose and operating as intended. The University engages well with the Academic Infrastructure and other external reference points. There is an extensive framework for student participation in quality management and enhancement and students are involved in policy development. Resource allocation procedures are effective, as are the University's arrangements for student support. Students are well provided with resources for learning, and there are effective arrangements for staff development and support, although there is some scope for improvement. These features support a judgement of confidence in the soundness of the University's current and likely future management of learning opportunities.

Section 4: Institutional approach to quality enhancement

57 Enhancement of the student experience is the main goal of the University's Strategic Plan. Related strategic initiatives include plans to consolidate the University onto one campus with better facilities; redevelopment of support services for staff and students; development of research and knowledge exchange networks; and internationalisation. Within the Quality Management and Enhancement Strategy and Framework, enhancement is defined as 'the implementation of *deliberate* processes of change intended to improve students' learning experience in higher education and to respond to the changing needs and interests of stakeholders'. The close relationship between the Quality and Standards Committee and the Learning, Teaching and Assessment Committee is intended to ensure a quality management focus on enhancement of learning, teaching and assessment. A collegiate approach is encouraged and is evident in the Internal Knowledge Exchange Networks and in discussion papers presented to committees.

58 The University's approach to enhancement is evident in a range of Student Experience Projects; the way that the University prioritises developments in learning and teaching; the University's Code of Practice for Postgraduate Research Degree Programmes, and the concept of internal knowledge exchange networks.

59 The University has clearly identified enhancement of the student learning experience as being core to its mission and enhancement has been a key driver of its strategic thinking. Although the University's approach has led to identifiable enhancements, its full potential has yet to be realised.

Section 5: Collaborative arrangements

60 After a period of cautious policy in relation to collaborative activity, the University has entered a phase of relatively rapid growth, with plans to increase provision further, internationally and in the UK. The University has adopted an Internationalisation Strategy of which international partnerships form a part.

61 The University's collaborative provision falls into four broad categories: UWE Federation partnerships, other UK partnerships, international partnerships and the recently validated, but not yet operational, 'Shell Award Framework'. Although the essence of this framework is credit recognition and transfer, it could involve contractual relationships with partners.

62 The University's typology of collaborative provision comprises credit recognition; progression agreement; full and part franchise; top-up; split master's; dual awards; joint degrees, and staff/student exchange agreements. Although the number of partnerships is not large, the range of contractual agreements is wide, which brings a concomitant need for clarity about the requirements for managing particular types of partnership.

63 At the time of the audit, there were 15 partnerships based in the UK and 12 overseas, either active or close to starting, which between them covered some 150 awards. Some partnerships cover a substantial number of awards, in particular Hartpury and Bristol Old Vic Theatre School. The University's register of collaborative provision is regularly updated and noted by the Quality and Standards Committee but is not publicly available on the University's website.

64 The UWE Federation has grown rapidly in the three years since its inception in 2006. An academic agreement is developed with each partner to capture responsibility for particular functions. The academic agreement is supported by schedules including a service schedule to ensure student access to student services offered by the University. Annual operating agreements detail clearly the mutual responsibilities of partners. Discipline networks have been established over the last year, which the audit team saw as emergent good practice. There is evidence of effective overall management of the UWE Federation, and examples of good communication and active staff development with certain individual colleges, less active engagement with others. The University maintains clear oversight of the UWE Federation, as it evolves.

65 Non-UWE Federation UK partners are managed and monitored individually. International partnerships are overseen by the Internationalisation Strategy Group. The University plans to establish an International Development Office, part of the responsibilities of which will be to support the operation of international partnerships.

66 The innovative Shell Award Framework, which includes collaboration and credit exchange/exemption agreements with educational and employer partners, has considerable implications for the management of standards and the quality of student experience and anticipates radical regulatory changes. The audit team supports the University's analysis that any large-scale Shell Framework activity will present challenges to the current infrastructure used to support collaborative activity, in particular, monitoring and reporting arrangements, information technology, student tracking, data production, student support and guidance, and significant modifications to assessment regulations.

67 The University states that faculty responsibilities for the management of quality and standards are expressed in each faculty's quality assurance processes. The audit team found it difficult to gain conclusive evidence of the means or effectiveness of local processes with respect to collaborative provision, largely because faculty arrangements differ from each other and there is no institutional map of how faculties manage that provision. Local arrangements are therefore generally not visible beyond the faculty and there is little evidence of mutual understanding across the University apart from UWE Federation networks. The team found no evidence to suggest that there were significant problems with faculty arrangements. However, as those arrangements are not yet benchmarked against a complete set of University expectations specific to collaborative provision, the team felt it would be difficult for the University to assure itself that arrangements are sufficient.

