



QAA



Institutional audit

Southampton Solent University

DECEMBER 2008

© The Quality Assurance Agency for Higher Education 2009

ISBN 978 1 84482 931 6

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 Education and Skills (now the Department for Innovation, Universities 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 and the report, without the annex, are published in hard copy. 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 Southampton Solent University (the University) from 1 to 5 December 2008 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 Southampton Solent 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 found that the University has a range of activities in place and under development which constitutes an effective institutional approach to quality enhancement.

Postgraduate research students

The audit found the University's arrangements for postgraduate research students met the precepts of the *Code of practice for the assurance of academic quality and standards in higher education (Code of practice), Section 1: Postgraduate research programmes*, and are effective in securing academic standards and the quality of students' learning opportunities.

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 as being good practice:

- the rigorous and systematic approach taken to reviewing the appointment of external examiners across the University in order to ensure independence and to avoid reciprocity
- the development and continuing enhancement of the HelloUni site as a support for students during the recruitment process, particularly prior to their arrival at the University
- the role of the student support network officers as an effective interface with students in the coordination of student support and sharing of good practice across faculties

- the training of staff in supervision of research students as part of the strategy to increase the pool of potential supervisors.

Recommendations for action

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

The team advises the University to:

- review and revise the procedures for programme approval with particular reference to the determination of the form of approval to be undertaken and the nomination and approval of internal and external panel members
- review and revise its assessment procedures to ensure greater consistency in the accuracy of recording and reporting of marks
- provide formal training in research methods for all part-time postgraduate research students
- provide a compulsory programme of training for postgraduate students prior to them undertaking teaching and/or assessment of students
- formalise the arrangements for faculty scrutiny and ethical approval of research projects and for reporting the outcomes to the University Ethics Committee.

It would be desirable for the University to:

- revise its procedure for monitoring the cumulative effects of course and programme, course and unit modifications to ensure a consistent approach to determining the need for programme re-approval
- revise the procedure for amending examination board decisions following the Chair's action in light of appeals, to ensure the timely and full involvement of external examiners
- ensure that the procedures for the approval and review of collaborative partners include evaluation of the learning environment by professional services, such as the Learning and Information Service, in addition to academic staff
- revise the information on extenuating circumstances provided to students to ensure that it accurately reflects the implementation of the policy.

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

The audit found that the University 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 Southampton Solent University (the University) was undertaken during the week commencing 1 December 2008. 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 Emeritus Professor Brian Anderton, Dr Catherine Baxter, Dr Keith Elliott, Mr Tim Maxfield, auditors, and Miss Rachel Lucas, audit secretary. The audit was coordinated for QAA by Professor Chris Clare, Assistant Director, Reviews Group.

Section 1: Introduction and background

3 The University assumed its present title in 2005 having been granted taught degree awarding powers in 2004 as Southampton Institute. It can trace its history back to the nineteenth century having been formed by amalgamation of art, technology and nautical colleges.

4 In 2007-08 the University had a total of 10,847 students; 10,130 undergraduate; 657 following taught postgraduate programmes and 60 postgraduate research students. Postgraduate research degrees are awarded by Nottingham Trent University. Academically the University is organised into four faculties. Research is located within all of the faculties and within five research centres associated with the faculties.

5 The University's mission, as set out in the Strategic Plan 2008-13 is the '...pursuit of inclusive and flexible forms of Higher Education that meet the needs of employers and prepare students to succeed in a fast-changing world'. The Strategic Plan identifies the University's ambition to extend its service to students and stakeholders as an accessible provider of industry relevant education that fosters employability.

6 Warsash Maritime Academy, which became a faculty in 2008, having previously been Warsash Maritime Centre, has its own campus beside Southampton Water. It delivers maritime education and training, a distinctive feature of the University's provision, and includes the bulk of the further education provision of the University.

7 The University has a small amount of local collaborative provision. It is in the process of extending collaborative provision to include overseas institutions. It also has a number of compact agreements with local schools and further education colleges.

8 The previous report in 2006, in lieu of Institutional audit, was based primarily on the reports of the application for taught degree awarding powers and university title. This resulted in a judgement of broad confidence in the University's current and likely future management of the quality of its academic programmes and the academic standards of its awards. There were no formal recommendations but areas of potential concern were raised in the report. These concerned, first, the ability of the Learning and Information Service to coordinate and innovate successfully in its many areas of responsibility. Second, the report raised concerns over the appointment of external examiners, their reporting and the analysis of feedback. The audit team found that both of these concerns had been addressed by the University.

9 The judgements and comments made in the present report also apply to the University's arrangements for the management of its collaborative provision, which was included in the present audit.

Section 2: Institutional management of academic standards

10 The University states that it has taken an evaluative approach to the assurance of the standards of its awards, including paying due regard to the Academic Infrastructure, published by QAA and the requirements set by professional, statutory and regulatory bodies (PSRBs) where relevant. The University sets out its policies in relation to maintaining and managing standards in

the Academic Handbook. The Handbook is subject to regular review and changes to it have been, as noted in papers seen by the audit team, subject to formal approval by Academic Board. However, the team noted that in some instances Academic Board has taken action to agree that the Dean of Academic Standards and Quality Service may act on behalf of the Board to agree further amendments to policies in the Academic Handbook in light of new or revised strategies such as the University Strategic Plan 2008-12 and its key academic strategies.

11 During the audit, the team was also provided with copies of the Operational Procedures and was advised that these documents, published separately on the staff portal and not as part of the Academic Handbook, set out the University's procedures developed by the Academic Standards and Quality Service; the Operational Procedures are the mechanism for implementation of the policies contained in the Academic Handbook. The Operational Procedures did not form part of the Handbook and had not been approved by Academic Board. Having considered the Academic Handbook and the Operational Procedures provided, the team formed the view that the Handbook does in fact contain procedural information (such as details of how panels are to be established) as well as policy, and that the Operational Procedures also establish certain important areas of policy which are additional to the policy statements included in the Academic Handbook.

12 The audit team encourages the University to revise its procedures for the development and publication of information relating to policies and procedures to ensure that Academic Board is able to formally approve all policies and procedures in a timely manner.

13 The University uses a process of 'Triennial Review' to evaluate the effectiveness of faculties in taking delegated responsibility for certain aspects of the processes of managing academic standards. Academic Board also receives annually from the Academic Standards and Development Committee a 'Review of Academic Standards and Quality'. This document provides Academic Board with a brief overview of the key points arising from the Committee's consideration of data relating to external examiners reports, PSRBs accreditation, degree classification statistics, and faculty reports from the annual programme monitoring process. It also provides a brief summary of the outcomes of the annual review of postgraduate research degrees (see Section 6) which is presented to Academic Board for its consideration and approval prior to submission to Nottingham Trent University as the validating higher education institute for postgraduate research degrees.

