

# Southampton Solent University

**December 2008**

## **Annex to the report**

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## Introduction

A team of auditors from the Quality Assurance Agency for Higher Education (QAA) visited 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.

### Outcomes of the Institutional audit

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

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

### Institutional approach to quality enhancement

The audit found that the University is in the early stages of a process of systematic enhancement at institutional level. The outcomes of the initiative and changes are yet to be fully embedded within the University systems and procedures.

### Institutional arrangements for 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 of 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 90)
- 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 190)
- 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 (paragraphs 196)
- the training of staff in supervision of research students as part of the strategy to increase the pool of potential supervisors (paragraph 262).

## Recommendations for action

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

Recommendations for action that the audit team considers 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 (paragraph 54)
- review and revise its assessment procedures to ensure greater consistency in the accuracy of recording and reporting of marks (paragraph 120)
- provide formal training in research methods for all part-time postgraduate research students (paragraph 266)
- provide a compulsory programme of training for postgraduate students prior to them undertaking teaching and/or assessment of students (paragraph 268)
- formalise the arrangements for faculty scrutiny and ethical approval of research projects and for reporting the outcomes to the University Ethics Committee (paragraph 275).

Recommendations for action that the audit team considers 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 61)
- 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 120)
- 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 249)
- revise the information on extenuating circumstances provided to students to ensure that it accurately and consistently reflects the implementation of the policy (paragraph 286).

## Section 1: Introduction and background

### The institution and its mission

1 The University was formed through the amalgamation of art, technology and nautical colleges and can trace its history as an education provider back into the nineteenth century. It became an independent higher education institution, Southampton Institute, in 1989. Southampton Institute was granted taught degree awarding powers in 2004 and university title as Southampton Solent University in 2005. Research degrees are awarded by Nottingham Trent University (NTU).

2 At the time of the audit the data for 2008-09 student numbers were not available. In 2007-08 the University had a total of 10,847 (9,233 full-time, 1,614 part-time) higher education students; this total comprised 10,130 (8,902 full-time, 1,228 part-time) undergraduate; 657 (314 full-time, 343 part-time) following postgraduate taught programmes, and 60 (17 full-time, 43 part-time) postgraduate research students.

3 Academically the University is organised into four faculties; three were established in 2000 and the fourth, the Warsash Maritime Academy (WMA), became a faculty in 2008. Research is conducted within the faculties and research centres. There are seven services each managed by a

dean or director which support the faculties and manage the University's infrastructure. These include the Academic Standards and Quality Service (ASQS) and the Learning and Information Service (LIS). There is also a stand-alone Research and Information Unit providing management information.

4 A distinctive feature of the University's provision is the specialisation in maritime education and training provided by the Warsash Maritime Academy, which also delivers the bulk of the University's further education provision.

5 Collaborative provision is not currently extensive, with the University claiming to have only two collaborative partners, Southampton City College (Foundation year in Art, Design and Media) and The Bournemouth and Poole College (Foundation Degree in Built Environment and four HNCs in Architectural Technology; Building Surveying; Construction Management; and Quantity Surveying).

6 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'.

7 The Strategic Plan sets out a Vision and Objectives in line with the stated mission.

### **The information base for the audit**

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

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

10 In addition, the audit team had access to:

- a QAA report, in lieu of Institutional audit, published in March 2006
- reports of reviews by QAA at the subject level since the previous Institutional audit
- reports produced by other relevant bodies (for example, professional, statutory or regulatory bodies (PSRBs))
- the institution's internal documents
- the notes of team meetings with staff and students.

### **Developments since the last audit**

11 A report, in lieu of Institutional audit, was published by QAA in 2006 following the granting of taught degree awarding powers in 2004. This found that broad confidence could be placed in the soundness of the University's current and likely future management of the quality of its academic programmes and the academic standards of its awards.

12 At the time of the report, the systems in the University were in a state of rapid transition. Although there were no specific recommendations the report raised two broad issues for consideration by future auditors.

13 First, the report had expressed concern over the continued ability of the LIS to coordinate and innovate successfully in its many areas of responsibility. There is evidence, specifically the development of the virtual learning environment (myCourse), the development of a new library portal and library management system, and enhanced and expanded student support system, that LIS has maintained its activity in the intervening period and has invested specifically in support for e-learning. Developments in these areas are continuing.

14 Second, concern was raised over the appointment of external examiners, their reporting and analysis of the feedback. The audit team found these to have been addressed as follows. Revised criteria for nominations have been put in place; an external examiners' scrutiny group (EESG) has been set up to oversee nominations. The external examiners' report template has been redesigned. The Vice-Chancellor reads the reports and the ASQS codes the required actions. There is a four-stage analysis and reporting on the outcomes of the reports with local and institutional issues identified and responses made.

15 The audit team found that both the above concerns had been addressed by the University. Other major developments that have taken place since the last audit include the designation of WMA as a faculty; the introduction of a new student records system; triennial reviews of responsibilities delegated to faculties; devolution of management and administration of postgraduate research to faculties; the introduction of a new periodic review process and strategic portfolio developments with investment in staff and facilities. In 2008, the University also made adjustments to its committee structure; this consisted mainly of the redesignation of two committees and two groups as new committees.

### **Institutional framework for managing academic standards and the quality of learning opportunities**

16 Academic Board has institutional responsibility and accountability for the maintenance of academic standards and has established committees reporting to it to undertake the detailed work on its behalf. These are: Academic Standards and Development Committee (ASDC), Research Degrees Committee (RDC), faculty boards, EESGs, Academic Appeals Committee, and the Research and Enterprise Committee (REC).

17 ASDC, chaired by the Pro-Vice Chancellor, Academic, is responsible for advising on the effectiveness of the University's arrangements for safeguarding academic standards and enhancing the academic quality of the taught provision. RDC, at the time of the audit chaired by the Dean of the Faculty of Technology, fulfils a similar function for postgraduate research degrees. Significant responsibility is devolved (often described internally as 'delegated') to faculty boards, chaired by the appropriate deans, for standards and quality of the courses placing ownership at the point of delivery. The faculty boards produce an annual report to Academic Board.

18 EESG, chaired by the Associate Dean (Enhancement), WMA, was set up in response to the last audit and provides advice to Academic Board regarding the suitability of nominations made to it by faculty boards for external examiner appointments in respect of undergraduate and postgraduate taught courses/programmes. The Academic Appeals Committee provides a mechanism through which students may appeal against decisions of an examination board. It reviews outcomes and reports annually to Academic Board. In the context of teaching and learning the REC, chaired by the Pro Vice-Chancellor, Academic, provides a forum for promoting the link between research and enterprise and student learning opportunities.

19 There is a Vice-Chancellor's group (the Deputy Vice-Chancellor; the two Pro Vice-Chancellors, (Academic and External Development); the Director of Finance) which is supported by a Management Board (chaired by the Vice-Chancellor; previously the Policy and Resources Committee). This in turn receives reports from Academic Planning Committee, previously the Academic Planning Group, chaired by the Deputy Vice-Chancellor, which has responsibility for the academic portfolio (including collaborative partnerships). The Management Board is also

supported by the Information and Communication Committee, which is chaired by the Pro Vice-Chancellor, Academic (and was previously the Information Systems Steering Group) which is responsible for the Information and Communication Strategy.

20 In addition to the formal committees there are a number of cross-University liaison groups. The Senior Management Team, chaired by the Vice-Chancellor, comprising the Vice-Chancellor's Group, deans and service directors, addresses operational and/or University management issues at an informal stage. The course operations group, chaired by the Dean of ASQS, and including inter alia the faculty registrars and Head of Student Operations (ASQS), considers administrative matters relating to student operations and undertakes projects remitted to ASQS by University committees.

21 The ASQS/associate deans (Enhancement) liaison group comprises the Head of Quality Management (ASQS) and the faculty associate deans (Enhancement). The group's remit is to ensure consistency of interpretation and operation of quality assurance policy and management on a University-wide basis. The ASQS/faculty quality group, composed of the officers responsible for administration of quality assurance in the faculties, and ASQS officers, considers quality assurance administration issues, informing development of operational procedures.

22 The postgraduate research (PGR) students administrators' group involves faculty administrators and ASQS officers looking at PGR administrative issues. There are also occasional meetings of the directors of PGR students with the Chair of RDC and the Dean of ASQS to discuss specific PGR operational issues, informing reports and recommendations to RDC and Academic Board/NTU.

23 The audit team concluded that the University had a large number of formal and informal committees and groups. The number of staff in the institution means that there is considerable overlap in the membership of the committees and groups.

24 Institutional policies are brought together in the Academic Handbook available to all staff via the University website and in hard copy as required. The Academic Handbook also includes the overall Strategic Plan, associated strategies (including the Teaching and Learning Strategy), committee remits and membership as well as details of regulations and policies. During the audit, the team was made aware that there are, additionally, operational procedures available through the staff portal on the University website.

25 ASQS has operational responsibility, on behalf of ASDC and RDC, for monitoring and evaluating quality assurance regulations and processes. It also monitors and benchmarks University practice against sector developments.

26 The audit team considered that the policies and procedures were comprehensive and provided staff with adequate information. However, the team was concerned that there was lack of clear separation between the operational procedures and the procedures included in the Academic Handbook (see paragraph 32).

## **Section 2: Institutional management of academic standards**

27 The University states that it has 'an evaluative approach to the assurance of the standards of its awards and that it has taken steps to map its systems and processes for the management of standards against the QAA's Academic Infrastructure and the requirements set by professional, statutory or regulatory bodies (PSRBs), where such bodies accredit its awards.

28 The University uses a process of 'Triennial Review' to evaluate the effectiveness of faculties in taking responsibility for certain aspects of the processes of managing academic standards which have been delegated to them by Academic Board (see paragraph 35). Academic Board also receives annually from the Academic Standards and Development Committee (ASDC) a 'Review of Academic Standards and Quality'. This document provides Academic Board with a

brief overview of the key points arising from ASDC's consideration of data relating to external examiners reports, PSRB accreditation, degree classification statistics, and faculty reports from the annual programme monitoring (APM) process.

29 The review of academic standards and quality 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 (HEI) for postgraduate research degrees.

30 The University sets out its policies in relation to maintaining and managing standards in the Academic Handbook which is drafted by the Academic Standards and Quality Service (ASQS) staff. In suggesting changes to the Handbook, ASQS staff draw on their evaluation of how the arrangements at the University map and benchmark against those in place at other HEIs. The Academic Handbook is subject to regular review and changes to the Academic Handbook are subject to formal approval by Academic Board. However, the audit team noted that in some instances Academic Board has agreed that the Dean of ASQS 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.

31 During the audit the team was also provided with copies of the Operational Procedures (OP) and was advised that these documents set out the University's procedures developed by ASQS which are the mechanism for implementation of the policies contained in the Academic Handbook. The team was advised that the OP documents are provided to staff through the staff portal. Staff that the team met were fully aware of the Academic Handbook but did not appear to be familiar with the OP. Staff that the team met, however, did advise that faculty quality officers were key points of contact when staff needed advice on how to implement academic policies and procedures. The team noted that the OP did not form part of the Academic Handbook and, therefore, had not been approved by Academic Board or ASDC acting in its behalf.

32 Having considered the Academic Handbook and the OP, the audit team formed the view that the Academic Handbook does in fact contain procedural information (such as details of how panels are to be established) as well as policy, and that the OP also establish certain important areas of policy which are additional to the policy statements included in the Academic Handbook. Consequently, the team would encourage the University to revise its procedures for the development and publication of information relating to academic policies and procedures to ensure that Academic Board is able to approve formally those policies and procedures in a timely manner.

### **Approval, monitoring and review of award standards**

33 In 2005-06 a review of the faculty specific arrangements for programme approval, modification and withdrawal led to the creation of a new University-wide set of policies and procedures. The new procedures sought to provide a more consistent approach to quality assurance activity across the institution.

34 With the exception of certain aspects of the approval, monitoring and review of collaborative programmes (see Section 5), the new procedures were devolved on a time-limited basis to faculties for implementation. Oversight at university level is exercised through Academic Board and its subcommittees through regular reports from faculty boards and through the process of Triennial Review.

35 The University states that Triennial Review seeks to evaluate the extent to which faculties are discharging their devolved responsibilities, as well as considering whether the processes and procedures were working effectively. Academic Board's consideration of whether or not delegation may continue is directly related to the outcome of the Triennial Review process.



36 The Triennial Review undertaken in 2008, which was conducted by two external advisers, found that the faculties were managing the devolved arrangements appropriately and that the arrangements were working effectively. The report also made some suggestions for further development which were presented to Academic Board at its meeting in July 2008. The audit team considered the minutes of the Academic Board in relation to this matter and noted that the Board accepted that these arrangements did not need to be reviewed again within a particular period. It also accepted that the arrangements were fit for purpose for mainstream University activities in the future, although changes to policies, procedures and structures might be needed to reflect the University's strategic commitment to employer engagement and new partnership arrangements. This conclusion contrasted with the team's understanding gained through discussion with staff that the delegation of responsibilities to faculties would remain under review in the future. While it appeared to the team that there was evidence that faculties were undertaking their responsibilities appropriately, the University may wish formally to clarify its approach to the delegation of responsibilities to faculty level in its documentation.

### **Programme approval**

37 The University operates a four-stage programme approval process which was implemented in 2006-07 following the introduction of the new University-wide processes and procedures referred to above.

38 Stage 1 requires the sponsoring faculty to gain approval from the Academic Planning Committee (APC) to proceed to approval stages 2-4. The role of APC in considering resources requested for a new programme or course is described below (paragraphs 47, 129).