68 The UWE Federation has a Code of Practice, but there is no approved collaborative handbook or equivalent for the University. A Collaborative Provision Workshop in 2008 resulted in an action plan that highlighted the need to codify collaborative arrangements. Specific collaborative responsibilities are identified for UWE Federation partners in Annual Operating Agreements, for international collaborations in Memoranda of Agreement, and the Academic Regulations and Procedures define such processes as due diligence and approval, although not for closure of partnerships. The audit team noted that the University had begun the task of codifying regulations, protocols, and roles relating to collaborative provision. In the team's view, this would contribute to achieving greater clarity and securing better oversight of collaborative provision. Consequently, the team advises the University to complete the task of codifying the regulations, responsibilities, protocols and roles relating to collaborative provision.

69 At the time of the audit, the University had recently disbanded a Collaborative Provision and Partnerships Committee. The audit team was therefore interested in the extent to which collaborative activity was actively considered in the major University committees. The availability of information about collaborative activity presented to senior committees over the two years prior to the audit was variable and, on the basis of the minutes, there was less evidence of the deliberative approaches to collaborative provision that had characterised the previous dedicated committee.

70 The due diligence process leading towards Affiliated Institution status is generally strong. The process from planning to visit to approval to memorandum of agreement is well conducted with sufficient evidence and external expertise. Reviews of collaborative provision are generally well conducted, are sufficiently evidence-based, and use external expertise appropriately and are reported into relevant committees.

71 As a part of the 2007-08 Annual Monitoring and Evaluation process, faculties were asked to reflect explicitly on taught provision leading to a UWE award that is delivered in whole or in part by an affiliated institution in the UK or internationally. The audit team was not always able, on the evidence provided, to find how actions arising from individual reports are subsequently tracked and recorded by faculties.

72 Information drawn from Internal Academic Review and other sources of evidence is used to inform the Learning and Teaching Development Plan. The latest draft available at the time of the audit included an annex detailing faculty issues requiring consideration and action, including comments on collaborative provision. There had been no institutional overview report on collaborative activity since 2006. The audit team felt that the University may wish to consider whether Academic Board might find it helpful to receive a dedicated overview report on all aspects of collaborative provision.

73 Collaborative provision is generally monitored and managed in such a way as to assure standards and quality. In particular, the different forms of overview of Annual Monitoring and Evaluation reports, and the reports of internal academic reviews, reassured the audit team that the University was acting to monitor collaborative provision and identifying actions to be taken. The team also found that the University engages fully with the Academic Infrastructure. In general,

the University's central processes for approving and reviewing partnerships are strong and visible. However, faculty, school and department arrangements are less visible and more varied.

74 The audit team found no visible coordinated University management or monitoring of provision for collaborative provision as a whole, though most elements of provision are coordinated separately through the UWE Federation and Internationalisation Strategy Group. It is the team's view that, as the University moves towards a larger and more complex collaborative portfolio, a more integrated, coherent approach to strategy and quality assurance will be required. The reports of previous institutional audits, going back nine years, drew attention to the virtue of managing UK and overseas collaboration within a single structure and for clear direction to faculties over their responsibilities. The team therefore advises the University to strengthen the means by which the University oversees and manages its collaborative activity as a collective entity.

Section 6: Institutional arrangements for postgraduate research students

75 The University, which claims to be one of the fastest growing new universities for interdisciplinary collaborative research, has established three cross-disciplinary research institutes, and intends to foster research activity around areas of strength, as indicated by the outcome of the 2008 Research Assessment Exercise. In 2006-07, there were 189 full-time and 221 part-time postgraduate research students, plus 47 part-time professional doctorate students.

76 As noted in paragraph 13, the relevant standing committees of the Academic Board are the Research Committee, Research Degrees Committee, and Research Degrees Examining Board. There is also a Research Ethics Committee.

77 Responsibility for operational management of all aspects of postgraduate research student experience is devolved through faculty boards to faculty research degrees committees. The University has an excellent Code of Practice for Postgraduate Research Degree Programmes that specifies its requirements and regulations and is aligned with the *Code of practice, Section 1*. Faculties are at different stages in matching their practices to the University's Code and there are plans to audit these arrangements in 2009-10.