14 The Academic Standards and Quality Service supports the work undertaken to manage academic standards at faculty and university level by providing advice and guidance on the implementation of the University's procedures. At faculty level the faculty quality officers are responsible for providing day-to-day advice at local level and work closely with the associate deans (Enhancement) as well as with the Academic Standards and Quality Service staff.

15 The University operates a four-stage programme approval process with different models of panel event, which was implemented in 2006-07 following the introduction of new University-wide processes and procedures.

16 With the exception of certain aspects of the approval, monitoring and review of collaborative programmes (see Section 5), the new procedures have been delegated to faculties for implementation. Overview at university level is exercised through Academic Board and its subcommittees, through regular reports from the faculty boards and through the process of triennial review. The arrangements for programme approval and the requirements that need to be met at each stage of the process are described in the Academic Handbook, and further details of the procedures are provided by the Operational Procedures. The external reference points highlighted in the Handbook include benchmark statements, *The framework for higher education qualifications in England, Wales and Northern Ireland*, National Occupational Standards, and PSRB requirements.

- 17 The audit team was provided with a number of examples of documentation relating to programme approval. While in most cases the documentation met the University's stated objectives, the team concluded that there was not a full understanding of the various models of approval event among the staff, and that the membership of approval panels was not always consistent with the University's policies and procedures set out in the Academic Handbook and the Operational Procedures.
- 18 Having considered all of the evidence made available the audit team recommends that it would be advisable for the University to review and revise the procedures for programme approval with particular reference to the determination of the form of approval to be undertaken and to the nomination and approval of internal and external panel members.
- 19 Once a programme has been approved by the Academic Standards and Development Committee, it is not given a specified period of approval. Programme modifications may, however, be made subject to approval by the relevant faculty board on an annual basis as part of the annual programme monitoring process. The University does not set any limit to the number of changes that may be made to an approved course or programme, but notes that where 'significant' changes are to be made, the Associate Dean, Enhancement, may advise that re-approval is required. The audit team also noted that the University defines modifications in broad terms and there is no limit specified on the amount of change that can be made to a programme, provided that the faculties determine that such changes are appropriate.
- 20 The audit team noted the specific delegation of responsibility from Academic Board to the Academic Standards and Development Committee for 'the security and maintenance of academic standards'. Given the fact that there is no specified limit to the amount of change that can be made to a programme nor is there clarity about when a re-approval is required, the team recommends that it is desirable for the University to revise its procedure for monitoring the cumulative effects of programme, course and unit modifications in order to ensure a consistent approach to determining the need for programme re-approval.
- 21 The University's stated objective of annual programme monitoring is to evaluate, in a self-critical and developmental manner, the performance and effectiveness of a course/programme, and to determine further actions for enhancement.
- 22 Course/programme teams are responsible for implementing the process described in the Academic Handbook for annual monitoring. Each course/programme is evaluated against the objectives specified in the Academic Handbook and an action plan is produced. Information used to undertake this work includes evaluation of key performance indicators for each course or programme against University-wide statistical 'benchmarks'; feedback from students and from external examiners. Student representatives are invited to participate at school and faculty levels with the annual programme monitoring discussions and through this mechanism they have an opportunity to engage with external examiners reports.
- 23 The audit team was able to conclude from the examples provided at the audit, that annual programme monitoring was a thorough process that led to appropriate action plans being developed. The team also noted that where units, course or programmes were falling short of the University's benchmark key performance indicators, a detailed process of special monitoring takes place.
- 24 With effect from the academic year 2007-08, the University replaced the compulsory revalidation of courses/programmes with a new periodic academic review process. This involves a review of a school or a subject area on a six-year rolling cycle. The review panel incorporates at least two members external to the University and a nominee of the Students' Union. The audit team had an opportunity to review one example of periodic academic review and noted that the process was meeting its stated objectives.

25 In discussion with staff, the audit team learnt that periodic academic review provides a process whereby cognate groups of programmes or courses which have not accumulated significant amounts of changes since their approval can be reviewed and confirmed as fit for purpose. It also provides a mechanism for identifying those programmes which have accumulated significant changes since the date of their approval. As an outcome of periodic academic review, a separate process of programme re-approval can be required for any individual course or programme.

26 In addition to annual programme monitoring and periodic academic review, the University has, since 2005-06, undertaken a series of Academic Audits. These Audits focus on seeking to identify where academic policies or procedures might be improved and themes for the audits are determined by the Academic Standards and Development Committee. The Committee receives the reports from Academic Audit and recommendations are taken forward as part of the University's enhancement process (see Section 4).

27 The report in lieu of Institutional audit, published in 2006, identified the need for the University to take further action to ensure that the qualifications of external examiners were scrutinised more consistently, and that their reports were also always addressed fully. The University has taken action to introduce revised arrangements for considering nominations for external examiners through the External Examiner Scrutiny Group which scrutinises proposals coming from faculties, and makes recommendations on nominations to Academic Board. The University has also introduced revised external examiners' report forms and a four-stage analysis process for considering external examiners' reports, and reporting on outcomes is now in place.

28 An external examiners' conference is made available to all newly appointed external examiners and the University has a policy of ensuring that at least one of the two externals appointed to a range of cognate courses has previous experience of acting as an external examiner. The University has also created an external examiners' portal on its web pages on which details of regulation and assessment board procedures are provided.

29 The Vice-Chancellor reads and analyses all external examiners' reports (including those for collaborative provision) and writes to deans about matters of good practice as well as areas that require further development. Programme teams are required to respond to external examiners' reports and these responses are included in the action plans.

30 With respect to the appointment of external examiners, Academic Board receives a detailed report from the External Examiners Scrutiny Group on the institutions from which external examiners are drawn so as to ensure that, in accordance with the Academic Handbook, there should not be more than one external examiner from any one higher education institute within the team of external examiners; and that there are no instances where staff from the University are external examiners in the same school or department from which an external examiner is drawn.

31 The audit team concluded that the rigorous and systematic approach taken to reviewing the appointment of external examiners across the University in order to ensure independence and to avoid reciprocity is an example of good practice.

32 The Academic Handbook states that external examiners 'may' be consulted on the form and content of proposed examination papers, coursework and other assessments that count toward the award. The University had reviewed its policy relating to this matter and had decided that it would be appropriate to permit each faculty to determine its own approach. The audit team noted that the University's document describing 'the rights and responsibilities of external examiners' states that externals are asked to 'report to the University on the appropriateness and effectiveness of the assessments and make any recommendations for their enhancement'. The external examiners' report form requires external examiners to indicate under 'Information to Inform Judgements on Standards' whether or not they were consulted on any assessments.

33 Taking into account the evidence identified above, the audit team would encourage the University to ensure that it has a consistent approach to securing appropriate review of assessment briefs and examination papers by external examiners. Overall, however, the team concluded that the University makes strong and scrupulous use of independent external examiners.