39 Stage 2 involves the relevant faculty establishing a panel internal to the sponsoring faculty as specified in the Academic Handbook and in the OP (unless the programme is collaborative in which case the Dean of ASQS establishes the panel). The panel at stage 2 scrutinises the course/programme design and resourcing proposals. It determines whether the course should go forward to stage 3 and where appropriate, it may consider a request that the course/programme should be exempt from parts of the assessment policy, University academic framework or other academic policies and regulations. If such a request is supported, the stage 2 panel is required to submit the request with supporting evidence to the Dean of ASQS who takes action on behalf of ASDC to approve the request where appropriate.

40 Stage 3 involves the full development of the course proposal and supporting documentation, and its scrutiny by a panel with a chair and members from outside the proposing school, and with two members external to the University. The membership of the panel is prescribed in the Academic Handbook and the responsibility for appointing the panel lies with the faculty unless the programme is to be collaborative, in which case ASQS take this responsibility. The panel may recommend to ASDC approval with or without conditions, suspension of the approval process or non-approval.

41 Stage 4 involves authorisation to deliver the programme from ASDC once it is satisfied that any conditions of approval have been met. ASDC receives reports on the outcomes of the peer approval process and approves the pool of staff who may act as chairs of approval panels.

42 The arrangements 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 OP. The University emphasises that approval arrangements are 'a key mechanism for achieving its objective of enhancing the student experience of learning, achievement and employability' and also that 'the standards required for the award to which each course leads... take due account of the appropriate external reference points'. The external reference points highlighted in the Academic Handbook include benchmark statements, *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ), National Occupational Standards and PSRB requirements.

43 The OP scrutinised at the audit provided further details that are used to enable peer approval to proceed (Programme Approval Stage 3 (PAS3) process). The audit team was advised that these OP are made available to staff through the staff portal.

44 The OP provided further information about the 'typical composition' of a 'Peer Programme Approval Panel', stating that it is normally the role of the Associate Dean (Enhancement) acting under delegated authority from the Dean of Faculty to propose the membership of panels. The OP did not, however, confirm where or by whom such proposals might be approved. The audit team asked for clarification of this and was advised by staff that the approval of panel membership was in fact delegated entirely by each faculty to the Associate Dean (Enhancement) or, in the case of high or medium risk collaborative provision, selection and approval of panel membership is the sole responsibility of the Dean of ASQS.

45 The OP provides information on criteria that could be used to appoint members of approval panels. For example, the OP states that the chair 'may be appointed with an external validating body if appropriate', and that external advisers would 'normally' include 'at least one academic and one relevant employer who should not have acted to advisers in the course/programme development'. In discussion with staff the audit team was advised that in practice the appointment of chairs remained the responsibility of the faculties (or Dean of ASQS as appropriate) and that there had not been any instances where an external body had influenced such an appointment.

46 The audit team noted that the OP defined five different types of events that could take place at PAS3. These included specific arrangements for the approval of a new combined honours course, approval of new named awards for existing programmes, approval of an existing pathway as a named award, approval under course modification procedures, and approval of courses with special features, for example, remote, blended learning, work-based learning and distance learning. With respect to the latter, the team noted that the procedures require that distance-learning courses need to provide an example of a completed unit for consideration by the panel.

47 The audit team enquired where the responsibility lay for determining which of the five possible panel arrangements was appropriate for the approval of a particular programme. In considering the responses received to this question and, given the University's stated aim of developing for the future a more flexibly delivered curriculum involving a range of partners, the team found that staff at a number of levels were not always able to articulate clearly the rationale for using a particular model of approval event. For example, staff with responsibility for quality assurance at faculty level advised that this was a matter agreed at the APC, a subcommittee of Management Board. While the team noted that APC does provide reports to ASDC on its consideration of proposals, the team did not find that such reports referred to ASDC by APC contained any reference to which model of approval event had been determined. The team was therefore unable to identify where in the committee structure responsibility lay for approving which model of approval panel should be used in any particular case.

48 The audit team received sample documentation relating to approval events during the audit visit and considered whether in these examples the membership of Programme Approval Panel (PAS3) met the University's stated policy requirements contained in the Academic Handbook and the procedures included in the OP.

49 With respect to the membership of approval panels, the audit team acknowledged that it can be very valuable to include employers as part of programme approval events. However, the team wondered whether in all cases due consideration had been given to the extent to which the external members of the Panel taken together, were always sufficiently experienced in programme development and delivery at higher education undergraduate and/or postgraduate level. For example, the team noted that of the five sample reports provided, only two out of 10 external panel members were academic staff from HEIs involved with the development and delivery of higher education programmes. In the case of the approval of collaborative

partnerships with further education colleges (FECs), the team also noted that all externals in both instances were themselves from FECs with the exception of one external who was an employer.

50 Of the internal panel members, only three out of the 11 internal panel members were from a different faculty than the school putting forward the proposal and, in one instance, both internal members were from the school making the proposal. While the University's procedures do permit members of panels to be from within the same faculty, they do not permit membership from within the same school. While the audit team appreciated that at the time of the particular event, the 'School' in question was a stand-alone body which had faculty status, it also noted that the members of staff included as internal panel members were from the same subject disciplines as the proposal, and were not from different subject areas within the same school.

51 In the case of an approval event where an innovative postgraduate programme was to be delivered through blended learning to students based overseas for approximately 50 per cent of their study period, the audit team noted that both internal members of the panel were from the same faculty as the school putting forward the proposal, one being the Faculty Registrar and one a senior member of staff responsible for external development. The team also noted that the inclusion of only one member of academic staff as an internal member of the panel did not meet the University's stated requirements in its OP. Furthermore, it was clear that both of the externals appointed to this panel were from employer and/or professional associations and there was no external from an HEI included.

52 In light of the emphasis of the OP on the need to balance subject expertise with the 'benefits of covering a broad range of subject backgrounds to ensure a wider variety of approach and viewpoint and for the need for internal members to be independent of the course, its planning and operation', the audit team was not fully convinced that the University's Policy, as stated in its Academic Handbook, and the OP that were described as delivering the policy, were meeting the University's stated intentions in all instances.

53 The audit team noted examples of reports on Programme Approval, stage 4 (PAS4) that had been received by ASDC. It noted that these reports advised the committee of the titles of the programmes or courses that had been subject to the approval process and it advised the Committee whether or not any conditions set for approval at PAS4 had been met. The team found that ASDC does not receive any details of the conditions set by PAS4 panels in order to inform its decision-making. The team also noted that while ASDC does report to Academic Board on its work to approve recommendations made by PAS4 panels, it does so only as part of its annual report and does not appear to provide detailed information about the new awards that have been approved or any comments on the evaluation of the effectiveness or otherwise of the approval process for any particular year.

54 Having considered carefully 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.

### **Modifications to existing provision**

55 Prior to 2006, all courses/programmes were revalidated according to a defined cycle. These arrangements were replaced with a new and more widely based review of school subject based provision called 'Periodic Academic Review' (PAR) which takes place every six years. PAR is described below (paragraph 75). It is therefore the case that once a programme has been approved by ASDC, it is approved 'indefinitely unless the Programme Approval Panel has concerns which are best addressed by the revalidation of the course within a defined period'.

56 The arrangement described in the Academic Handbook for year-on-year modifications to individual units within a programme is termed 'Programme Modification'. The OP relating to programme modification define the sorts of modification that can be approved by faculties using

this procedure and also state that there is 'no limit' to the amount of modifications to a course/programme that can be proposed in any one academic session. However, it also states that if the proposals would have a significant impact on the student learning experience, course/programme aims, intended learning outcomes, assessment strategy and/or resources needed to deliver the curriculum, a revalidation of the provision would be more appropriate.

57 The OP confirmed the information received by the audit team from its discussions with staff that it is the role of the faculty quality officers to consult with the Associate Dean (Enhancement) in such cases and to advise course teams whether revalidation is required. However, the Academic Handbook states that it is a subcommittee of a faculty board (the Faculty Scrutiny Committee) which has responsibility for determining whether or not the proposed change would result in a 'significant impact' (as indicated by volume or balance) on aspects of the provision and, therefore, whether a course/programme must be revalidated.

58 The audit team considered the examples of modifications provided and noted that the process was documented at faculty level, and students were invited to participate in such discussions at school and faculty level. From the sample provided as evidence, the team noted that there was a reasonable volume of proposed changes being considered on an annual basis.

59 Where the proposed changes affect intended learning outcomes and in changes to assessments, the Academic Handbook states that these must also have been discussed with the external examiner for the course/programme. The audit team was provided with examples of how this process had been conducted.

60 The audit team noted that the *Code of practice, Section 7: Programme design, approval, monitoring and review*, precept 8, sets out guidance about how universities should pay due regard to the cumulative impact of programme changes and how such changes are communicated in line with relevant PSRB requirements. The team also noted that the University defines modifications in broad terms and is content that there is no limit on the amount of change that can be made to a programme, provided that the faculties determine that such changes are appropriate (see also paragraph 98).

61 The audit team noted the specific delegation of responsibility from Academic Board to ASDC 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 procedures for monitoring the cumulative effects of programme, course and unit modifications to ensure a consistent approach to programme re-approval.

## Monitoring

62 According to the Academic Handbook, the University's stated objective of APM 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.

63 Course/programme teams are responsible for implementing the process described in the Academic Handbook for the annual monitoring of each programme/course. Each programme/course is evaluated against the objectives specified in the Academic Handbook and an action plan is produced. Information used to undertake this work includes feedback from students (see Section 3), and from external examiners. Student representatives are invited to participate at school and faculty levels with the APM discussions and through this mechanism they have an opportunity to engage with external examiners' reports.

64 The University also states that feedback from PSRBs is drawn upon, although this is not specifically included in the relevant section of the Academic Handbook. Use is also made of statistical data such as data on mean marks and Pass rates for all 'units' (parts of a course). A list

of detailed information drawn upon by programme/course teams for APM is not specified in the Academic Handbook but is detailed in the relevant OP.

65 The University considers that the APM process supports its management of standards through evaluating the currency and validity of the curriculum and assessment practice against developing knowledge in the discipline, and through the evaluation of external examiner reports.

66 Each faculty scrutiny panel reviews the course/programme team's action plans, together with data for each programmes/course and overall data for the faculty. As part of the APM process, proposals for modifications to units, courses and/or programmes may be presented as noted above (paragraph 56).

67 In relation to the management of academic standards, as an outcome of APM, faculty scrutiny panels (including a Students' Union officer) are required to report to a faculty board and ASDC on whether or not standards are secure, whether proposed action plans have been approved as appropriate, and whether a recommendation has been made to the dean for the revalidation/closure or suspension of a course.

68 The University stated that key performance indicators (KPIs) are used for each unit and the audit team was provided with evidence of these numerical KPIs relating to progression rates and other important performance indicators. The team noted that the same KPIs are applied to all units, courses and programmes consistently; however, it also noted that the availability of data sets for consideration of postgraduate taught programmes had been problematic and that the University recognises this is an area it needs to develop further.

69 Where the data set provided shows that there are mean marks or Pass/Fail rates that do not meet the University criteria, such units are designated as 'exceptional units' and require action to be defined as part of the action plan. Where such units stay 'exceptional' for more than one year, they must then be identified for specific action as part of the faculty action plan. The University states that such units are reported to a faculty board and ASDC and have led to corrective action at course, faculty and university level to identify and address causal factors, and the audit team heard of a number of examples where schools and faculties have taken action to address such units in a proactive manner.

70 The faculty scrutiny panels (FSP) take responsibility for confirming for each course a designated colour code using a 'traffic light system' of Green\*, Green, Amber and Red, where Green\* indicates a course that is exhibiting best practice in terms of meeting performance criteria, positive feedback from students and external examiners. The outcomes of the FSPs are reported to faculty boards. In discussion with staff, the audit team was advised that ASDC oversees the allocation of the colour codes by reviewing the reports provided to it from faculty boards and that this mechanism ensures that there is consistency of interpretation of the allocation of colour codes as outlined in the OP. However, the team reviewed the reports on APM made by faculties to ASDC and could find no evidence of the allocation of colour codes being reported at that level.

71 ASDC reports on APM as part of its annual report to Academic Board. One example scrutinised by the audit team was the 'University Review of Academic Standards and Quality 2006-7'.

72 In addition to the 'exceptional unit' process, in 2007, the University also introduced 'special monitoring' of courses where concerns about standards or quality (see Section 3) are signalled at faculty or university level. 'Special Monitoring' is deliberately not defined by the University in order that the proposed actions can address the particular circumstances. The Academic Handbook states that the Dean of ASQS is responsible for approving arrangements for special monitoring on behalf of ASDC.

73 Special monitoring has been used twice since 2007, in relation to the collaborative programme offered with Southampton City College (see paragraph 241) and for the full-time MBA programme. The audit team was able to review evidence of how the process worked in practice and noted that action plans had been carefully monitored by ASDC.

74 While overall, the audit team concluded that the arrangements for programme modification are fit for purpose, it would encourage the University to consider ensuring that staff are clear on the purpose and function of the colour coding system (paragraph 70), and that it should clarify in its documentation where the responsibility for determining the format of APM for each specific collaborative programme lies and how this is recorded.

## Review

75 As noted above (paragraph 55), with effect from academic year 2007-08, the University replaced the compulsory revalidation of courses/programmes with a new periodic academic review (PAR) process. This involves a wider (than course-level) review of a school or a subject area on a six-year rolling cycle. The process is based on a self-evaluation document, the use of existing internal and external reports relating to the provision, a defined statistical data set and student feedback (written and verbal). The review panel incorporates at least two members external to the University and a nominee of the Students' Union.

76 The Academic Handbook confirms that collaborative provision is subject to the same PAR process.

77 PAR leads to a report by the panel which is considered by the faculty management team (FMT). The FMT is required to draft a response which is considered by a faculty board and ASDC. Where actions are identified at faculty or school level, these feed into APM and are monitored by the faculty boards. The Academic Handbook states that students are also informed about the outcomes of PAR.

78 The University states that its review of the operation of PAR after one year suggests it is an effective process. The audit team had an opportunity to review one example of PAR and noted that the process met its stated objectives.