78 The requirements for a supportive research environment are clearly specified in the University's Code of Practice. Arrangements, which are at the discretion of the faculty, were described by students as variable. Graduate schools and dedicated administrative support are generally in place and, in some cases, students confirmed active programmes of research seminars and opportunities to attend conferences. However, other students did not share this experience, reporting disappointment and a feeling of isolation. The Research Degrees Committee monitors the research environment and has noted variations by faculty and site.

79 Thorough arrangements for selection, admission and recruitment are described in the University's Code of Practice. Since QAA's Review of postgraduate research degree programmes in 2006, the University has introduced a mandatory training requirement for chairs of research degree student recruitment panels. As only 16 per cent of supervisors have attended this training, recruitment panels rely on a small number of trained chairs. Research students indicated that the quality of induction arrangements varies from informative and helpful briefing sessions using a comprehensive Graduate School Handbook to situations where students said they had not had an induction.

80 Faculty research committees are responsible for ensuring that supervisory teams for postgraduate research students comprise at least two suitably qualified and experienced supervisors. Two students were unaware that they had more than one supervisor, which suggests that the arrangements are not working as specified in the University's Code of Practice. A three-day basic training programme had been completed by only 21 per cent of current research supervisors. A similar number (23 per cent) had attended the most recent annual research supervisor away day for updating and sharing of good practice. The audit team was advised that support for supervisors included mentoring and bespoke training.

81 All full-time postgraduate research students are required to complete a progression examination towards the end of their first year of study (pro rata for part-time students). Careful progression monitoring of individual students is undertaken by faculty research committees, using a Research Student Progress Report for each student, written by the supervisory team and individual student. Oversight is maintained through the Research Degrees Committee using reports from each faculty. The University has identified a need to improve the quality of its management information to enable more effective monitoring of recruitment, progression and completion rates for postgraduate research students.

82 A training needs analysis is a required part of the formal registration process to be conducted within six months of the start date for a postgraduate research student. However, postgraduate research students were unable to confirm that the nature of this analysis matched arrangements described in the University's Code. Skills training is available at institutional and faculty levels and there is a regulatory requirement that all students pass an assessed research training programme of 60 credits that is intended to be matched to their needs.

83 The UWE Code of Practice clearly specifies arrangements for collecting student feedback. Apart from the Postgraduate Research Experience Survey, postgraduate research students who met the audit team expressed limited recollection of such formal arrangements. One student reported dissatisfaction with the extent of subject expertise among the supervisory team. The Research Degrees Committee considered findings from the Postgraduate Research Experience Survey for the two years preceding the audit, however, consideration at faculty level had been minimal. Most students expressed that they felt able to discuss any concerns with their supervisory team and professional administrators.

84 Assessment of postgraduate research students is managed by the Academic Registry on behalf of Academic Board under arrangements that are clearly presented in the University's Research Degree Regulations and Code of Practice. Examiners are nominated by directors of studies, approved at faculty research degrees committees, and formally confirmed by the Academic Registry for Academic Board. Members of the supervisory team or any collaborating partners cannot act as internal examiners. Independent chairs of viva voce examinations receive mandatory training, and training for internal examiners, while specified in the Code of Practice, was not evident to the audit team. Research Degrees Examining Board advises Academic Board which students have fulfilled the requirements to receive an award. Clear procedures for formal re-examination, for resolving problems and academic complaints are given in the University's Code of Practice. However, the students that the team met had little knowledge of the arrangements for complaints, appeals, examination or of the institution's Code of Practice.

85 Students reported variable experiences in relation to publication, funding, provision of learning resources and support. This suggests the need for greater consistency in how research supervisors implement section 9 of the UWE Code of Practice. University-level training and support is available on a voluntary basis for postgraduate research students with teaching duties. This was described as valuable by students to whom this was relevant. The student written submission indicated that participation by postgraduate research students in quality management and enhancement arrangements was minimal, which was further confirmed by postgraduate research students who met the audit team.

86 In summary, the audit team concluded that the arrangements for postgraduate research students at UWE were, in general, appropriate. The evidence considered by the team led it to conclude that the arrangements for postgraduate research students, including those for support, supervision and assessment, were effective and fully met the expectations of the *Code of practice, Section 1: Postgraduate research programmes*. However, the team found a number of examples of variability of practice and therefore advises the University to ensure greater consistency in the operation of arrangements for postgraduate research students, as described in the University's Code of Practice, and communicate its policies and procedures clearly to students.