34 The audit team was able to see a number of examples where the University has taken active steps to engage with the Academic Infrastructure. The University has drawn on a number of the sections of the *Code of practice* as part of its academic audit process. The team was also able to see examples of programme approvals and to confirm that the University is engaging effectively with these aspects of the Academic Infrastructure during that process to manage standards of its awards appropriately.

35 In October 2007, the University considered the *Standards and Guidelines for Quality Assurance in the European Higher Education Area*, published by the European Network for Quality Assurance in Higher Education, and concluded that its arrangements met the expectations of this document.

36 The audit team noted that the University's Strategic Plan identifies employability of its graduates as very important and that, where appropriate, courses should be designed to meet the requirements of relevant professional bodies with a view to seeking professional accreditation. The team sought evidence of how the University engages with PSRBs and found that the Academic Standards and Development Committee does receive reports from faculties about the engagement of courses and programmes with individual professional bodies and the outcomes of accreditation applications and monitoring visits. The team learned that at a recent meeting of the Committee, members were reminded that it had been agreed that 'Institutional (University) oversight of Professional Statutory Bodies was required and that a system should be established for the central collection and monitoring of PSB reports'. The paper acknowledged that the system was not working effectively and recommended that the current reporting arrangements needed to be reviewed.

37 In light of the University's own analysis that this is an area that needs further development, and the evidence provided to the audit team (including the lack of a clear process at university level for informing a PSRB about important modifications made to an accredited programme, which may affect statutory PSRB requirements), the team would strongly encourage the University to establish at university level a system for ensuring appropriate oversight of PSRB requirements.

38 The audit team also reviewed how the University formally considered the Foundation Degree review report in March 2006. It noted that reports were made to the Academic Standards and Development Committee and Academic Board although in some instances these were simply reports 'to note', rather than requiring specific actions. With the exception of a more detailed report made to the Committee prior to responding formally to QAA, there was no evidence of a full discussion of the issues. Given that QAA's report had provided a judgement of 'no confidence' in the quality of learning opportunities provided for students during the time of the audit, the team formed the view that Academic Board could have benefitted from discussing this matter more fully. Consequently, the team would urge the University to review how its formal committees with responsibility for quality and standards could engage more fully with external reports including those from PSRBs and QAA. This would help ensure that areas of good practice as well as areas for development are clearly identified, and that there is clear evidence of how such committees approve proposed action plans and monitor their progress.

39 The University's Academic Handbook includes a statement of the University's Assessment Policy which includes regulations governing all taught awards.

40 The University has developed its system for considering extenuating circumstances submitted by students. An academic audit of extenuating circumstances led to the decision to establish a system with a university-level extenuating circumstances panel considering all cases in light of agreed criteria. The panel includes a sabbatical officer of the Students' Union, and in discussion, the audit team was assured that confidential information is carefully managed and that if a student appeals against a decision made by the extenuating circumstances panel and seeks support from the Students' Union, a different Students' Union officer will support the student through the process. The operation of the extenuating circumstances policy is discussed further in paragraph 120.

41 The University's appeal process involves a two stage faculty and university-level process. The first stage is designated 'query' and the second 'appeal'. The University has considered its arrangements in light of the revised *Code of practice, Section 5: Academic appeals and student complaints on academic matters*, and made some changes to its procedures to reflect the revised guidance. The audit team recognised that the University has taken steps to engage with both QAA and the Office of the Independent Adjudicator guidance.

42 At faculty level, advice is provided through student support network officers and a standard pro forma is used in all cases. Annual statistics are presented to the Academic Appeals Committee on the number of 'queries' and 'appeals' received. The audit team reviewed this information and noted that in 2006-07, 682 queries were received; the highest number of queries (288) were accepted in relation to instances where there was a 'material and significant error in the recording and processing of assessments/results' and the next highest (206) 'procedures not conducted in accordance with current approved regulations or other irregularity concerned with the assessment process'. The team noted that the report that accompanied this analysis did not comment on what action the University intended to take to reduce such administrative and procedural errors being made in future. The team noted that, following appeal, changes to marks as a result of the Chair's action were not presented to the external examiners until the following assessment board.

43 The audit team considered the evidence available to it and formed the view that the University needed to reflect on whether queries reported to the University as 'material and significant error in the recording and processing of assessments/results' or 'procedures not conducted in accordance with current approved regulations or other irregularity concerned with the assessment process' support a conclusion that such matters were 'simple administrative errors'. The team therefore recommends that it is advisable for the University to review and revise its assessment procedures to ensure greater consistency in the accuracy of the recording and reporting of marks. The team also recommends that it is desirable for the University to revise the procedure for amending examination board decisions following the Chair's action in light of appeals, to ensure the timely and full involvement of external examiners.

44 The University described its use of 'standardised KPIs [key performance indicators]' to review the effectiveness of actions it takes to safeguard standards. The audit team was able to note the effectiveness of these arrangements as part of the annual programme monitoring process. The Annual Review of Academic Standards and Quality produced for the spring meeting of Academic Board also includes a presentation of progression statistics, retention and degree classification. Reference is made to Higher Education Statistics Agency benchmarks and how the University has performed against such measurements. The same report refers to statistical information arising from external examiners reports and the number of programmes which have PSRB accreditation. Reference is also made to the outcomes of the National Student Survey and internal student experience survey. The report also includes a brief reference to data in relation to the progression and award of degrees to postgraduate research degrees for reporting to Nottingham Trent University.

45 The audit team concluded that the University makes appropriate use of externally provided statistics including, for example, the Higher Education Funding Council for England's benchmarks on graduate employment, and the Universities and Colleges Admissions Service data. The Research and Information Unit draws on a number of external and internal data sources to provide a range of useful reports during each year that are considered at Academic Board and/or its subcommittees.

46 The overall conclusion reached by the audit team is that confidence can be placed in the soundness of the institution's present and likely future management of the academic standards of its awards.

Section 3: Institutional management of learning opportunities

47 As noted in Section 2, the University has taken careful steps to consider the Academic Infrastructure, and the audit team noted that the University seeks to ensure that its policies and procedures for managing academic quality as well as for the management of academic standards are aligned with the Academic Infrastructure. In common with the policies for managing academic standards, the policies for managing academic quality are also set out in the Academic Handbook and this is distributed widely across the University. The separately published Operational Procedures also cover arrangements for the management of quality.

48 The audit team found evidence that faculties provide regular reports to the Academic Standards and Development Committee on how they are discharging their delegated responsibilities for certain aspects of the management of academic quality. At university level (see also paragraph 36), the University recognises that there are less well developed systems for engaging with the requirements set by PSRB's with respect to the management of learning opportunities and for learning at university level of issues arising from those engagements.