79 In discussion the audit team learnt that PAR may also lead to a decision to submit a particular course or programme to a full 're-approval' process, using the approval process for new programmes. In this regard, the team noted that PAR did not appear to be a substitute for programme 're-approval'.

80 The audit team understood that PAR 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 and/or such programmes which through consideration at PAR, appear to need further significant change. As an outcome of PAR, a separate process of programme re-approval can be required for any individual course or programme identified as needing to be re-approved. The team also heard that the process had allowed staff to identify areas of good practice across cognate programmes and to identify opportunities for further interdisciplinary cooperation.

81 Overall, the audit team found that PAR appeared to be developing into a useful mechanism for reviewing cognate courses and programmes and for streamlining programme review arrangements. As the University monitors the progress of PAR, the team would suggest that the University may consider how PAR articulates with arrangements for 're-approval' and whether there are further opportunities for integration and streamlining of processes.

## Academic audit

82 In addition to APM and PAR, 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 ASDC 'on the basis of business need'. ASDC receives the reports from academic audit and recommendations are taken forward as part of the University's enhancement process (see Section 4).

83 In terms of the management of standards, the audit team noted that the University has used the academic audit process to review how extenuating circumstances submitted by students were considered by faculties. The outcome led to adoption of a 'fit to study' policy, the implementation of which was reviewed by ASDC in February 2008. An Academic Audit of Admissions has also taken place (see Section 3). Having considered a sample of academic audits that have taken place to date, the team concluded that the latter appears to be a useful tool that has led to positive change.

## External examiners

84 An external examiners' conference is made available to all newly appointed externals 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 and further information are provided. The processes used for the appointment of external examiners for on-campus programmes are also used to appoint external examiners for collaborative provision.

85 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. This analysis leads to a categorisation of each report as 'excellent' 'positive' or 'critical'. Course teams are required to respond to each report and where the Vice-Chancellor determines that specific action is needed, he may require the faculty or AQAS to work with the programme or course team to address issues that have been raised. Programme teams are required to respond to external examiners' reports and these responses are included in the action plans.

86 The audit team concluded that the process is very thorough and that each report is considered carefully. ASDC receives an emerging themes report at its autumn meeting with further follow-up and more detailed reports coming to it at spring and summer meetings, culminating in a final report at the June meeting of ASDC identifying university-level issues or trends.

87 The audit team considered that although the University was indeed analysing the reports of its external examiners extremely thoroughly, this has possibly led to the process becoming rather drawn out over the year, such that almost 12 months had elapsed before the university-level trends and issues were highlighted for consideration. and by that stage, the next round of assessment boards would be taking place. The team would suggest that the University considers whether it might be possible to streamline the current arrangements so that university-level issues can be highlighted at an earlier point in each academic year.

88 With respect to the appointment of external examiners, Academic Board receives a detailed report from ASDC on the institutions from which external examiners are drawn so as to ensure that in accordance with the Academic Handbook (section 21) there should not be more than one external examiner from any one HEI within the team of external examiners; and that there are no instances where staff from Southampton Solent are external examiners in the same school or department from which an external examiner is drawn.

89 The report submitted to Academic Board in March 2008 identified that there were a number of HEIs from which the University has drawn its external examiners more frequently than others, and that in some instances there were more than four externals from the same HEI and in one case there were eight from one HEI. A more detailed analysis was then completed to ensure

that externals from the same HEI were not involved in examining in the same faculty/cognate programmes/course at the University, and where there were eight externals from the same HEI currently appointed to a wide range of programmes at the University, the Academic Board determined that no further appointments could be made from that particular HEI. The Board also asked that in future, the reports from external examiners scrutiny group (EESG) to the Academic Board should include details of the HEI where the external examiner was employed rather than simply the external examiners name.

90 Based on the evidence scrutinised and discussions with staff, 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.

91 The University currently allows each faculty to determine when it is appropriate to ask external examiners to comment on assessment briefs and examination papers and to determine when this was not required. Each faculty is required to provide a statement to ASDC confirming its intentions. ASDC receives and notes the statements provided.

92 The audit team confirmed in meetings with staff and from the sample reports, that each faculty was taking a different approach.

93 The audit team also noted that 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. The form also requests external examiners who do not respond 'yes' to this and other questions in this section of the form to indicate the reasons for their response on the form.

94 Taking into account the evidence made available to the audit team during the audit, the team would strongly encourage the University to ensure that a consistent approach is taken to secure 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.

### **Academic Infrastructure and other external reference points**

95 The University states that it makes use of the QAA Academic Infrastructure to define its own standards. The audit team noted that in June 2008, ASDC had received a paper reviewing the extent to which the University had aligned its policies and procedures with QAA's Academic Infrastructure. Further reports on alignment with the *Code of practice, Section 2: Collaborative provision and flexible and distributed learning (including e-learning)* and *Section 9: Work-based and placement learning*, were presented to the July 2008 meeting of ASDC. ASDC also noted that as part of the Academic Audit of Admissions (see paragraphs 83, 185) the University had reviewed its arrangements in light of the *Code, Section 10: Admissions to higher education*.

96 With respect to the FHEQ, the University stated in its Academic Handbook that it maps its provision against the FHEQ as part of its approval arrangements. Similarly, the University's arrangements for approval of courses and programmes require that benchmark statements are used to develop the curriculum aims and learning outcomes. Programme specifications are created for each programme and are available on the University's web pages. The audit team was able to see examples of programme approvals and confirm that, overall, the University is engaging effectively with these aspects of the Academic Infrastructure during that process to manage the standards of its awards appropriately.

97 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 noted that its arrangements met the expectations of this document.



98 The audit team sought clarification of how PSRBs are consulted about proposed changes to accredited programmes. It noted that in some instances, particularly where statutory bodies are involved, the discretion for making changes can be limited and usually involve a degree of prior consultation/approval by the PSRB. The team was advised that in the case provided, the course team had sought the comments of their external examiners, and intended to notify the PSRB of the changes that had already been made as part of meeting its annual reporting requirements during the following year.

99 The audit team sought further evidence of how the University engages with PSRBs and found that ASDC receives reports from faculties about the engagement of courses and programmes with individual PSRBs and the outcomes of accreditation applications and monitoring visits. It also noted that PSRBs can be invited to participate in PAR and that in one of the examples provided, involvement of a PSRB had occurred.

100 The audit team learnt that at a recent meeting of ASDC, members were reminded that it had been agreed by ASDC in February 2005 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'. However, the paper acknowledged that despite this policy having been agreed for more than three years, 'it is possible that as accreditation/recognition arrangements are co-ordinated at course level, some information regarding PSRBs is not being transferred from the course team to ASQS'. The paper therefore recommended that the current reporting arrangements needed to be reviewed.

101 The audit team discussed the consideration of PSRB reports with the staff that it met during the audit and was advised that engagement with PSRBs is dependent on engagement between individual course teams and the PSRBs. Staff were able to describe how reports were received and considered at course level, but were less clear about how the University was involved with this process. Having considered the reports provided to ASDC the team concluded that these are necessarily brief and do not include copies of the actual reports provided by PSRBs or the responses provided. The reports also do not identify specific requirements that may be set by PSRBs from time to time and which the University needs to consider when it is developing its policies and procedures for the management of standards. The team did note that during programme approval there is a process by which course teams can apply to the Dean of ASQS for approval of a derogation of regulations where additional or special requirements are set by PSRBs.

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

103 The audit team also reviewed how the University formally considered a QAA report, *Foundation Degree review, Computer Studies*. It noted that reports were made to ASDC and Academic Board. The Minutes of ASDC recorded that 'the university is currently formulating its response to the final audit report received in January 2006 and which included an adverse judgement in one area'. The Annual Review of Academic Standards and Quality presented to Academic Board stated that 'External quality reviews...were again positive'. It was noted that when formally received, the QAA Foundation Degree report on the Professional Computer programmes would include an 'adverse judgement'. The QAA 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 was unable to find evidence that Academic Board had discussed this matter in any significant detail or determined an appropriate course of action.

104 The audit team noted that ASDC did receive a more detailed report from the Associate Dean (Enhancement) at its June 2006 meeting in which details of action taken were included and a draft copy of the action plan due for submission to QAA by 11 July 2006 was submitted for consideration. This report also included a number of areas where the University had drawn on the report to improve its arrangements for managing standards including engagement with the Academic Infrastructure, and recognition that the challenges of developing, delivering and managing high quality online distance-learning programmes should not be underestimated.

105 The audit team considered the significance of this section of the report with respect to the recent approval of a postgraduate programme to be delivered by blended learning overseas. Although the University states in its OP that a panel established to consider approval of a programme or course that includes distance learning should include specific expertise in such delivery and that sample units are required as part of approval, it was not entirely clear to the team from the documentation provided that these requirements had been met fully in this instance.

106 The audit team would suggest that the University reviews how its formal committees with responsibility for quality and standards engage more fully with external reports including those from PSRBs (see paragraph 101) and QAA, so as to 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.

### **Assessment policies and regulation**

107 The University's Academic Handbook includes a statement of the University's Assessment Policy which includes regulations governing all taught awards. Assessment of postgraduate research students is governed by the academic regulations of Nottingham Trent University (NTU).

108 ASDC is responsible for the review of assessment policy and ensuring assessment practice supports the policy. Faculties are responsible for implementation of assessment policy. The University stated that the effectiveness of assessment practice is monitored via student feedback, external examiner reports, APM, PAR and examination boards.

109 The regulations distinguish between undergraduate, Foundation Degree, higher national and postgraduate awards. In each case the regulations cover progression, referral opportunities, compensation, and rules for the classification or differentiation of awards. For each type of programme, the regulations are uniformly applied. The exception is in the classification of undergraduate awards where those in Art and Design are different from all other undergraduate awards.

110 An examination board must be convened for each course or programme and the composition and conduct of examination boards are covered by the University's Academic Handbook. Chairs of examination boards are senior staff of the faculty, and they must not have a teaching involvement with the course for which the board has been convened. External examiners are expected to attend stage and award examination boards and are asked to comment on the conduct of the meetings of the board. ASQS holds briefing sessions for chairs and professional advisers ahead of the boards taking place and following the board.

111 ASDC receives a report at its autumn meeting on the operation of examination boards, drawing on comments made by external examiners and the professional advisers. This report allows ASDC to review whether not the examination boards have been conducted in accordance with University regulations, and whether there are opportunities for changes to arrangements or to regulations that have emerged as a result of the examination board process in the previous year.

112 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 university-wide system with a university-level extenuating circumstances panel considering all cases in light of agreed criteria. The extenuating circumstances 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 Union officer will support the student through the process. The operation of the extenuating circumstances policy is discussed further in Section 7 (paragraph 286).

113 The University's appeal process involves a two stage (faculty and university-level process). The first stage is designated 'query' and the second 'appeal'.

114 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. Academic Board approved these changes in July 2008 for inclusion in the 2008-09 Academic Handbook. Academic Board has also received briefings about any cases from the University that have been referred to the Office of the Independent Adjudicator (OIA) and has received a useful summary of general sector-wide issues raised by the OIA in its annual reports with a view to considering whether the University needs to make any changes to its own arrangements. The audit team recognised that the University has taken steps to engage with both QAA and OIA guidance.

115 At faculty level, advice is provided to students 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'.

116 The audit team noted that the report that accompanied this analysis did not comment on what action the University intended to take to reduce such administrative or procedural errors being made in future. However, in discussion with staff, the team was informed that some schools had been reviewing their processes for ensuring the accuracy of marks over the past two years and some improvements had been made to date. It was also advised that as part of APM for 2007-08, all programme teams had been asked to consider the statistics on appeals and to put in place appropriate actions where necessary.

117 In discussion with students, the audit team was told that where students query a mark with staff members, it is sometimes possible for a change to a mark to be made through the Chair's action without the need to engage in a formal appeal. While the team did not find evidence of this, the team was told by staff that where an appeal is made on the grounds that a mark has not been recorded and presented to the Examination Board correctly, and the appeal is upheld by the faculty, the Chair of the Assessment Board takes action to amend the mark without reference to the Assessment Board or to the external examiner and that this is in line with University policy. The amendment is then reported by the Chair to the next scheduled meeting of the Examination Board.

118 At university level, 16 appeals were considered of which 11 were rejected. Of the 16, while the highest number cited included 'mitigating circumstances (as defined above) as the grounds for appeal, others also cited 'procedural irregularity' and 'results error'. The report records that 11 of the appeals were rejected by the Head of Quality Management, four were referred to the faculty as having valid grounds for faculty to consider and one was referred to a University Appeal Panel. In common with the report on faculty-level appeals, this section of the report did not suggest whether or not the outcomes of the appeals have led to review or development of assessment procedures or processes.

119 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'. In discussion, the team was told that claims made under the second ground, noted above, included instances where students did not understand what their mark meant and that the problem lay in the faculties and student's interpretation of the grounds for appeal.

120 The audit team recommends that it is advisable for the University to review and revise assessment procedures to ensure greater consistency in the accuracy of the recording and reporting of marks. Furthermore, the team recommends that it is desirable for the University to revise the procedures for amending examination board decisions following the Chair's action in light of appeals, to ensure the timely and full involvement of external examiners.

### **Management information - statistics**

121 The University states that it uses 'standardised KPIs' to review effectiveness of actions it takes to safeguard standards. The audit team noted that particular use is made of management information in APM, using University wide KPIs, leads to the identification of 'exceptional units' for further monitoring and attention during the forthcoming year.

122 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 metrics. The same report also 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 NTU.

123 The Annual Review of Academic Standards and Quality submitted to Academic Board in March 2008 states that 'there were continuing difficulties around the production of KPIs'; however, it was acknowledged that progress was being made and that faculties and ASQS worked together to minimise the impact of such issues. In addition, the Deans of ASQS and of Learning and Information Services were asked to take action to ensure that the availability of data was improved. In July 2008, Academic Board was informed that action had been taken to address the issues identified and to produce KPIs by the end of October 2008, although the University acknowledges that it has further work to do in provision of statistics for postgraduate students.