Section 7: Published information

87 The audit team examined published information including University-wide policy and procedural documentation; faculty documentation; course handbooks; regulations; the University's website and intranet; prospectuses; and committee minutes.

88 Through its website, the University publishes a substantial and easily accessible range of materials, including a clear set of information about the University, its policies and strategies and information about academic and administrative services. It also contains information intended to be useful for particular target audiences, including future students, alumni, businesses and other external organisations, and schools and colleges. Information relating to arrival and induction is also available online. Applicants have access to a personalised UWE Welcome Web page, which provides information relating to the progress of the application and about arrival and induction processes.

89 Editorial control of prospectuses is exercised by Marketing and Communications with input from faculties and services as required. Faculties and central professional services are responsible for the accuracy and completeness of their websites. Marketing and Communications has oversight of branding of the website.

90 The University's portal, 'MyUWE', is seen as useful and informative by staff and students. The virtual learning environment, recognised by staff and students to be an important and improving service, provides a variable range of information and guidance within module sites.

91 The University approves collaborative partners' publicity material by persons identified as being responsible in Academic Agreements. The University's website does not, however, contain the University's register of collaborative provision.

92 Programme specifications are clearly available on the website. Course handbooks are also online. The audit team's study of a range of handbooks confirmed that handbooks, although they vary in quality, contain essential information for students. The University Student Handbook, reviewed annually, also contains essential information. Students confirmed the usefulness of these documents. Regulations are clearly available online (as is a facility that enables students to calculate their progress towards a degree classification) and in handbooks.

93 The results and responses to student surveys are made available to students, although external examiners' reports and programme annual reports are not yet widely available to student representatives. The University plans to make external examiners' comments available to student representatives in 2009-10.

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

Section 8: Features of good practice and recommendations

Features of good practice

95 The audit team identified the following areas of good practice:

- the University's commitment to student representation and the effective engagement of students in the development of policy and practice (paragraph 38)
- University initiatives under the Student Experience Programme that support key aspects of the student learning experience (paragraph 47).

Recommendations for action

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

97 Recommendations for action that the team considers advisable:

- reconsider its timetable for Internal Academic Review, prioritising those areas which have fallen outside the University's stated timeframe (paragraph 23)
- complete the task of codifying the regulations, responsibilities, protocols and roles relating to collaborative provision (paragraph 68)
- strengthen the means by which the University oversees and manages its collaborative activity as a collective entity (paragraph 74)
- ensure greater consistency in the operation of arrangements for postgraduate research students as described in the University's Code of Practice, and communicate its policies and procedures clearly to students (paragraphs 81-83, 85 and 86).

98 Recommendations for action that the team considers desirable:

- reflect on the balance between the effectiveness of its processes for quality management and the burden those processes may place on staff (paragraphs 16, 19, 20 and 25)
- explore means of recognising and rewarding teaching excellence at institutional level (paragraph 53)
- consider ways of enhancing the integration of central and faculty support and guidance for staff in respect of learning and teaching (paragraph 55).

Appendix

The University of the West of England, Bristol's response to the Institutional audit report

The University of the West of England welcomes the audit team's confidence judgements in the management of academic standards and the quality of learning opportunities and particularly welcomes those features identified as good practice:

- the University's commitment to student representation and the effective engagement of students in the development of policy and practice
- university initiatives under the Student Experience programme that support key aspects of the student learning experience.

The Institutional audit provided the University with a timely opportunity to reassess its understanding of managed diversity and to debate the strengths and weaknesses of current arrangements. The Institutional audit has contributed to the University's ongoing reflections about the institutional approach to quality management and enhancement. The preparation for, and the outcomes from, Institutional audit have reinforced the University's understanding of its strengths and supported the institution's own identification of areas that would benefit from development to further enhance academic standards, learning opportunities and the student experience.

The University is already responding to a number of the audit teams' recommendations. The University's Learning, Teaching and Assessment Committee will progress the recommendations surrounding the enhancement of the institutional quality management framework for all UK and overseas provision. The University's Research Committee will progress the recommendation regarding implementation of the postgraduate research code of practice. The University's Academic Board will monitor progress on the institutional action plan arising from the Institutional audit.

The Quality Assurance Agency for Higher Education

Southgate House
Southgate Street
Gloucester GL1 1UB

Tel 01452 557000
Fax 01452 557070
www.qaa.ac.uk

RG 516 07/09