49 The Academic Planning Committee has responsibility for 'considering and approving proposals to enter partnerships and proposals to offer provision through collaborative provision arrangements'. However, the audit team noted that Academic Board has responsibility for quality and standards including 'the content of the curriculum', 'academic standards and the validation and review of courses'; 'considering the development of the academic activities of the University and the resources needed to support them and for advising the Vice Chancellor and the Board of Governors thereon'. The University confirmed to the team during the audit that the responsibility for academic standards and quality lies with Academic Board. As a consequence, the team suggests that the University may wish to review the terms of reference for the Academic Planning Committee and Academic Board to make it explicitly clear where the responsibility for the approval of new courses/programmes, including those to be offered collaboratively, actually lies.

50 The University policy allows for appropriate involvement of internal staff and external experts to offer subject-specific guidance on quality as part of the programme approval process. However, as described in Section 2 (paragraphs 15-18), the audit team recommends, based upon the evidence made available to it during the audit, that it is advisable for the University to review and revise the procedures for programme approval, with particular reference to the determination of the form of approval to be undertaken and the nomination and approval of internal and external panel members.

51 In addition to its role in managing academic standards, periodic academic review involves a detailed consideration of whether the resources to support the programme(s) remain appropriate, and whether staff development, research and enterprise work has 'demonstrable links' to learning, teaching and curriculum. The outcomes of periodic academic review are monitored through annual programme monitoring. Periodic academic review is conducted by a panel which includes external members and internal members who are independent of the faculty that offers the programme(s) under review.

52 Where a decision is made to suspend recruitment to a course or programme or to withdraw a course or programme, the University has in place appropriate arrangements to ensure that where students have been offered a place on the relevant course/programme or where students are still enrolled on the relevant provision, the learning opportunities available to students are carefully managed as part of the process.

53 The University states that it places considerable emphasis on student representation and on listening and responding to the 'student voice'. In 2005, the University established a student feedback policy which incorporates three elements: a dialogue at unit level to identify any immediate learning issues raised by students; an end-of-unit questionnaire to collect quantitative and qualitative data to support unit development; and a unit report summarising student feedback from both of the latter elements and to identify any staff development needs that are indicated. Survey-burden has already been recognised by the institution, as exemplified in its adaptation of the student experience satisfaction survey methods to align more closely to the National Student Survey. In considering this, it was the audit team's view that the University should aim to embed and maximise the effectiveness of current feedback mechanisms before embarking upon any new and related initiatives.

54 As well as attendance on staff-student consultative fora, students attend meetings of Academic Board, the Board of Governors, and the Academic Standards and Development Committee, faculty boards, Research and Enterprise Committee, the University's extenuating circumstances panel and the Academic Appeals Committee. Members of the Students' Union also meet with the Vice-Chancellor on a monthly basis. Students also contribute to the process of periodic academic review. Not all of these meetings are well attended by student representatives and the University is taking steps currently to improve participation.

55 The briefing and training of student representatives is managed by the Students' Union, although the audit team found, from meetings with students, that they often entered into the role of representative with varying degrees of understanding of associated responsibilities. The University is currently addressing this, with additional guidance on role and responsibilities via the institutional virtual learning environment, myCourse. Despite some variation in practice regarding the administration of staff-student consultative fora, it is evident that annual monitoring processes draw heavily upon student feedback. The team was of the view that student representation is taken seriously by the University, but that it should ensure that all representatives are effectively briefed in their role and work, in conjunction with the Students' Union, to maximise student attendance and participation in these University processes.

56 Despite the efforts of the University to encourage student contributions to these processes, the student written submission stated that 70 per cent of student respondents felt that they did not feel part of the decision-making process at the University. This might be partly explained by the fact that many students were found to be failing to participate in online and other satisfaction surveys conducted by the University. There was also evidence that students were not aware of what happened to their feedback once it had been offered.

57 A variety of surveys are undertaken. The Solent University evaluation survey was first introduced University-wide in 2006-07. Response rates, however, remain fairly modest at 17 per cent (2008). The student experience satisfaction survey is administered by the University's Research and Information Unit to those students not included in the National Student Survey (years one and two) and who are registered to courses scheduled for periodic academic review in the following year. This data supplements the National Student Survey results, which are again analysed by the Research and Information Unit before reporting on to the Academic Standards and Development Committee.

58 The audit team noted the significant steps taken to collect feedback from students and to analyse this evaluative material through its committee structure.

59 The University has assumed a key focus upon employer engagement since the approval of the current Strategic Plan (2008-13). Aspects of this employer engagement include sandwich degrees and short-term placements/internships, sponsored students, employer fairs, short continuing professional development engagements for external clients, research and consultancy projects, staff participation in local employer forums, employer liaison panels, guest lectures, and student enterprise activities. The audit team found that there is also a good level of interaction, at local level, with external organisations and PSRBs in course development.

60 The Teaching and Learning Strategy includes a clear commitment to 'connecting theory and practice', with inputs from employers, a feature that is generally commended by external examiners. Employability skills are prominent in the strategic mission of the University and opportunities for placements (both short and longer-term) are available as optional entitlements within the design of many courses, as well as mandatory in others, for example, Foundation Degrees. The audit team was of the view, however, that these placements are yet to be embedded within the culture of the University, although good progress continues to be made.

61 There is an active advanced scholarship programme, which underpins this external engagement activity, with seminars and conferences covering a diverse range of areas. The University Research and Enterprise Strategy guides this activity, which articulates with the institutional Learning and Teaching Strategy. Faculties and services prepare an annual report to the Research and Enterprise Committee, to monitor progress against this strategy

62 External examiners comment favourably upon the 'industry relevance' of the curriculum. This connects with the University's strategic decision to align itself firmly with the Leitch report (*Prosperity for all in the global economy - world class skills, Final Report, December 2006*), specialising in employer engagement and knowledge transfer. In this context, the audit team noted that the University, in determining its priorities for the Strategic Plan (2008-13), has deliberately deferred a decision about seeking research degree awarding powers.

63 A key aim of the Teaching and Learning Strategy is to 'build and constantly renew a flexible learning experience that meets the diverse needs of students and their prospective employers'. To support this aim, a new institutional virtual learning environment (myCourse) has been developed by the Learning Technology Unit. A programme of staff development is in progress to support and extend e-learning/blended learning development. Where fully implemented, the virtual learning environment is regarded as an excellent resource by the students, although the audit team concluded, from discussions with staff and students, that coverage across the institution is still variable.

64 The audit team acknowledged the importance of e-learning and blended learning to the achievement of the University's strategic aims. Consequently, the team was of the view that the University will need to continue to ensure careful monitoring of all current and future planned provision in the area of flexible and distributed learning, particularly that which is delivered remotely.