124 The audit team concluded that the University makes appropriate use of externally provided statistics including, for example, HEFCE's benchmarks on graduate employment, and the Universities and Colleges Admissions Service's (UCAS) data. The Research 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.

## **Section 3: Institutional management of learning opportunities**

### **Academic Infrastructure and other external reference points**

125 As noted in the previous section (paragraphs 95, 96), 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.

126 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 (OP) also cover arrangements for the management of quality.

## Approval, monitoring and review of programmes

127 The Learning and Teaching Strategy section 4(ii) states that programmes will be delivered at different times of the day/evening and at weekends, in further education partners and in higher education partners overseas, in the workplace and community and as blended learning and fit for purpose learning spaces. The audit team noted that the arrangements for programme approval provide information about procedures for approval of this range of provision (see Section 2).

128 The University has developed a four stage process for approval of programmes as described in Section 2 of the report. As part of Stage 1, Academic Planning Committee (APC) considers whether or not the resources to support student learning opportunities are available for each new programme that is being proposed. APC reports to the Management Board and the Academic Board summarising its 'approval' of proposals to offer new courses (including collaborative proposals) or withdrawal of validated programmes.

129 APC 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'.

130 Given the fact that the University confirmed to the audit team during the audit that the responsibility for academic standards and quality lies with the Academic Board, the team suggests that the University may wish to review the terms of reference for APC 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.

131 Annual programme monitoring (APM) is detailed in the Academic Handbook, and described in Section 2 above. The audit team concluded it to be well embedded and understood across the University. The annual report on APM draws together evidence from the process and makes recommendations for changes to processes for managing quality where relevant. A stated aim of APM is to identify appropriate actions to improve the quality of provision and the students' learning experience.

132 The audit team was able to confirm that action plans for addressing matters of academic quality are produced and progress is monitored by course teams. Action plans are presented to faculty scrutiny panels and the Academic Standards and Development Committee (ASDC).

133 In addition to its role in managing standards described in Section 2, periodic academic review (PAR) also involves a detailed consideration of whether the resources to support the programme remain appropriate, and whether staff development, research and enterprise work has 'demonstrable links' to learning, teaching and the curriculum. Faculties write a self-evaluation document for the PAR, in which they evaluate the strengths and areas of further development that they have identified as relevant to the programme(s) being reviewed. The outcomes of PAR are monitored through APM. PAR 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.

134 Where a decision is made to suspend recruitment to a course or programme, or to withdraw a course or programme, the audit team concluded that 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.

## **Management information - feedback from students**

135 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 incorporated 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. To evaluate the effectiveness of the University's arrangements, an academic audit focusing on student involvement in quality assurance processes took place in 2007-08. The outcomes of this audit are described later in this section of the report (paragraph 144).

136 The audit team noted that the involvement of Students' Union officers in committees and in a number of quality assurance processes is extensive. The team discussed this with students who welcomed the engagement but noted that, as expressed in the SWS, not all students were fully aware of the opportunities for their feedback to be presented and considered and that the agreed actions from the academic audit aimed to address this matter. Postgraduate research students have a representative on the Research and Enterprise Committee and the Research Degrees Committee (RDC). Student officers are also involved in retention and student support network (SSN) working groups.

137 Student representatives are offered training by the Students' Union. The academic audit identified that further briefing would be welcome and this is being taken forward. In discussion with the students that the audit team met, it was clear that some had received training, but others were unclear or stated that they had not received such training. This was particularly likely in the case of students acting as representatives for programmes delivered collaboratively.

138 Student officers also confirmed that the regular meetings with the Vice-Chancellor and senior staff, outlined in the Briefing Paper, are welcomed and have led to useful discussion and to resolution of issues that have been shared at such meetings.

139 The University has established a Research and Information Unit (RIU) which has responsibility for managing a range of student questionnaires and for sharing the analysis of these with ASDC. These are described later in this section (paragraphs 150, 151, 153).

140 RIU analyses also feed into APM annually and their analyses are considered by ASDC alongside APM reports and the outcomes of PAR. RIU also presents to ASDC a detailed analysis on the outcomes of the National Student Survey (NSS), and considers how feedback from NSS compares to the feedback that has been forthcoming from internal surveys. The RIU report presented to ASDC includes a report on how each faculty has addressed the feedback from the NSS, and the work of Solent Curriculum Working Group to work with students to find out more about their perception of good teaching.

141 Overall, the audit team concluded that there is evidence that the University is taking steps to review and further develop its processes for securing and responding to feedback from students, although it recognises that it has further work to do in this area.

## **Role of students in quality assurance**

142 Students are involved in a range of University committees. For example, Students' Union officers are members of Academic Board, the Board of Governors, and ASDC. In addition, there is student involvement in the University's extenuating circumstances panel and Academic Appeals Committee. A postgraduate research student appointed by the Students' Union is a member of the Research and Enterprise Committee, and another sits on RDC. Student representatives also sit on faculty boards, and representatives from each faculty sit on the Retention and SSN working group. Meetings of Students' Union representatives with the Vice-Chancellor take place on a monthly basis. These meetings in particular were highly regarded by the Students' Union officers.

143 Student participation also takes place as part of the programme approval process via membership of ASDC, which formally approves course development at programme approval stage 4, although there is no student representative at stages 1, 2 or 3. In addition, students contribute to the PAR process.

144 As noted above (paragraph 135), the University selected student involvement in quality assurance processes as a theme for its academic audit in 2007-08. The audit indicated that arrangements were found to be generally effective and broadly consistent with those of the benchmarked higher education institutions examined, although several areas were identified for improvement. The recommendations in the audit report were considered by ASDC in July 2008 and implementation of actions identified is currently in progress. The academic audit report notes that a small number of meetings were not attended by student representatives. This was verified in APM reports reviewed which indicated that there was an absence of student representatives at a number of APM review meetings. This had been targeted for action to ensure a higher level of student participation in this stage of the annual monitoring process.

145 Each course has a course/programme committee or a student-staff consultative forum, although the audit team did note some variation on this in relation to postgraduate taught (PGT) students who appeared to use an external blogging site to elicit student feedback as a replacement for more conventional processes. The briefing and training of student representatives is managed by the Students' Union. It was noted in the academic audit (2007-08) however, that students often entered into the role of representative with varying degrees of understanding about the role and its associated responsibilities. The academic audit noted that for 2008-09, there will be a site on myCourse which will identify course student representatives and explain their role, although this was not apparent at the time of audit. Of the 30 or so student representatives contributing to the academic audit (2007-08), none had attended training events. From discussions with staff and students, the team was unable to establish whether formal student-staff consultative meetings took place for postgraduate research (PGR) students, hence the alternative arrangements noted above. However, PGT students were included in such standard arrangements.

146 In the case of collaborative provision, a memorandum of agreement for each collaborative programme states that the college coordinator is responsible for arranging the election of student representatives, and arranging, notifying and chairing meetings of the Student-Staff Committee. The University coordinator attends meetings of the Student-Staff Committee, as well as the course management group, and staff team meeting, along with the college coordinator though evidence collected at audit suggests that communications relating to these committees could be improved.

147 The University states that it places considerable emphasis on listening and responding to the 'student voice', although the Supplementary Students' Union questionnaire survey commissioned for the purpose of the student written submission (SWS) found that 70 per cent of respondents felt that they did not feel part of the decision-making process at the University. It was noted that in the current academic period, deliberate steps have been made to improve communication between the University and the Warsash Maritime Academy (WMA) in particular, since its instigation as a faculty of the University in Sept 2008. One of the ways in which the University is attempting to integrate WMA is through closer liaison with the Students' Union, for example, via contributions at induction. However, there was no evidence that initial activity had been followed up.

148 As noted above, there are numerous avenues for collecting student feedback. Despite this, the audit team noted that some students, as stated in the SWS, responded adversely about the effectiveness of the student representative system in representing all constituencies. However, this view was not expressed in the student meetings. The team also noted that 'most' of the students contributing to the SWS reported not knowing whether their feedback had got to the right people.

149 The University states that it makes extensive use of student feedback in monitoring and evaluating the appropriateness and effectiveness of learning opportunities and effecting enhancements. This contrasts with some of the views expressed by students in the SWS, and noted above. The Solent Unit Evaluation survey (SUE) embodies a within unit 'dialogue' between staff and students for the identification of immediate learning issues, and culminates in an end of unit online evaluation survey. The final reporting phase uses a standard template summarising student feedback, and these are utilised in the APM review meetings which include student representatives. Students commented on the lack of information provided to them on the response by the University to outcomes from the SUE surveys, and said they only found out by asking students in the year below them what changes had been made. They felt this was a factor in the very low participation rate by students in the SUE feedback survey.

150 SUE was first implemented University-wide in 2006-07. Response rates remain fairly modest and steps are being taken by the University, most notably the RIU, to improve the response rate in all areas. However, student concerns regarding confidentiality, survey overload, and continued lack of awareness (in the case of WMA), continue to present difficulties. The University's view is that more use of myCourse will encourage students in giving feedback. Nevertheless, despite these response rates, the audit team noted that action plans arising from the Unit reports do suggest actions informed by student feedback.

151 The student experience satisfaction survey (SESS) is administered by the RIU to those students not included in the NSS (years one and two) and who are registered to courses scheduled for PAR in the following year. These methods are supplementary to the NSS results, which are again analysed by the RIU before reporting on to ASDC. The SESS and SUE data is used to support APM of the course for the following year. The overview reports produced by RIU from all three surveys are used by faculty boards and ASDC, in the latter case to identify university-level issues, emerging themes and actions to be taken.

152 For the NSS in 2007-08, the University achieved a response rate of 65 per cent, representing a 3 per cent increase from 2007. The lowest rated areas in both the NSS and SESS in this period were 'assessment and feedback' and 'organisation and management'. The audit team, however, found evidence on the basis of SESS that there was some improvement from the previous year in the area of assessment and feedback (1 per cent increase on SESS measure), which may reflect institutional efforts to take targeted action in this area. Among other actions, a Teaching Quality Enhancement Fund (TQEF) project has recently been commissioned to address this, although this currently represents a work in progress.

153 The survey results inform faculty action plans, and the RIU are in the process of conducting research with level 2 students to identify key issues for targeted action. In addition, a number of TQEF projects have been initiated to deal with assessment and feedback issues, as well as the Flexible Learning Academic and Graduate Skills (FLAGS) project by SOLENT Life Group, to develop online flexible learning activities designed to encourage a greater reflection upon learning.

154 Another mechanism of collecting student feedback, noted by the audit team, involved the use of monthly user surveys commissioned by the library. These were quite successful in eliciting approximately 100 responses per survey. They were focused and targeted and offered quick responses to the students, going some way to address concerns expressed by the students in this area and recorded in the SWS.

155 The audit team concluded that significant steps were being taken to collect feedback from students and to analyse this evaluative material through its committee structure.

### **Links between research or scholarly activity and learning opportunities**

156 The University has two linked strategies which it sees as mutually reinforcing, namely the Teaching and Learning Strategy 2008-13 and Research and Enterprise Strategy 2008-13. Their objectives are considered as part of staff appraisal, and faculty achievements against the Strategies'



performance indicators are evaluated annually, by ASDC and the Research and Enterprise Committee. This evaluation is based upon analysis and reports from the faculties, SOLENT Life Group and the Academic Standards and Quality Service (ASQS). Each faculty has a research and enterprise strategy which aligns with the institutional Research and Enterprise Strategy 2008-13, and articulates with an annual implementation plan. Encouragement is given by faculties for staff to develop cross-University research clusters, as in the case of pedagogic research, for example, an area included in the recent Research Assessment Exercise submission. These research clusters are to be developed around themes rather than disciplines, for example, the Centre for Advanced Scholarship in Art and Design, reinforcing the drive for cross-institutional activity.

157 Under the Teaching and Learning Strategy 2008-13, programmes offered by the University are required to combine academic, theoretical and practical study, foster critical, creative and personal skills for self-development and employability, and provide opportunities to apply higher knowledge and skills in 'real life' and 'real work' learning situations. The focus on employer engagement has become a specific focus for the University since the approval of the current strategic plan. Aspects of this employer engagement include sandwich degrees and short term placements/internships; sponsored students (as at WMA); employer fairs; short continuing professional development (CPD) engagements for external clients; research and consultancy projects; staff participation in local employer forums; employer liaison panels; guest lectures, for example, as in the Police on Criminology course, a unit on Leadership Practice in the Criminology Degree programme; and student enterprise activities, for example, Student Placements for Entrepreneurs in Education. The audit team was aware that a number of new course developments demonstrated strong engagement with external bodies, such as the Royal Horticultural Society in the case of the BA (Hons) Garden Design (Contemporary Spaces). Existing course accreditation by professional bodies is notable and the team saw evidence of engagement with a range of professional, statutory and regulatory bodies.

158 The Learning and Teaching Strategy includes a clear commitment to 'connecting theory and practice', with inputs from employers, and again this is a feature that is generally commended by external examiners. External examiners have also commented positively on employability skills, with examiners noting that the course contributes to, and promotes employability, with a significant number noting that this was a key feature of the provision. The students met by the audit team were very positive about the efforts made by the University to enhance the employability of the students. The team was still unclear, however, whether the University's stance on placements was one of 'encouragement' to undertake them (over the summer, for example), rather than to embed them within the curriculum with assessment, for example, linked to experiences. Like much of the enterprise agenda at the University, there is much to commend, although the contribution that this makes to the strategic mission of the University is still a work in progress.

159 A variety of examples of work placement was discussed with the audit team including a placement in a language school (summer), journalism and advertising placements, and the team also heard about work-based credit within sports management programmes. The Students' Union take a proactive stance in running a number of workshops and practical sessions designed to improve employability and skills development.