65 The Learning and Information Service along with the Academic Standards and Quality Service has been a key driver of policy implementation and change in relation to the institutional management of the quality and enhancement of learning opportunities. The report, in lieu of Institutional audit (2006), had suggested that the broad remit of the Learning and Information Service team was challenging and perhaps rather too wide. However, in discussion with staff and students, the audit team heard how the University had invested in provision of expertise in virtual learning environment development and delivery and was reassured about the positive impact that the work of the Learning and Information Service is having on the student learning experience. The library is well-stocked and students studying with local collaborative partners do have access. Research students valued greatly the range of resources offered, and the interlibrary loan facilities are readily available and well-used. Subject librarians in the Learning and Information Service work closely with academic course teams to ensure that resources remain current and fit-for-purpose.

66 One-to-one study skills tutorials are available for students, together with a range of support measures for students with disabilities. A suite of online tutorials designed to improve academic skills has also been introduced and is available over the institutional virtual learning environment (Succeed@solent). This virtual learning environment also provides an academic skills help desk to strengthen existing face-to-face support available through information librarians. One other recent initiative is the 'HelloUni' web pages, designed to engage and advise prospective students prior to their arrival. The audit team was of the view that the development and continuing enhancement of the HelloUni site as a support for students during the recruitment process, particularly prior to their arrival at the University, was a feature of good practice.

67 In relation to personal development planning, Reflections, a tool designed to enable students to identify their own strengths and areas for improvement, is designed to enable students to reflect upon their own personal journey. It is introduced during spiral induction sessions where the students focus upon their expectations of their course with tutors. The audit team concluded from meetings with students, that the approach still requires some embedding as many students seemed unaware of its use.

68 The University is keen to support innovative approaches to Learning and Teaching through Teaching Quality Enhancement Fund projects, and other strategies, such as the appointment of curriculum fellows. Several innovative ideas have been trialled, such as the use of MP3 player equipment with Warsash Maritime Academy students, designed to support mobile learning.

69 The University performs well against national benchmarks for widening participation of under-represented groups, and continues to meet or exceed benchmarks for full time students in receipt of Disabled Students' Allowance. In a recent academic audit conducted by the institution, it was concluded that admission requirements for all courses in the sample were not correctly published on the University's website and that printed publications following programme approval or modifications lack clarity. Recommendations arising out of the academic audit included a full review of course marketing material to ensure that published information is complete and correct.

70 Student support network officers are present in each faculty, and are crucial to the system of student support. Their main responsibility is to offer advice and guidance to students regarding course and personal issues. The officers maintain cross-faculty links and also participate in a number of faculty and University-wide operational and strategic committees and working groups. The audit team concluded that the role of the student support network officers as an effective interface with students in the coordination of student support and sharing of good practice across faculties was a feature of good practice. Student support network officers also liaise closely with advisers in 'Students 1st', a University-based information centre offering advice and guidance on a range of support services.

71 Students generally valued the student portal, which not only gave access to essential course information, but also enabled students to ask questions at any time, with responses posted by the Students 1st information centre. The University careers and job shop advertises a range of work-based opportunities (placements) on its vacancy database. Student support from the University during placement was seen as a strength by students that the audit team met, although they felt that the promotion of placement opportunities, and the preparation of the students, could be improved.

72 Student support arrangements at Warsash Maritime Academy have now been brought into line with the rest of the University, with its own Student Support Office and Student Support Network. Other enhancements at the Warsash Maritime Academy include a twice-yearly 'freshers week' for newly enrolled students. The information made available to students in advance of their course was felt to be good.

73 Generally, students have a clear impression of what the University expected of them, and feel quite well prepared for study, although some adverse responses were noted regarding tutor availability, inconsistency in tutor expectations, and breadth of assignment briefs. Pass rates were often low, particularly at level two, and a fall in the percentage of students gaining good degrees, had initiated faculty-wide investigations. This finding accords with the Research and Information Unit research (2006) that student satisfaction declined as they progressed through levels. Targeted action by the University had led to a number of Teaching Quality Enhancement Fund enhancement projects to tackle these issues. External examiners have commented favourably on the innovative styles of assessment, currency and topical approach to assessment, as well as the usefulness of feedback to students. The audit team concluded from its meetings with students and inspection of documentation, that substantial support existed for students, although some variability in practice was detected across the institution, particularly in relation to support for assessment.

74 The University has a staff training and development plan, which was updated in May 2008 and a career development scheme (part of the Solent National Framework Agreement 2007) that aligns development of staff capacity and capability with the Strategic Plan. There is also a training and development forum, established in spring 2007, which guides and monitors progress against the plan. A new employee appraisal scheme was introduced fully in May 2008. The new scheme replaces the probationary requirement of all staff with a more positive focus on personal development. It also complements the annual survey of staff research, enterprise and professional development activity. There is no recognised staff promotion scheme, other than by vacancy, although the University does have a Professoriate scheme.

75 The audit team was of the view that while some of these newer arrangements, linked to the current Strategic Plan, were deemed appropriate and likely to add value, they would require some time to become embedded in practice when their impact would be more measurable.

76 There is a six-module leadership development programme for academic leaders, and a new Employment Policy training programme for managers. The University also has a Higher Education Academy (HEA)-accredited Postgraduate Certificate (PGCert) in Learning and Teaching in Higher Education, which is mandatory for new-to-teaching full-time staff, and is also available to part-time staff. A version of the PGCert in Learner Support was also available for administrative and support staff.

77 The overall conclusion reached by the audit team is that confidence can reasonably be placed in the soundness of the institution's present and likely future management of the quality of learning opportunities available to students.

Section 4: Institutional approach to quality enhancement

78 Although there is no explicit reference to enhancement in the Teaching and Learning Strategy, the University is taking steps to begin the process of systematic enhancement of the student experience. In each faculty there is an associate dean (Enhancement) and academic leaders (Enhancement) whose roles are to facilitate enhancement activities both within and across faculties.

79 The Solent Life Group was established to help drive enhancement and dissemination. It distributes the Teaching Quality Enhancement Fund, which has been used to support a number of projects, some of which cross faculties. It also considers applications for curriculum fellowships. The audit team was of the view that this has the potential for systematic enhancement but that the practice was still in its infancy.

80 The main activities relating to approval, monitoring and review of programmes to date have been to enhance the University's quality assurance processes and procedures. The processes of approval, monitoring and review of programmes have the potential to lead to systematic enhancement, in particular the new periodic academic review with external input. At the time of the present audit the conclusion of the audit team was that the process was still too new to see the outcomes.

81 Development activities are open to all members of staff. New academic staff without teaching experience must undertake an HEA-accredited PGCert in Teaching and Learning in Higher Education. However, the University acknowledges that other interaction with the HEA is limited. The audit team noted that networks involving centres for excellence in learning and teaching, for example, exist in a diverse range of areas covering the new curriculum portfolio at the University. The team therefore suggests that the University may wish to encourage its staff to be more imaginative in looking for links with the HEA and making use of the resources available. The University is succeeding in making positive efforts to increase its pool of potential research degree supervisors through training.

82 The audit team considers that the University is in the early stages of a process of systematic enhancement at institutional level. The University has a range of activities in place and under development which constitutes an effective institutional approach to quality enhancement but the full outcomes of these initiatives and changes are yet to be seen.

Section 5: Collaborative arrangements

83 The University's collaborative provision register on its website currently shows a small portfolio of collaborative provision: a long-standing level 0 programme in Art, Design and Media delivered through Southampton City College, and HNC and Foundation Degree provision in built environment disciplines with Bournemouth and Poole College which commenced in 2008-09. The audit team noted two other programmes not on the collaborative register which had features of collaborative provision. The PGCert in Maritime Education and Training, which is delivered partly in the Philippines and partly at the University by staff of the Warsash Maritime Academy, and a BTEC Foundation Degree in Electrical and Electronic Engineering at Lincoln College where the University had taken responsibility for its oversight and management within the National Validation Council partnership of which it was a member.

84 The University's Strategic Plan 2008-13 indicated the intention to expand collaborative and partnership arrangements. This will include links with further education colleges in the Hampshire and Dorset region, designed to widen participation and promote student progression; partnership with regional employers; and collaborations with a small number of overseas educational partners. The University is currently progressing approval of a dual-award master's award with the Mudra Institute of Communications, Ahmedabad, India. In reviewing the University's collaborative provision, and from discussions with staff, the audit team was conscious of the University's intention of expanding this area of its activity in the future.

85 Three key principles guide approval of collaborative provision by the University: it retains responsibility for the academic standards of all awards granted in its name; the quality of student learning opportunities should be comparable with those in the University; and approval should be based on an assessment of risk. As a result of an internal review, the University has delegated more responsibility for quality assurance of collaborative provision to faculties, with the Academic Standards and Quality Service retaining certain key functions where risk was perceived to be higher. New procedures for the approval of collaborative provision were introduced in October 2008. Collaborations must have a faculty sponsor and new proposals must be approved by the Academic Planning Committee.

86 The approval process conflates approval of the partnership with approval of delivery of the programme at the partner institution, and consists of three stages. Once Academic Planning Committee approval is received, the Academic Standards and Quality Service coordinates the first stage, an initial due diligence review, which considers the proposed partner's reputation and compatibility of mission with the University's, the appropriateness of its legal and financial standing, and whether there is sufficient demand to justify offering the collaborative programme. Subject to a satisfactory outcome for stage one, stage two due diligence is undertaken by a panel nominated by the Dean of Academic Standards and Quality Service, with the size and

membership determined by the level of perceived risk. The panel visits the prospective partner and it reports back to the Academic Planning Committee.

87 Where the Academic Planning Committee is satisfied with the outcome from the second stage due diligence, it authorises the faculty to proceed to the third collaborative programme approval stage. New programmes involve an approval panel including two external advisers with relevant expertise (only one is required where existing programmes are being approved for collaboration), and the panel event takes place at the partner institution. For the most recently approved collaboration at Bournemouth and Poole College, the audit team was able to confirm the operation of these procedures. Appointment of the panel and control of the approval process lies with the faculty for low risk collaborations, but the Academic Standards and Quality Service controls approval for all other collaborations, and any variation of the University's standard Assessment Policy and Academic Framework requires approval by the Dean of Academic Standards and Quality Service. The approval panel reports to the Academic Standards and Development Committee, and when all approval conditions have been met, the full confirmed report goes to the Academic Standards and Development Committee which authorises delivery of the collaborative programme on behalf of Academic Board.

88 On approval, the Memorandum of Agreement will be signed on behalf of the University and by the partner. The Memorandum of Agreement remains valid for a period not greater than five years. It is reviewed annually by the Academic Standards and Quality Service and renegotiated after periodic review.

89 For collaborative provision the University's Academic Handbook notes that arrangements for annual programme monitoring follow 'these general policy requirements, but the detailed procedures will be agreed as part of the approval process'. Through discussion with staff the audit team was told that the annual programme monitoring arrangements are in fact recorded in the formal Memorandum of Agreement with each collaborative partner, and the team noted examples of this. Annual programme monitoring considers whether the terms and conditions approved for the collaboration continue to be met, and the team saw evidence of the outcomes of annual monitoring for the collaboration at Southampton City College being considered. The Academic Board also receives an annual report on the University's collaborative relationships, which acts to update the Board on developments during the year.

90 Within periodic academic review, collaborative provision would only be considered in terms of its place in the overall discipline portfolio and the application of collaborative processes. There is a continuing expectation that individual collaborative programmes will be reviewed and revalidated. The audit team saw evidence of this in the review and re-approval of the collaborative provision with Southampton City College. In parallel with this there is a review of the partnership which is managed by the Academic Standards and Quality Service, and also involves the sponsoring faculty and the University Finance Service.

91 In 2007-08, the University invoked its special monitoring procedure in respect of the collaboration with Southampton City College following a series of student complaints and concerns raised by the external examiner. The audit team saw evidence of a detailed action plan to address the concerns which had given rise to special monitoring. In July 2008, the Academic Standards and Development Committee agreed sufficient progress had been made to remove the collaborative programme from special monitoring. However, from evidence it saw and heard, the team took the view that the University should continue to exercise close scrutiny of the collaboration in order to safeguard the quality of the student learning experience.

92 Arrangements for assessment, external examining and publication of student results, including the production of transcripts and certification, are covered in the Memorandum of Agreement between the University and its collaborative partner. The University retains academic responsibility for students in collaborative provision, and assessment is conducted in accordance

with its assessment policy, procedures and regulations. The University has sole authority for the award of certificates and diploma supplements relating to students on collaborative programmes.

93 External examiners are appointed to collaborative programmes by the University using the same procedures and criteria as for on-campus programmes, although the University looks for external examiners to have some experience of collaborative provision. It was not clear from the University's procedures whether it had a policy in relation to using the same external examiners if the provision were to be offered both on and off-campus. External examiners for collaborative programmes have the same access to University resources, including the external examiner website and University conference for external examiners. They report to the University which then makes these reports available to the collaborative partner.

94 Students in collaborative provision receive a student handbook provided by the University. Unit leaders in the collaborative institution are responsible for the production of unit guides for each unit. The University's policy and procedures govern academic misconduct but are implemented by a senior member of staff at the partner institution. The collaborative partner is responsible for student discipline but disciplinary action requires consultation with the University coordinator in accordance with the agreed joint policy and procedures. Extenuating circumstances relating to completion of assessments, and also appeals against the decisions of the Examination Board are considered in accordance with the University's standard procedures. Student complaints are dealt with in accordance with the joint 'Student Complaints Procedure'.

95 Students contribute to quality assurance through representatives elected to the Student-Staff Committee. This should meet at least once each term, although the audit team was told by students these arrangements had not been implemented for 2008-09 in the case of the Southampton City College collaboration. It was not clear from the memoranda of agreement reviewed by the team that the University placed any other requirements on collaborative partners in connection with the collection and collation of student feedback.