160 The Learning and Teaching Strategy states that curriculum content will incorporate and reflect the latest scholarship within disciplines and up to the minute practice. There are also several examples in the Strategy of how staff will be supported to deliver the Strategy aims, such as through study for postgraduate qualifications, contributions to subject and discipline networks, research and professional practice, and engagement with industry. As a demonstration of the University's support for these aims, the audit team was able to evidence an active staff advanced scholarship programme, with seminars led by tutors in the Faculty of Business, Sport and Enterprise in 2007-08, for example, covering a diverse range of areas. These included the Professional and Personal Development of Human Resources Professionals, and Digital Marketing and Managing Risk in the Tourism and Events Management Sectors. The University's Business

School also organises conferences in the area of advanced scholarship, drawing upon the experiences of staff and their use of the virtual learning environment (VLE), simulations as an approach to learning and teaching, and community engagement and knowledge exchange.

161 Recent evaluations at the University indicate that staff engagement in research, enterprise and professional development activity is increasing and feeding into the broad aspects of student learning and experience, as evidenced through recent external examiner reports (2006-07), where 'industry relevance' was rated highly. External examiners also reflected positively upon the use of case-studies, the applied nature of the course, and the use of placements. The University suggests that there is an effective system for monitoring staff research and advanced scholarship activity, and like many recently introduced systems and practices, this will make a more measurable impact as it becomes embedded in standard practice. The engagement of staff in research, enterprise and professional activity is monitored annually (see paragraph 210).

162 The Research and Enterprise Strategy specifically states the aim of enhancing the student experience through research, practice and enterprise. The Strategy has key aims which focus upon increasing the level of research, advanced professional practice, earned income, links to curriculum, and sponsored professorships. It also states the aim to create research clusters and to enhance the research environment for PGR students. The audit team heard that PGR students will be sought in specialist areas only, to align with the developing research clusters, and that the real focus will be on taught master's degrees. It is the University's view that the PhD offer should be distinctive, dynamic, and recognised for its innovative approach and be of significant use to employers.

163 The University is in the process of establishing four Solent centres, one in each faculty, using Higher Education Innovation Fund (HEIF4) funding. The Solent Centre for Enterprise and Professional Development, for example, is intended to work closely with a number of key external organisations based in Southampton, such as local National Health Service Primary Care Trusts, and the City Council, in mapping and meeting workforce development needs. This will establish the Centre as the 'lead' provider of management and business-related CPD activities. Similarly, the Solent Centre for Innovation and Design in the Faculty of Technology will focus upon the product design and development needs of small and medium enterprises in the region which are operating in the maritime and small-scale manufacturing sectors. It is anticipated that when fully established, all four centres will report through a bi-monthly Enterprise Strategy Steering Group, chaired by the Pro-Vice-Chancellor, External Development, and consisting of deans, and/or faculty management team representatives and the centre managers. The group will make regular formal reports to the Research and Enterprise Committee through its status as a subcommittee.

164 In relation to resource allocation, faculty and service development plans incorporating a risk matrix and capital bid, are prepared by deans, directors and the Head of the RIU, and submitted on an annual basis, with guidance from members of the Vice-Chancellors' Group. Faculty plans require reference to the faculty NSS Action Plan, Research and Enterprise Strategy and Enhancement Strategy, together with reference to the new Solent centres, further education and other partnerships. Income targets have been set, although QAA's Information Digest shows that the amount of research income to the University has been diminishing in recent years.

165 The audit team concluded that the University is making progress in enhancing the links between research and scholarly activity and learning opportunities, through its own reporting and monitoring mechanisms and via the use of institutional resources in establishing the Solent centres as catalysts for further research and scholarly activity.

### **Other modes of study**

166 The University's strategy identifies as an objective the development of 'inclusive and flexible forms of Higher Education that meet market needs'. It also has as an aim of its Teaching and Learning Strategy to 'build and constantly renew a flexible learning experience that meets the diverse needs of students and their prospective employers'. The Learning Technology Unit is

responsible for the roll out the VLE (myCourse) and to drive expansion of e-learning/blended learning. A rolling programme of staff development is being undertaken by the Learning Technology Unit in connection with the roll-out of the VLE and to encourage developments in e-learning/blended learning.

167 Although this area is key to the strategic thinking of the University, the audit team had evidence of poor performance in the support of learning conducted flexibly in the Foundation Degree review Computer Studies report (see paragraph 103). This related to the delivery of the programme through distance learning and the failure of the University to implement an appropriate supporting framework for students. While the reviewers had confidence in the emerging academic standards and emerging achievements of students, the reviewers had no confidence in the quality of the students' learning opportunities. Following the review, the University suspended recruitment to the programme, and initiated an action plan to enhance the quality of the student experience, and assure the standard of education delivered. However, to build on the satisfactory resolution of this issue, the team would encourage the University to continue to undertake careful monitoring of all current and future planned provision in the area of flexible and distributed learning, particularly that which is remotely delivered.

168 The VLE (myCourse) is integral to the University's approach to flexible learning, and was launched in September 2007. Evidence collected during the audit suggests variability in the extent to which staff have engaged with it in delivering learning opportunities. However, the audit team heard that where it was used, and used well, this represented a most helpful resource for student learning. Collaborative partners generally use their own VLE for example, CityBook at Southampton City College.

169 The audit team heard that the academic content of myCourse mainly took the form of lecture notes. Some tutors were more imaginative in its use, as in organising interactive forums through the VLE, but this was not consistent across subjects or course teams. There was some evidence, however, that tutors did improve their use of the VLE at the students' request by posting links to useful resources, for example. The use of myCourse did not seem well represented within WMA, and will require additional institutional support in order to become embedded in practice. The team did hear, however, that liaison was good between course teams and the Learning Technology Unit (LTU), as in the case of the posting of material to the VLE in relation to WMA courses, and in particular, the Philippines provision relating to the Postgraduate Certificate (PgCert) in Maritime Education and Training.

170 The audit team also noted that the overseas Philippines-based provision in the area of a PgCert in Maritime Education and Training, uses a blended learning approach, with face-to-face contact, both overseas and in the UK (through the use of University tutors), supplemented by use of the VLE (see paragraph 230). The team was told that the University's key focus is upon the need to meet the learning requirements of a diverse range of students, and that blended/flexible learning approaches are used to achieve this end. The development of courses using flexible and distributed learning was not viewed as an end in itself by the University.

171 The audit team encourages the University to continue to apply careful monitoring of developments in the area of flexible and distributed learning, as this is likely to become more prominent as a vehicle for future expansion of the University, in line with the current strategic plan.

## **Resources for learning**

172 The University's Teaching and Learning Strategy was informed by the widespread consultation exercise relating to the award of university title. At the heart of this strategy lies the institution's focus on graduate employability. In turn, the Teaching and Learning Strategy is supported by the Research and Enterprise Strategies.

173 Library and Information Technology (IT) Services are consistently the highest scoring aspects of provision in student surveys. This was to a large extent borne out by discussions between the audit team, and those staff responsible for supporting the students' learning.

174 The Learning Support Services of the University include the Mountbatten Library and Learning Resource Centre (LRC) located on the main East Park Terrace Campus, and a second library and LRC at the WMA, are managed by the Learning and Information Service (LIS). The audit team was able to evidence that the library is well-stocked and that students studying with local collaborative partners do have access. Research students greatly valued the range of resources offered, and the team heard that interlibrary loan facilities were readily available and well used.

175 In relation to the approval process for course provision with collaborative partners, the audit team heard that the LIS works closely with partners and course teams to assess resource adequacy. This process was subject to some variation in implementation, however, as detected by the team in the case of overseas collaborative provision, where academic staff rather than LIS staff were used to carry out formal resource checks in the case of the partner (see paragraph 249).

176 The LIS has developed the University portal and works to enhance provision in conjunction with faculties and ASQS. It also acts in direct response to student feedback, as in the monthly library users' survey, although students meeting with the audit team did not seem aware of this. There is a new library management system designed to ease online search facilities, which is greatly appreciated by the students. There is also a system of subject librarians who work closely with academic course teams to ensure that resources remain current and fit-for-purpose. The extensive availability of online resources ensures 24-hour access for students. The Library also operates a system of library student ambassadors (launched in September 2008). These are intended to provide peer support to students on the use of the Library, although the students met by the team were unclear about their role, the perception being that these 'volunteers' are merely used by the Library to extend opening hours beyond those operated by the Library staff. New social learning areas have also been introduced in the Library and LRCs during 2007-08 following an institution-wide learning spaces consultation project led by the LIS and involving students.

177 Study assistance provides one-to-one study skills tutorials and a range of support is available for students with disabilities, including dyslexia (the latter involving assistive technology).

178 A suite of online tutorials designed to improve academic skills of the user has also been newly introduced and is available over the institutional VLE. This initiative, 'succeed@solent', also provides an academic skills help desk in the Mountbatten Library to complement face-to-face support already available through information librarians. The audit team detected some uncertainty among some students met during the audit, with regard to 'succeed@solent', although this could be explained by the fact that many of these students were in advanced stages of their course.

179 The students were particularly enthusiastic about the general quality of online information and support. For example, the HelloUni web pages were found to be of particular value. In relation to personal development planning, Reflections is designed to enable students to reflect upon their own personal journey, identifying their strengths and areas for improvement. Reflections is introduced during spiral induction sessions where the students focus upon their expectations of their course with tutors. The students met during the audit seemed to have little knowledge of this, although were more knowledgeable and appreciative of the Students 1st Information Centre, and the University's portal offering online guidance on curriculum vitae (CV) preparation, funding, accommodation and counselling.

180 The audit team noted the important role that LIS plays in developing learning support systems and rolling out new technologies such as the VLE myCourse. It also noted that the previous Institutional audit report (2006) had identified that the remit of the LIS team was challenging and perhaps rather too wide. In discussion with staff, the team heard how the University has invested in provision of expertise in VLE development and delivery and heard from

a range of staff and students about the very positive impact that the work of LIS is having on their work and learning experience. MyCourse, utilises a Moodle-based platform, and was designed by the University's LTU and launched in September 2007 after a year-long pilot. LTU, comprising learning technologists and supporting staff, also trains academic staff in the use of the VLE and in their own e-learning development.

181 Expansion of e-learning and blended learning is highlighted by the University as part of the institution's objective to enhance flexibility and accessibility of learning opportunities. The audit team noted that in the recent PAR for Law (2008), tutors were commended for their e-mentoring approaches for keeping regular contact with student groups. To facilitate this process at WMA, all main teaching areas have been fitted with networked computers and audio visual equipment to assist in lectures. This work coincided with the refurbishment of the campus IT suite (during summer 2007), and the number of work stations was increased to reflect the growth in student numbers, and to better support the use of myCourse. This did conflict to some extent with evidence gathered by the team that IT resources at WMA in particular, were barely adequate. The team was able to hear of several examples of innovative approaches to learning and teaching involving the LTU, such as in the use of MP3 player equipment trialled with WMA students, the faculty being particularly keen on mobile learning, given the non-traditional study patterns of many of its students.

182 The audit team was of the view that the University makes a considerable commitment to the development of its resources for learning, particularly those that are made available electronically. As the University expands and styles of learning and study patterns evolve, it will be essential to monitor and evaluate continually the effectiveness of these resources.

### **Admissions policy**

183 The University's approach to widening participation is set out in the Partnership Strategy and the Marketing and Recruitment Strategy, although there is no explicit widening participation strategy. Both of these strategies have performance indicators, and the RIU analyses institutional performance against benchmark data taken from the Higher Education Statistics Agency return. This data is considered at university level by the Management Board. The University's comparative performance against other universities in terms of widening participation is also considered by ASDC. The Partnership Strategy sets objectives to continue the commitment to widening participation in higher education through collaborative partnerships, including AimHigher and the local lifelong learning network. Its involvement in the regional lifelong learning network alone has generated 39 progression and compact agreements to date. New progression routes allow learners from diverse backgrounds and in varied situations to access higher education, thereby increasing the emphasis on flexibility of delivery, in terms of time, location, mode and pace of study.

184 The University continues to perform generally well against national benchmarks for widening participation of under-represented groups, although the latest figures indicate that performance had dropped below location adjusted benchmarks for young full-time 'other-undergraduate' students. The percentage of students from low participation neighbourhoods was 1.8 per cent below benchmark, and the percentage from state school or colleges, 0.1 per cent below benchmark. The University did, however, continue to meet or exceed benchmarks for full-time students in receipt of Disabled Students' Allowance.

185 Entry requirements set above the University's threshold levels are approved at validation and recorded in programme specifications. In September 2006, the ASDC requested that an academic audit should take place on student admissions during the period 2006-07, the report being forwarded by the admissions working party which made recommendations to ASDC and the University Management Board. It was concluded that admission requirements for all courses in the audit sample were not correctly published on the University's website and that printed publications following programme approval or modifications lacked clarity.

186 Recommendations arising out of the academic audit included a full review of course marketing material to ensure that published information is complete and correct. The University is now beginning to introduce entry profiles, in accordance with UCAS practice, and as a way of making its acceptability of a wide range of entry qualifications more explicit. Current activity in this area involves the capture of entry requirements data for new provision at the time of course approval, and for current courses, revised arrangements are under discussion with UCAS. In the view of the audit team this does demonstrate an institutional commitment to increasing the accessibility and flexibility of its provision as set out in its Partnership Strategy.

187 The University has a policy on admission through accreditation of prior learning (APL) and AP(Experiential)L, where in the latter case, credit is given for equivalent rather than identical learning outcomes, which aligns with QAA guidance. The University recognises both prior certificated and experiential learning. Where credit is to be awarded for APL this is approved by a subcommittee of the examination board.

188 Applications and recruitment data are regularly analysed at faculty as well as university level, and are considered by faculty management teams and the senior management throughout the year.

189 Given the University's mission, particularly in relation to the inclusive and flexible forms of higher education to which the University is committed, it is the audit team's view that the current admissions policy remains fit-for-purpose, but that continual monitoring will be necessary as the University extends into more collaborative arrangements in the future.

### **Student support**

190 Student support includes the SSN consisting of student support tutors for programmes and a student support network officer (SSNO) for each faculty. Initial student enquiries are managed through a help desk in each faculty office. The primary responsibility of the SSNO is to offer advice and guidance to students regarding course and personal issues. The audit team was able to verify that this was valued greatly by all students, with the SSNOs acting as the first point of contact for discussions regarding extenuating circumstances claims and appeals. The SSNOs have a reporting line to the Associate Dean of Faculty (Operations), and in addition to their central role at the hub of the student support, they have an important liaison role with academic tutors, particularly those who are new in post. The SSNOs maintain cross-faculty links with their counterparts elsewhere in the institution to share practice and consistency of approach. The SSNOs also participate in a number of faculty and University-wide operational and strategic committees and working groups. The SSNOs also promote the formation of self-help peer support groups allowing the discussion of issues with peers and the sharing of experiences. The team was impressed by the role of the SSNOs as an effective interface with students in the coordination of student support and sharing of good practice across faculties and agreed that this represented an area of good practice.

191 SSN staff liaise closely with the academic skills support staff and with advisers in Students 1st in the LIS. Students 1st is a University-based information centre offering advice and guidance on a range of topics. The service is part of LIS, and responses received in the SWS consultation process demonstrated good awareness of Students 1st and the range of support offered. The support offered to students was generally deemed to be excellent, with the exception of some part time, postgraduate and WMA Faculty students. Students with disabilities were particularly enthusiastic about the level of support, as verified by the audit team at meetings with students. There was some evidence that there may need to be some targeted awareness raising of study assistance focusing upon international students, although a selection of students seen by the team confirmed their satisfaction with support arrangements for international students. Part-time postgraduate students appeared less aware of support, with a perception that they were more marginal to the central support services. This was confirmed to some extent during the audit, where the team heard of the absence of a formal staff-student consultative forum for PGR students, necessitating the initiation of less formal self-help networks. WMA students felt more isolated from the main University campus

and hence more peripheral to the full range of support services offered, partly as a result of the nature of their studies, which involved significant periods at sea.

192 Students in general, and particularly those at WMA, valued the student portal. This not only gave access to essential course information, including unit descriptors, unit assessment and related learning outcomes, but also allowed students to ask questions at any time, with responses posted by Students 1st Information Centre staff.

193 A new online CareerBox computer-aided career management tool developed and maintained by the University careers advisers is available on myCourse. There is also a new CV and Career Building curriculum plus unit which is delivered by careers advisers at the University. There are three new staff employability forums to assist information sharing, research and good practice across the faculties. A new mentoring plus programme has also been launched linking students with external employers; 900 companies and 2,000 students and graduates are also registered on the Graduate Jobs Southampton website advertising regional graduate job opportunities. During 2007-08, a new SSN site was established on the VLE in order to facilitate the sharing of information and research between SSNs.

194 The University Careers and Jobshop advertises a full range of work-based opportunities (placements) on its vacancy database. Several courses at the University offer an optional placement element, or have placement requirement in the case of Foundation Degrees. The audit team heard that information regarding arrangements of these placements could be made available quite late in a student's programme, thereby eliminating the option of some of the more prestigious employers. However, during placement, the level of support offered by the University (and the employer, through an employer-based mentor) was deemed by students to be very good. Careers and Jobshop has a team of employment advisers who provide information on possible placements through the daily Jobshop desk. The University mentoring plus programme supplements this activity, by matching students with volunteer mentors from the local community. One-to-one business mentors are available to each student for six hours. The mentors offer support and run careers workshops to prepare students in joining the jobs market.

195 Students of WMA have different support arrangements reflecting their sponsored status, including a Cadet Administration Officer and a Liaison Officer to support cadets in their contact with sponsoring organisations in the UK and overseas. Since 2006-07, WMA has taken significant steps towards enhancing the student experience via its student support facilities. WMA has introduced its own Student Support Office and enhanced its SSN now that it is a faculty in its own right. The audit team was able to verify that these new arrangements at WMA were adding value to the students' experience. As an example of these improvements in support services, in September 2007, a freshers' week was run for the first time at WMA for the first-year intake.

196 Prospective students and new students joining the University, benefit from the pre-arrival HelloUni information site (paragraph 179), which was well-regarded by the students met during the audit. This site contains information on a broad range of areas including student accommodation, and other essential advice for those about to embark upon their studies. The audit team learned that enhancement to this site was ongoing, with a recently introduced 'parents page'. The team was impressed by the efforts of the University to engage the students pre-arrival, and also commended 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, as an example of good practice, designed to enhance both recruitment and retention.

197 Induction week takes place on arrival, and before the start of teaching, followed by a week of activities and events specifically for overseas entrants, including postgraduate students. The audit team was informed that the induction activities for overseas students were particularly highly regarded. The team was also told that a system of 'spiral induction' takes place over the first six weeks of the academic year, aimed at level 1 students. However, perception and awareness of these arrangements appeared quite variable among those students met by the team. An example

of student support around academic skills development early in a student's programme is the FLAGS initiative, supported through TQEF, and undertaken by LIS in 2007-08 to develop interactive resources on myCourse, and also to provide student engagement indicators.

198 In the case of WMA, the audit team heard that this induction programme was more helpful in terms of social orientation rather than the preparation that it provided for academic study. Nevertheless, it was now a standard feature for students starting in September and January, and included presentations by the Students' Union, Students 1st and faculty. The effectiveness of induction in collaborative partners was more variable, with little information passed on regarding student support systems at the University, and limited involvement of the Students' Union at the University. In contrast, the Students' Union had established a more visible presence at WMA, although further integration of the Faculty into central support structures represented a work in progress. The SWS suggested that part-time students are not well inducted to their programmes of study, although the team did hear contrasting messages from an appreciative group of students in this area at the audit.

199 One major criticism in the SWS concerned the information provided to WMA students with comments about lack of information before arrival. Only a minority (46 per cent) felt they had enough information on their courses to enable them to fulfil personal aspirations. The audit team heard that the main axis of communication is often between the University and the sponsoring organisation on these maritime-based courses. Consequently, the responsibility for ensuring that the students are well informed prior to the start of the programme is less clear. There was also some discontent with the general communication between staff and students, as noted in the SWS, although this was not borne out by discussions between the team and students during the audit.

200 Students are generally complimentary about the levels of support that they enjoy with the exception of WMA and part-time postgraduates. Certain adverse comments from postgraduate part-time (PT) students in the areas of 'insufficient focus on needs of PT students' suggests that the University could focus to a greater extent on the PT student experience. There is also a developing issue around the replacement of wardens with security guards at WMA that may need some attention by the University. There was obvious dissatisfaction among students concerning the notification of lesson cancellations, although the audit team did hear of new initiatives that the University is trialling in relation to text-messaging to remedy this complaint, and this is being piloted in the faculties.

201 Generally, students have a clear impression of what the University expected of them, and feel quite well prepared for study. Some adverse responses were noted regarding tutor availability, inconsistency in tutor expectations, and breadth of assignment briefs. One faculty monitoring report considered the possible relationship between student expectations of levels of support as they progressed and student performance. Its finding accorded with RIU research (2006) that student satisfaction declined as they progressed through levels. The investigation also highlighted poor attendance as a contributor to poor performance, and suggested a possible link to paid work. Further outcomes of this investigation included a number of TQEF-funded enhancement projects and a drive for more creative timetabling and flexible forms of delivery.

202 The audit team heard that there was some variation in practice on the return of student work post-marking and moderation by faculties, with not all students being allowed to retain their work. However, all received written tutor feedback on a separate sheet.

203 The University also asks students to request feedback on specific aspects of their work, although as yet this is reported as insignificant in terms of the number of students making that request. Examination of the feedback report forms by the audit team indicated that there is limited space on the pro forma to offer general feedback, which concurs with the view of some of the students met at audit that the feedback is often of a general/vague nature.



204 External examiners have in the past been critical of assessment feedback, with one in four commenting negatively, as recorded in the 2006-07 analysis of external examiner reports. This continues to be an area of targeted action for the University.

205 In conclusion, the audit team was of the view that substantial support existed for students, although some variability in practice was detected across the institution, particularly in relation to support for assessment. The team felt that the issue of poor achievement by some students at level 2 merited continued close investigation to ensure that the level and nature of support was appropriate across all year groups to allow all students to achieve their potential.

### **Staff support (including staff development)**

206 The University states that staff development, research, enterprise and professional practice are central to its strategic plan. Moreover, among the strategic priorities for 2008-09, as informed by the objectives set out in the Strategic Plan 2008-13, is to 'create a strategy to control costs' and secure 'staffing for change' on a long-term basis. There is a staff training and development plan, which was updated in May 2008, and the career development scheme (part of the Solent National Framework Agreement 2007) is claimed to align development of staff capacity and capability with the Strategic Plan. It is anticipated that the new training plan will be reviewed on a rolling two-year basis.

207 The former University Training Plan (2006-08), provided an initial two-year programme to correspond with the University Strategic Plan of that time. The plan complemented the work of the Solent Curriculum Group (now Solent Life Group), and was informed by an extensive training needs analysis during 2006 involving all faculties and services. Three over-arching training needs were identified at that time, namely, improving the customer experience, becoming more enterprising and managing people better.

208 To guide, monitor and evaluate the effectiveness of this plan, a new training and development forum was established in spring 2007 to replace the former staff development forum, which needed strengthening. The forum operates as a task group which reflects its style, approach and methods of working. The audit team heard that this approach was viewed as highly effective by staff of the University.

209 The preparation of the new Strategic Plan and allied HEFCE Strategic Development (Transformation) pilot funding to support the development more flexible forms of delivery, and closer links with employers, highlighted that the University's training and capability development agenda will require more attention and increased investment. Phase one of the transformation programme is to include a detailed examination of needs and requirements.

210 A new employee appraisal scheme was introduced fully in May 2008, following a pilot with two faculties and service departments and using the services of an external Employers' Association to support the training programme. The purpose of the new scheme was fourfold, namely, to clarify job role, to offer an opportunity for reflection upon the previous 12 months of activity, to look ahead in terms of objective setting, and to focus upon personal development over a time horizon of three years. The new scheme has replaced the probationary requirement of all staff with a more positive focus on personal development. The first 12 months following appointment, involves a meeting every three months between the appraiser and appraisee which is more closely linked to induction. In addition, new academic staff are supported by the appointment of a mentor and a larger sample of their marking is subject moderation. Appraisers receive rigorous training based upon a diagnostic, and currently support, on average, approximately eight appraisees. The appraisal scheme is separate from the exercise to monitor and evaluate the engagement of staff with the research and enterprise agendas, where the University conducts a set of interviews with each member of staff to record all activities, undertaken and planned in the area of research, enterprise and professional practice (see paragraph 161). This data is reviewed by the faculty, and sent with the implementation plan to the Research and Enterprise Committee.

211 The audit team heard that there was no recognised staff promotion scheme, other than by vacancy, and that which operates for the designation of professors (for which published criteria exists).

212 In advance of the delivery of a new six-module leadership development programme for academic leaders (accredited at levels 3, 5, and 7 by the Institute of Leadership and Management), an externally facilitated examination of future needs was instigated (spring/summer 2008). This development programme is currently delivered by an external organisation, with the first level 3 and 5 programmes now operational. The audit team did, however, detect evidence that attendance in the early part of the programme had been poor.

213 A staff induction working group currently operates, with ongoing activity including the transformation of induction, to a wider welcome/orientation programme to start at the point of offer of employment. This will link with a newly proposed accredited recruitment and selection programme, and the first year of the appraisal process.

214 Future areas for consideration by the training and development forum include talent management, core competencies and future training models such as Certificate to Practice.

215 The University has a Higher Education Academy (HEA) accredited 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. Some remission from teaching for attendance on the programme is available for full-time staff. The audit team noted that the decision on whether a new appointee should be required to complete all elements of the PgCert, or only part (if, for example, they were already in possession of a teaching qualification), is left to the appointment panel chair. The team also heard that staff in collaborative partners can access the PgCert and other staff development events held at the University, although there would be a charge for the PgCert and attendance at other events was limited by the nature of teaching contracts in further education. There was no systematic monitoring of attendance by collaborative partners at University staff development events. A version of the PgCert in Learner Support was also available for administrative and support staff.

216 A variety of pedagogic staff development activities takes place in programme and subject groups within faculties, managed by the associate deans (Enhancement) in collaboration with academic leaders.

217 Much recent staff development has taken place around the strategically important area of flexible learning, and in particular in the use of the VLE (myCourse) to support this learning. Success of staff development in myCourse is variable, and although it is reported that take up is now as expected, the audit team detected some discrepancy when contrasting the faculties. Take-up at WMA, in particular, was very variable.

218 It was noted by the audit team that the new PAR process also represents a good development opportunity for bringing together staff, and sharing good practice with colleagues not normally encountered within an individual programme.

219 The University Curriculum Fellowship Scheme was introduced in 2006-07 using TQEF funding to support staff who successfully put forward a project to develop their pedagogic good practice for dissemination. As this system embeds, it could become an area of good practice in the future. Finally, there are also workshops in PGR supervision and research leadership that are offered on an annual basis.

220 Following an invitation across the University to propose projects that would qualify for TQEF funding, 43 project ideas were submitted, and examined by the Solent Life Group (ASDC 27/02/08) 08/ASDC/15); 15 projects were approved and funding of £175,000 was allocated for 2007-09 period. A number of areas were identified by the Solent Life Group as indicative of the type of project that would be supported, for example, linked to NSS results (and in particular

assessment and feedback, organisation and management), the University's grading criteria, Retention, Employability, extended use of blended learning, introduction of innovative models of assessment, curriculum design, activity-based learning, peer-peer and peer-tutor engagement. Project funding of between £2,000 and £15,000 is available for each project. The team of curriculum fellows and TQEF project researchers are seen as a network for generating and disseminating pedagogic innovation and good practice within the University and producing pedagogic research and professional practice outputs.