96 In approving new collaborative partnerships the adequacy of the partner's resources (staffing and facilities) to sustain the proposed provision is considered. A key principle for collaborative provision is that the quality of student learning opportunities should be comparable with those within the University. Learning resources such as library and information, teaching facilities and IT support are appraised by the review panel during their visit to the proposed partner. The audit team established it was not usual for staff from the Learning and Information Service to have a formal involvement in the evaluation of learning resources to support collaborative provision, and it formed the view that the University would enhance the effectiveness of its quality assurance procedures for the approval of new collaborative partnerships by drawing on the professional expertise and experience of Learning and Information Service staff, and the disinterested evaluation in making a judgement about the appropriateness of the learning resources of the proposed partner. Accordingly, the team recommends that it would be desirable for the University to ensure its procedures for the approval and review of collaborative partnerships include evaluation of the learning environment by professional services, such as the Learning and Information Service, in addition to academic staff.

97 Due diligence considers the availability of appropriately qualified and experienced staff to deliver the programme at the collaborative partner when the partnership is approved. Subsequently, the Memorandum of Agreement requires the partner annually to submit the curricula vitae of staff for approval by the University coordinator. In addition, the partner is required to notify the University of any subsequent changes to staffing during the year, so that replacement staff may also be approved by the University.

98 Partner institution staff are able to attend University and faculty-level staff development events but the University maintains no records of the take-up of such activities. Partner college staff may take advantage of the University's HEA accredited PGCert in Teaching and Learning in Higher Education but fees are payable. The University expects to run an annual workshop for staff

on the partner's premises covering University regulations, policies and procedures. A condition of approval for the collaboration at Bournemouth and Poole College was the drawing up and agreement of a detailed staff development plan by the College and the University. Staff from the College confirmed to the audit team that the University had provided substantial training inputs for the College staff.

99 The University has a number of articulation agreements with other institutions, defined as agreements which do not result in a University award or the award of University credit, but specify the arrangements for admission of students, with or without advanced standing, on to University programmes from the partner institution. The audit team was assured none of these agreements created a situation which guaranteed places to students and that students needed to make individual applications. The team examined a number of articulation agreements entered into by the University and was able to confirm that this was the case.

100 Although the University's collaborative provision is currently very small, the audit team was satisfied that it had sound procedures in place which would ensure that academic standards were secure and that the quality of the student learning opportunities was maintained as it sought to expand this provision as part of the University's Strategic Plan.

Section 6: Institutional arrangements for postgraduate research students

101 The University does not have research degree awarding powers; the degrees of MPhil and PhD are validated and awarded by Nottingham Trent University. Consequently, the University was not subject to the 2006 QAA Review of research degree programmes.

102 Research takes place within the faculties and associated research centres. The Warsash Maritime Academy does not have registered research students; they are registered in the Faculty of Technology, regulated by an internal service-level agreement. The faculties are responsible for the administration and management of research students. At the time of the audit there were 60 students registered for research degrees, mostly part-time; recently there has been an average of 11 students graduating with research degrees each year. Each research student is entitled to a minimum level of facilities and support which is clearly stated on the University website. The audit team found these to be adequate and appropriate.

103 The University has a structured system for selection and admission of research students. Students receive basic induction from the faculty. Supervisory teams, comprising a Director of Studies (primary supervisor) and least one other supervisor are set up during the admission process. The audit team found these processes to be working effectively.

104 The supervisory team comprises at least two members, and regularly three, often with one or two from outside the University, who must be research active and have at least two 'completions' between them. The University sets a maximum number of students per member of staff, based on the level of seniority. The pool of potential research supervisors is being expanded by training and putting new supervisors into supervisory teams with experienced staff. The audit team considered that the training of staff in supervision of research students as part of the strategy to increase the pool of potential supervisors a feature of good practice.

105 The progress of research students is monitored regularly by the supervisory team with meetings at least every fortnight (or month for part-time students) with a formal review, including completion of an annual progress report form, by the Director of Studies; the outcomes feed into the Research Degrees Committee and inform the decision to recommend progression. There is an annual meeting for the student with a researcher who is not a member of the supervisory team. The University has retained the requirement (no longer necessary under Nottingham Trent University regulations) for a full report and viva voce examination for transfer from MPhil to PhD registration. Students were satisfied with the procedures for monitoring their progress and the audit team considered these arrangements effective.

106 Each student receives a formal training needs analysis that is recorded in the annual progress report, although the outcomes appeared to the audit team primarily to be a requirement to complete the University's PGCert in Research Methods, which is compulsory for all full-time students. However, the University acknowledged that this is not compulsory for part-time students. As far as the team could ascertain some students had attended, but there was no formal alternative. The team therefore recommends it advisable for the University to provide a formal training in research methods for part-time postgraduate research students who are unable to attend the PGCert in Research Methods. This is to ensure equity of experience and in order fully to meet the expectations of the *Code of practice, Section 1: Postgraduate research programmes*.

107 Postgraduate students are employed as associate lecturers to teach and mark student work. Although they have access to various resources there is no formal training before the students undertake these activities. The audit team recommends that it advisable for the University to provide a compulsory programme of training for postgraduate students prior to them undertaking teaching and/or assessment of students.

108 Students complete a self-evaluation as part of the annual progress report. Students also discuss their progress with their supervisory teams. The audit team concluded that these arrangements were appropriate and satisfactory.

109 Nottingham Trent University approves the examining team comprising one internal and one external examiner (two external for candidates who are members of staff) and an independent chair. Members of the supervisory team may not be internal examiners. Nottingham Trent University receives the reports of the examinations and awards the degrees as appropriate.

110 There is no formal student-staff liaison committee for research students. At university level there is representation on the Research Degrees Committee and the Research and Enterprise Committee, which the students reported to be useful. Complaints and appeals arrangements follow the standard University procedures but the students also have the right of appeal to Nottingham Trent University if necessary.

111 There is a University Ethics Committee but ethical approval is delegated to faculties. Faculties and most schools do not have formal ethics committees and the arrangements for project approval were generally informal. The audit team considers that the University is potentially putting itself and its students at risk. The risks may be varied depending on the type of research but could include risks of litigation for inappropriate research; not complying with appropriate legislation; causing harm to participants; or inappropriate use of data. Consequently, the team recommends it advisable for the University to formalise the arrangements for faculty scrutiny and ethical approval of research projects and for the reporting of the outcomes to the University Ethics Committee.

112 Overall, the audit team found the University's arrangements for postgraduate research students met the precepts of the *Code of practice, Section 1: Postgraduate research programmes*, and are effective in securing academic standards and the quality of students' learning opportunities.

Section 7: Published information

113 The University's approach to published information is contained in its Information and Communication Strategy. The University indicated that it regarded its website as the main source of information relating to the University and its activities (although hard copy material is also made available). The website included prospectuses, programme specifications and unit descriptors, and information relating to University policies, procedures and student regulations. The audit team formed the view that the University had developed a good quality website which was generally easy to navigate, and which presented material to prospective students and other stakeholders effectively. One exception related to research activity, where the team found the University research centres were not easily located on the website by interested parties.

114 The University loads the required information relating to its course provision on to the Unistats website so that it is available to prospective students and other stakeholders, and this exercise is overseen by the University's Research and Information Unit. The audit team was able to confirm that appropriate information had been deposited. The University's also uses its own website to publish a range of information available to prospective students and to other external stakeholders, including the Learning and Teaching Strategy, programme specifications for each course, and outcomes from the University student experience satisfaction survey. In addition, a number of quality assurance policies and procedures were also publicly available via the University website including the collaborative provision register.

115 The currency and accuracy of the prospectus and other material relating to University provision is overseen through an annual review process undertaken by University's Marketing and Communications Service in conjunction with faculties.

116 Students met by the audit team confirmed the University's website had been an important source of information they had used when making the decision about where to study and which course. From meetings with students, the team heard that the information provided by the University at the time of their application had been an accurate representation of their course and their experience as students. There were some exceptions, notably for students at Warsash Maritime Academy who appeared to be less well informed about their course and what to expect when they arrived at the University. This may reflect the fact that the Academy students are all employed and their companies sponsor them to attend award-bearing programmes at the Warsash Maritime Academy, and students may be unclear whom they should approach for information. The team was also told that for students on the Foundation year Art, Design and Media programme, it had not been made clear to them that the programme was delivered at City College and not by the University on-campus until an advanced stage in their applications. Although the University's prospectus entry for the programme does indicate delivery by City College, there was no reference to the collaboration on the College website that would indicate that the programme was being delivered there.

117 As noted in paragraph 66, a particular feature of the University's communication with potential students is its HelloUni website, designed to provide potential students and new entrants with information about the University, the City of Southampton, and aspects of University life relevant to new students, together with information relating to University policies, procedures, student regulations and matters related to admissions, enrolments and student finance. Students with whom the audit team met regarded the HelloUni website as an excellent resource.

118 For current students, the University regarded the student portal as representing the one-stop access point for information about the University, its academic facilities and services, and it also provided on and off-campus access to the University's virtual learning environment, myCourse. Students received in hardcopy format the University student handbook which included information on the University regulations and policies. The University student handbook is supported by course and faculty specific information provided in hardcopy and/or electronic formats.

119 Students met by the audit team were generally able to confirm the effectiveness of communication of information to them through the student portal. Postgraduate students confirmed the value of their course handbooks and unit guides, and research students said they had their own handbook. However, students from Warsash Maritime Academy were less well informed by the University. They had no information on classes and timetables for the following term which was a cause of concern to them. Also, when students were asked about the newly introduced procedures relating to extenuating circumstances, Warsash Maritime Academy students had no knowledge of them and believed extensions to deadlines could still be negotiated with individual tutors. Students from other faculties were more aware of the new extenuating circumstances procedures, but even among these some were unclear of the details of the procedure.

120 Informed by student comments, the audit team undertook a review of how effectively the University had communicated the newly introduced policy on coursework extensions, focusing on the Student Portal as the main means by which the University indicated it communicated with current students. While it accepted the University advised students to discuss the possibility of claiming extenuating circumstances with their faculty student support network officer, the team saw evidence in the variety of information on the portal which created the possibility that students with genuine grounds for extenuating circumstances might be deterred from submitting a claim. It was reinforced in this view by the extent of confusion concerning extenuating circumstances procedures that persisted in the minds of students with whom the team met. The team recommends that it is desirable for the University to revise the information on extenuating circumstances provided to students to ensure that it accurately reflects the implementation of the policy.

121 Public information, including publicity and marketing material, published by collaborative partners is subject to initial approval by the University's Director of Marketing. The Academic Standards and Quality Service is responsible for the ongoing monitoring of publicity materials, and is said to make three-monthly checks on partner websites. With only two substantive collaborations at present this is not an onerous task and, in practice, the audit team was unable to find any reference to the collaborative programmes on the websites of either Southampton City College or Bournemouth and Poole College.

122 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

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

- the rigorous and systematic approach taken to reviewing the appointment of external examiners across the University in order to ensure independence and to avoid reciprocity (paragraph 31)
- the development and continuing enhancement of the HelloUni web pages as a support for students during the recruitment process, particularly prior to their arrival at the University (paragraph 66)
- the role of the student support network officers as an effective interface with students in the coordination of student support and sharing of good practice across faculties (paragraph 70)
- the training of staff in supervision of research students as part of the strategy to increase the pool of potential supervisors (paragraph 104).

Recommendations for action

124 Recommendations for action that is advisable:

- review and revise the procedures for programme approval with particular reference to the determination of the form of approval to be undertaken and the nomination and approval of internal and external panel members (paragraphs 18, 50)
- review and revise its assessment procedures to ensure greater consistency in the accuracy of recording and reporting of marks (paragraph 43)
- provide formal training in research methods for all part-time postgraduate research students (paragraph 106)

- provide a compulsory programme of training for postgraduate students prior to them undertaking teaching and/or assessment of students (paragraph 107)
- formalise the arrangements for faculty scrutiny and ethical approval of research projects and for reporting the outcomes to the University Ethics Committee (paragraph 111).

125 Recommendations for action that is desirable:

- revise its procedure for monitoring the cumulative effects of programme, course and unit modifications to ensure a consistent approach to determining the need for programme re-approval (paragraph 20)
- revise the procedure for amending examination board decisions following the Chair's action in light of appeals, to ensure the timely and full involvement of external examiners (paragraph 43)
- ensure that the procedures for the approval and review of collaborative partners include evaluation of the learning environment by professional services, such as the Learning and Information Service, in addition to academic staff (paragraph 96)
- revise the information on extenuating circumstances provided to students to ensure that it accurately reflects the implementation of the policy (paragraph 120).

Appendix

Southampton Solent University's response to the Institutional audit report

Southampton Solent University welcomes the audit team's judgements of 'confidence' in the present and future management of the academic standards of our awards, as well as the quality of the learning opportunities offered to our students. We are delighted to note the clear identification of good practice in our selection and appointment of external examiners, the development of the 'Hello Uni' site for new students, the pivotal role of the student support network officers and the effectiveness of the training for supervisors of postgraduate research students.

The University has already taken action on a number of the recommendations within the report, including the formalisation of training for postgraduate research students who assist in teaching, enhanced training in research methods for part-time postgraduate research students, implementation of the planned action to further improve the accuracy of mark recording and updating of ethics approval procedures for research projects. The Academic Standards and Development Committee will consider the recommendations in full and make any other adjustments as appropriate in line with sector best practice.

The University would wish to thank the audit team for providing an excellent opportunity to examine all aspects of our profound commitment to the enhancement of the student experience.

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 415 04/09