## **Section 4: Institutional approach to quality enhancement**

### **Management information - quality enhancement**

221 In its Briefing Paper the University 'recognised that enhancement of teaching and learning...had largely taken place at the "local" level of the course or programme and in 2005 launched a number of strategic initiatives to address this'. There is no explicit reference to enhancement (although it is implied) in the University's Teaching and Learning Strategy. Each faculty has appointed an associate dean (Enhancement) and academic leader (Enhancement) to facilitate enhancement activities both within and across faculties.

222 The University states that it engages in systematic enhancement. Recent changes to the engagement with external examiners are stated to increase their contribution to enhancement citing the University's intention to enhance student employability as an example. The processes of approval, monitoring and review are said to be examples of systematic enhancement although the audit team was of the opinion that there has, to date, been a concentration on enhancement of quality assurance processes rather than of the student experience. Evidence from key performance indicators and monitoring criteria are also claimed to help identify and address issues but the team was unable to find evidence of how they have led to enhancement of the student experience.

223 The University states that improved availability of management information is a major support for enhancement activity citing analysis of NSS and student experience satisfaction survey results as stimuli for increased attention to assessment feedback and course organisation. This has resulted in a TQEF-supported project on students' perception of feedback that is underway but not yet completed.

224 The Solent Life Group (previously the Solent Curriculum Working Group) was established as a driver for teaching and learning enhancement and dissemination of good practice. It brings together key staff from faculties, including the associate deans (Enhancement), and services and carries out research and development activities on behalf of the Academic Standards and Development Committee (ASDC). It also has a major role in considering applications for curriculum fellowships and collaborative enhancement projects supported by TQEF. The Group agreed that 'TQEF funding should be used creatively to support collaborative enhancement projects, both across the University - involving faculty and service staff with students - and with external institutions and organisations'. The projects completed and underway represent a mixture of cross-institution and subject specific. The University claims that 'Distributing significant levels of support to mixed teams of staff and to individuals is a deliberate initiative to foster staff engagement and exchange and to forge a community of teaching and learning enhancement practice within the University, informed by sector good practice and by research'. Positive examples of this are developments in electronic support for teaching and learning. The succeed@solent initiative began as a TQEF project and there are a number of projects involving myCourse. However, at the time of the audit the practice was still in its infancy. The audit team therefore encourages the University to continue the practice and to disseminate the outcomes widely across the institution.

225 The recent changes to the external examiners' feedback form have encouraged the examiners to identify areas of good practice. For 2005-06 and 2006-07 these were collated into detailed annual reports to ASDC, with a recommendation for the same to happen for 2007-08 reports. The audit team commends this practice but was concerned that the annual reports were submitted in the June following the examination period, thereby reducing the opportunities for timely action. It was also not clear to the team what impact the reports have had in enhancing the student experience, although they accept that this process is still in the early stages. The University may wish to ensure that the outcomes of the reports are clearly disseminated and acted upon in a timely fashion (see also paragraph 87).

226 Interaction with the HEA networks appears to be limited as the University states in its Briefing Paper that '...large tranches of the University's provision, for example in Media, are not represented in the HEA subject networks'. The audit team was not persuaded by this claim as alternative 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.

227 Curriculum fellowships and TQEF projects are conceived to have a staff development dimension. In particular, the curriculum fellowships 'function as an incentive for staff to engage in pedagogic enhancement'. The audit team agreed that there was the potential for this to happen and that the University should consider building on this for the future.

228 The audit team considers that the University is in the early stages of a process of systematic enhancement at institutional level. The outcomes of the initiative and changes are yet to be fully embedded within the University systems and procedures.

## **Section 5: Collaborative arrangements**

229 The University currently has a small portfolio of collaborative provision. It maintains a collaborative provision register on its website, and this reports two current collaborations. First, a long-standing collaboration involving a Foundation year programme in Art, Design and Media delivered through Southampton City College. Second, HNC and Foundation Degree provision in built environment disciplines with Bournemouth and Poole College which commenced in 2008-09. However, the audit team noted two other programmes, not on the collaborative register, but which had features of collaborative provision.

230 First, the PgCert in Maritime Education and Training is delivered partly in the Philippines and partly at the University by staff of the Warsash Maritime Academy. The audit team was told that delivery by the University staff made use of the learning resources of colleges in the Philippines with local staff assisting in the orientation programme, and that University library staff had provided advice on the acquisition of books and learning materials to support student learning locally in the Philippines, with the International Maritime Training Trust providing core texts to students.

231 Second, the University was a member, with two other universities, of the joint partnership which had formed the National Validation Council (NVC). As part of the development of NVC, from January 2008 the University had taken responsibility for the oversight and management of the BTEC Foundation Degree in Electrical and Electronic Engineering at Lincoln College. The University's Faculty of Technology had appointed a link tutor to the provision, the University had appointed an external examiner who had attended the examination board at the College with the University link tutor, and the University had undertaken annual monitoring of the programme using NVC documentation. The University is looking to transfer the provision to a university more local to the College, but it did permit the recruitment of a second cohort of students in 2008-09.

232 In its Strategic Plan 2008-13, the University indicated that the formation of 'imaginative external partnerships' will be a key part of its vision and objectives. The University intends to develop new collaborative provision in several directions: links with indirectly-funded further education colleges in the Hampshire and Dorset region, designed to widen participation and promote student progression; 'alternative forms of partnership' with regional employers; and collaborations with a small number of overseas educational partners. The University is currently progressing the approval of a dual-award master's with Mudra Institute of Communications, Ahmedabad (MICA), India. It has completed the due diligence stage of the approval procedure, and it made use of an external adviser to lead this process recognising its limited experience with overseas collaboration. The outcome of the due diligence has been presented to Academic Planning Committee (APC), and the approval process is continuing towards a potential start date in July 2009. The University is also progressing a Foundation Degree in Outdoor Watersports Management at Weymouth College. In reviewing the University's collaborative provision, the audit team was informed of the University's intention that this will be an area of expanding activity in the future.

233 The University has identified a number of key principles to define its approach to the approval of collaborative provision. These are predicated on the view that the University is responsible for the academic standards of all awards granted in its name, that the quality of student learning opportunities offered under collaborative arrangements should be comparable with those in the University, and on the adoption of a risk management approach as the key defining characteristic in the approval of collaborative provision. The University's second triennial review of delegation of quality assurance to faculties recommended greater delegation of responsibility to faculties, and new procedures for the approval of collaborative provision were developed and approved by the Academic Standards and Development Committee (ASDC) in October 2008.

234 The main features of this new approval procedure are as follows. All collaborative proposals must be directed through a faculty which will assume responsibility for the academic provision. Contractual arrangements underpinning collaborative provision remain the responsibility of the Academic Standards and Quality Service (ASQS) acting on behalf of Academic Board. Proposals must be approved by APC on behalf of the Management Board to go forward to the first stage of due diligence. APC will take into account the alignment of the proposal with the University's mission and strategic plan, the proposed financial model, and the perceived level of risk.

235 Subject to receiving APC approval, ASQS coordinates the first stage of the due diligence review which is primarily desk based. The outcomes of the first stage due diligence are presented to the Vice-Chancellor's Group. If this group is satisfied with the proposal, it will authorise the Memorandum of Understanding (MOU) to be signed and allow the proposal to proceed to the second stage due diligence.

236 Second stage due diligence is undertaken by a panel nominated by the Dean of ASQS, with the size and membership determined by the level of perceived risk. The panel visits the premises of the prospective partner, and its report is presented to APC. The audit team saw documentation relating to the due diligence for the proposed dual-award collaboration with MICA India. If APC is satisfied with the outcome from the second stage due diligence, it will authorise the faculty to proceed to the collaborative programme approval stage.

237 The nature of the programme approval stage depends on whether the collaboration involves development of a new programme of study, or whether it involves developing a collaboration for the delivery of a programme already in approval at the University. New programmes involve an approval panel which includes two external advisers with relevant expertise, and the panel event takes place at the partner institution. In the case of the most recently approved collaboration of HNCs and a Foundation Degree at Bournemouth and Poole College, the audit team was able to confirm the operation of these procedures. Two external advisers were members of the panel, one an academic adviser, albeit from a further rather than

higher education institution, and the other from a relevant employer organisation. Appointment of the panel and control of the approval process lies with the faculty for low risk collaborations, but ASQS controls the approval process for all other collaborations. If the collaboration requires any variation of the University's standard Assessment Policy and Academic Framework, approval of this must be given by the Dean of ASQS prior to the approval panel. The approval panel makes a recommendation to ASDC, and approval may be with conditions and/or recommendations. For existing programmes, the procedure is broadly as for a new programme except that only one external adviser is required.

238 When all approval conditions have been met, the full confirmed report goes to ASDC which authorises delivery of the collaborative programme on behalf of Academic Board. Once ASDC has approved the delivery of the collaborative programme, the Memorandum of Agreement will be signed on behalf of the University and by the partner. The audit team examined the Memorandum of Agreement relating to the most recently approved collaboration with Bournemouth and Poole College. It laid down the contractual basis of the relationship between the University and the College, and provided comprehensive coverage of such matters as staffing, management of the provision, recruitment and admission of students, assessment and external examining arrangements, quality assurance and termination, as well as the financial arrangements of the partnership. Schedule 2 to the Memorandum of Agreement provided a very detailed exposition of the operational management arrangements including duties and responsibilities for the University coordinator and the College programme leader, and the membership and terms of reference for various management and consultative groups including the Programme Management Group, the programme staff team meeting, and the Student-Staff Committee. The Memorandum of Agreement remains valid for a period not greater than five years. It is reviewed annually by ASQS and renegotiated after periodic review.

239 For collaborative provision, the Academic Handbook notes that arrangements for annual programme monitoring (APM) follow 'general policy requirements, but the detailed procedures will be agreed as part of the approval process'. The audit team noted from the information provided, that the current collaboration with Southampton City College was reported through faculty to ASDC in accordance with the arrangements for all courses and programmes, and that there was not a reference to any specific arrangements being put in place for the newly approved collaborative provision with Bournemouth and Poole College. Through discussion with staff the team was told that the APM arrangements are in fact recorded in the formal Memorandum of Agreement with each collaborative partner and the team noted examples of this. Through the process of APM, faculties review whether the terms and conditions approved for the collaboration continue to be met. Academic Board also receives an annual report on the University's collaborative relationships, which acts to update the Board on developments during the year.

240 The audit team sought to understand how the newly introduced process of periodic academic review would apply to collaborative provision, as the University had indicated it would, and heard that collaborative provision would only be considered in terms of its place in the overall discipline portfolio, its implications for on-campus provision and the application of collaborative processes. There is a continuing expectation that individual collaborative programmes will be reviewed and revalidated. Faculties manage this review and re-approval using the same procedures as for initial collaborative programme approval. The team saw evidence of this in the review and re-approval of the Foundation year in Art, Design and Media collaborative provision with Southampton City College. The re-approval event had involved a panel which included two external academic advisers, albeit both from further rather than higher education institutions. The periodic review and re-approval of collaborative programmes is timed to commence in the year prior to expiry of the Memorandum of Agreement. In parallel with this, there is a review of the partnership which is managed by ASQS, and also involves the sponsoring faculty and the University Finance Service. The outcome of the partnership review is either the renewal of the contract with the collaborative partner through a renegotiated Memorandum of Agreement, or the decision to give notice to terminate.

241 At the beginning of 2007-08, the University took the decision to invoke its special monitoring procedure in respect of the Foundation year in Art, Design and Media collaboration with Southampton City College. This followed 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.

242 In May 2008, the Foundation programme at Southampton City College was reviewed and re-approved by the University and, at its meeting in July 2008, ASDC agreed that it was now appropriate to take the programme out of special monitoring. Notwithstanding this, the audit team did find some evidence of continuing concerns with the City College collaboration. These included a recommendation from the re-approval panel that the faculty and the University's Learning and Information Service (LIS) conduct a joint review of the adequacy of the College's library to support the Foundation students, but where the team was told that this review had not yet been implemented. The team was also told that induction arrangements at the College for the commencement of 2008-09 were not well organised or communicated to students, and that no meetings of the Student-Staff Committee had so far been scheduled for 2008-09. The team formed 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.

243 Arrangements for assessment, external examining and the 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 the University's assessment policy, procedures and regulations. The University has sole authority for the award of certificates and diploma supplements relating to students on collaborative programmes.

244 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 externals to have some experience of collaborative provision. Programmes within the current collaborative provision are not offered by the University on-campus, and 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.

245 Students in collaborative provision receive a student handbook provided by the University covering information about its facilities, regulations, policies and procedures including those relating to appeals, complaints and disciplinary matters, alongside information provided by the collaborative partner including timetabling, assignment submission and student support facilities. In addition, unit leaders in the collaborative institution are responsible for the production of unit guides covering the syllabus, reading list, assignment briefs and assessment criteria for each unit. Students are subject to the University's policy and procedures on academic misconduct, but these are implemented by a senior member of staff at the partner institution under the terms of the memoranda of agreement for current collaborative provision.

246 Student behaviour is the sole responsibility of the collaborative partner, but disciplinary action requires consultation with the University coordinator and should be in accordance with the agreed joint policy and procedures. Students on collaborative programmes may have extenuating circumstances relating to completion of assessments, and also appeals against the decisions of the Examination Board considered in accordance with the University's standard procedures for dealing with these matters. Student complaints are dealt with in accordance with the joint 'Student Complaints Procedure'.

247 Students contribute to the quality assurance of their programme through representatives elected to the Student-Staff Committee for the provision. This meets at least once each term, chaired by the College Co-ordinator and with the University coordinator in attendance. The audit team was told that, in the case of the Foundation programme at City College, these arrangements had not been implemented for 2008-09. It was not clear from the memoranda of agreement to which the team had access that the University placed any other requirements on collaborative partners in connection with the collection and collation of student feedback.

248 The second stage of due diligence review in the procedure for the approval of a new collaborative partnership requires consideration of whether the partner has the resources (staffing and facilities) to sustain the proposed provision. It is also one of the University's key principles for collaborative provision that the quality of student learning opportunities should be comparable with those within the University. In relation to learning resources such as library and information, teaching facilities and IT support, the review panel visits the proposed partner and have the opportunity to appraise the quantity and quality of these resources in relation to the proposed collaboration. The audit team saw evidence of this in the due diligence review of the proposed collaboration with MICA in India. However, the team noted that the review panel did not include any representation from the University's LIS although it did include a senior academic in the subject area from the sponsoring faculty. The team asked whether it was usual for staff from LIS to be involved in the evaluation of learning resources to support collaborative provision. It was told that, while LIS staff may provide advice, they were not included in the review panels which conduct the due diligence reviews.

249 The audit team formed the view that the University was denying itself the benefit of the professional expertise and experience of LIS staff in the support of student learning, and the evaluation that they would bring to bear in making a judgement about the appropriateness of the learning resources of the proposed partner as part of the due diligence review. Accordingly, the team recommended that it would be desirable for the University to ensure its procedures for the approval and review of collaborative partnerships included appropriate evaluation of the learning environment by professional services such as LIS in addition to academic staff.

250 The availability of appropriately qualified and experienced staff to deliver the programme at the collaborative partner is considered as part of the due diligence when the partnership is approved. The memoranda of agreement with existing collaborative partners make the partner responsible for the ongoing development of their staff in relation to the provision. Partner institution staff are able to attend University and faculty-level staff development events. However, the University maintains no records of the take-up of such activities by partner college staff.

251 Partner college staff are able to take advantage of the University's HEA accredited PgCert in Teaching and Learning in Higher Education, but they or their institution are required to pay the University fees for this programme. The University also expects to run an annual workshop for staff on the partner's premises covering University regulations, policies and procedures. This is important because the implementation of aspects of University regulations relating to students is delegated to staff at the partner institution. The holding of such a workshop was part of the action plan under the special monitoring arrangements for Southampton City College. In the case of The Bournemouth and Poole College, the University's most recent collaborative partner, a condition of approval of the collaboration was that a detailed staff development plan should be drawn up and agreed by the College and the University. Staff from the College confirmed that the University had provided substantial training inputs for College staff who would be delivering and assessing on the collaborative provision.

252 The University has a number of articulation agreements with other institutions. The University defines articulation as an agreement which does not result in a University award or the award of University credit, but specifies the arrangements for admission of students, with or without advanced standing, on to University programmes from the partner institution. The audit team was assured that none of these agreements created a situation where the University was



guaranteeing places to students who met the requirements laid down in the articulation agreement, and that students needed to make individual applications. The team examined a significant sample of articulation agreements entered into by the University and was able to confirm that this was the case.

253 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**

254 General research policy and procedures are determined by the Research and Enterprise Committee (previously the Advanced Scholarship Committee), chaired by the Pro Vice-Chancellor, Academic. Research degree policy and procedures are determined by the Research Degree Committee (RDC), chaired by the nominee of Academic Board (at the time of the audit, the Dean of the Faculty of Technology). Since 2006, faculties have had responsibility for administration and management of postgraduate research (PGR) students. Each faculty (except the Warsash Maritime Academy where PGR students are registered in the Faculty of Technology regulated by a Service Level Agreement) has a designated administrator and Director of Postgraduate Research Students. The University does not have research degree awarding powers (RDAP); degrees of MPhil and PhD are validated by Nottingham Trent University (NTU) under an agreement subject to annual renewal. Over the five years 2002-03 to 2006-07 an average of 11 students per year graduated with research degrees. Annual reports are made to the Research Degrees Committee of NTU. The University's RDC includes members from NTU. The University has been discussing the possibility of applying for RDAP but the audit team reached the conclusion that this was not at present a high priority. The University was not subject to the 2006 QAA Review of research degree programmes.

255 Research takes place within the faculties and research centres. These are as follows: Technology Research Centre linked to the Faculty of Technology; Centre for Advanced Scholarship in Art and Design linked to the Faculty of Media, Arts and Society; Law Research Centre and Business Research Centre linked to the Faculty of Business, Sport and Enterprise.

256 All research students are entitled to a minimum level of support that is clearly stated on the relevant section of the University website. This includes access to appropriate research training, appropriate computer facilities and working space. Students met by the audit team expressed their satisfaction with the support and facilities available to them.

257 Each faculty is responsible for selection and admission of students. Initial scrutiny by the 'Dean's nominee' determines whether the faculty has appropriate expertise and whether the applicant's background (including finance) and qualifications are appropriate. A provisional supervisory team is appointed at the admissions stage. Applications are then scrutinised by an independent faculty panel to ensure the candidate is suitably qualified, the proposal is basically sound and there are appropriate resources available.

258 Students are normally registered initially for the degree of MPhil with the expectation they will transfer to PhD if progression is satisfactory. There is also the possibility of direct entry to a PhD programme although this is only in exceptional circumstances.

259 The faculty is responsible for induction and students are sent a joining pack. From the evidence gathered by the audit team, this was the same as for other students with the addition of information about the PgCert in Research Methods.

260 A supervisory team of at least two people is approved by RDC with each team having at least two 'completions'. The audit team found that in reality the supervisory team regularly contained three supervisors, often with at least one being from outside the University either from another higher education institution or from industry. In addition, this allows the inclusion of an inexperienced supervisor within the team to receive support from experienced colleagues. All supervisors must be research active; although it is not necessary for all supervisors to have a PhD, each supervisory team must contain at least one person with a PhD. To ensure that supervisory teams are not overloaded the University sets the maximum number of students (full-time equivalent) a staff member may supervise based on the seniority of the supervisor. The University produces an online supervisors' handbook. This includes links to University policies and procedures (in particular Section 2Q of the Academic Handbook: Admission, supervision and monitoring of research students) along with details of the roles and responsibilities of the Faculty Director of Postgraduate Research Students, the Director of Studies (the 'first supervisor') and the second supervisor.

261 Supervisors are expected to hold fortnightly (or monthly for part-time students) meetings with their students. The audit team was of the view that this was appropriate and confirmed that the system was working satisfactorily. The students confirmed their satisfaction with the supervisory and support arrangements and the team shared this view.

262 The University states that it is working to extend its complement of experienced supervisors. New supervisors are expected, and experienced ones encouraged, to attend training sessions, which include input from external experts. The audit team found that attendance at the training, along with the follow-up Research Leadership programme run in 2007, had indeed increased the number of members of staff who are now in a position to supervise PGR students. Consequently, the team considered the training of staff in supervision of research students as part of the strategy to increase the pool of potential a feature of good practice.

263 Full-time research students are expected to produce a research proposal within six months of enrolment (12 months for part-time students). This is scrutinised at faculty level before submission to RDC for formal approval, including confirmation that the supervisory team is appropriate. The University states that the faculty scrutiny has been added to counter some poor quality submissions in the past. Should the submission not be considered satisfactory, a further submission is allowed and if this also fails to meet the requirements, the student's registration is terminated.

264 Students' progress is monitored regularly by supervisors, the faculty and RDC. Each autumn, continuing students are expected to have an interview with a researcher who is not part of their supervisory team to discuss the quality of their learning experience and progress to date. Supervisors are expected regularly to monitor the progress of research students with a formal review, including completion of an annual progress report form, by the Director of Studies each April. The outcome is considered by the faculty and recommendations made to RDC in June to decide on progression. Any remedial action plans are reviewed at faculty level in August and final recommendations made to RDC. In 2006-07 revised University procedures led to a number of non-achieving, non-progressing students being withdrawn by RDC.

265 In a variation of the NTU regulations the University retains the requirement for a full report and viva voce examination for MPhil students before transfer to a PhD, which normally occurs at the end of the second year for full-time students. The University claims this to be of considerable benefit to students and potential internal examiners. The audit team concurred and concluded that the progress and review arrangements were appropriate.

266 All full-time research students are expected to complete the University's PgCert in Research Methods run by the Faculty of Business, Sport and Enterprise. This runs throughout the first year and covers Research Design and Strategy, Issues in Research and culminates in a research symposium. The students met by the audit team expressed their satisfaction with the

course and found it very helpful especially in developing their research proposals and their presentation skills. However, the University's Briefing Paper states that part-time students are only encouraged to take the course. Although the team found no evidence of a part-time student not being able to undertake the PgCert there was no formal alternative should the eventuality arise. The team was informed that the supervisory team would provide the training if necessary. The team recommends it advisable for the University to provide formal training in research methods for all part-time postgraduate research students who are unable to attend the PgCert in Research Methods, to ensure equity of experience and in order to meet fully the expectations of the *Code of practice, Section 1: Postgraduate research programmes*.

267 The outcomes of training needs analyses are recorded in the appropriate student annual reports. However, this was mainly a requirement to attend the compulsory PgCert programme and the students were not aware of a formal training needs analysis having taken place as this was a recent introduction. The audit team was of the view that the University might wish to consider making this more formal and transparent to the students. Students are also encouraged to attend other in-house events and training courses and to attend and present their work at external conferences.

268 Postgraduate students reported that they undertook teaching and marking. Those on the 'assisted fees' scheme are expected to teach up to six hours per week. However, the students did not receive any formal training before teaching or marking. This was confirmed by staff although they stated that the students are mentored and that the marking was closely monitored. Postgraduate students who teach are employed as associate lecturers and so have access to the PgCert in Teaching and Learning in Higher Education (and other online resources) although are not required to complete this before teaching or marking. Consequently, the audit team recommends it advisable for the University to provide a compulsory programme of training for postgraduate research students prior to them undertaking teaching and/or assessment of students.

269 The first part of the annual progress report requires students to produce a self-evaluation of their progress. This includes the opportunity to feedback on their experience and allows the students to raise any issues they may have. At the time of the audit the University was considering taking part in the national Postgraduate Research Experience Survey.

270 The University does not have RDAPs and formal assessment is overseen by NTU. The supervisor's handbook contains details of the examination process (set out in the Academic Handbook) along with generic assessment criteria provided by NTU for the award of MPhil and PhD. NTU approves the examining team comprising an experienced independent chair with one internal and one external examiner (or two external examiners if the candidate is a member of staff). The internal examiner may not be part of the supervisory team. Nominations are made by the faculty and considered by RDC before forwarding to NTU for approval. The University is then responsible for the administrative arrangements and ensuring that the candidate is fully informed of the requirements. NTU receives reports from the examiners and awards the degree as appropriate. The audit team considered these arrangements to be appropriate and satisfactory.

271 At university level there is PGR student representation, nominated by the president of the Students' Union, on RDC and the Research and Enterprise Committee (and previously on the Advanced Scholarship Committee). The students reported that they found this useful. There is no formal staff-student liaison committee for PGR students but the students reported that their regular meetings with supervisors were adequate. The PGR students have also created an informal network based on their weekly meetings in the first year at the PgCert sessions.

272 Complaints and appeals arrangements follow the standard University procedures but the students also have the right of appeal to NTU if necessary.

273 The University has a clear ethics policy that includes sections relating to ethics and research or other scholarly activity. There is a University Ethics Committee, including external membership, which reports to RDC (formerly to the Advanced Scholarship Committee) although these have only been verbal with the latest available report indicating that the Committee had only been able to meet once in the academic year because of inadequate administrative support. The responsibility for overseeing and implementing the policy is devolved to faculties with referral to the University Committee if a decision cannot be made at local level or if there is an appeal against a decision.

274 The audit team had concerns over the process for ethical approval of research projects involving human subjects, in particular, the apparent lack of distinction between general research ethics and ethical approval of specific research protocols. Although the School of Human Sciences has a formal process and committee to consider ethical approval of projects (including undergraduate projects notably in psychology) this is not the situation in the rest of the Faculty of Media, Arts and Society or the other faculties. The Faculty of Technology does not have a formal committee, nor did the Southampton Business School (now the Faculty of Business, Sport and Enterprise) although the move of Sports Science into the Faculty is prompting a review of the situation. The procedures were informal with evidence of approval by chair's action.

275 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.

276 The audit team considers that the University's arrangements for postgraduate research students provide an appropriate student experience and meet the expectations of the *Code of practice, Section 1: Postgraduate research programmes*.

## **Section 7: Published information**

277 The University's approach to published information is contained in its Information and Communication Strategy. The aims of the Strategy relevant to published information are the delivery of effective communications to all stakeholders, and the provision of appropriate IT and systems architecture to support communications. 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.

278 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 also uses its own website to publish a range of information available to prospective students and to other external stakeholders, including the Teaching and Learning Strategy, programme specifications for each course organised by faculty, and outcomes from the University student experience satisfaction survey.

279 Official publications for external consumption, electronic and hardcopy, are produced in consultation with the relevant faculties and services, but they require authorisation by the University's Marketing and Communications Service (MCS). The University sees its website as the primary means through which information is provided to prospective students. The currency and

accuracy of the prospectus and other material relating to University provision is overseen through an annual review process undertaken by MCS in conjunction with faculties. For both new courses and courses which have been either suspended or withdrawn, both MCS and the Academic Standards and Quality Service (ASQS) are linked into the course approval process to ensure only accurate information is uploaded to the University website and to UCAS.

280 While the student written submission (SWS) suggested that students found out about the University and its courses through a variety of means, notably UCAS, visits to feeder colleges by the University and word of mouth, students with whom the audit team met confirmed that 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. The student views represented in the SWS indicated that, overall, students believed 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 of the University. This was also supported by the views of students met by the team. The information made available to students in advance was thought to be generally good, although the team did hear evidence of a collaborative partner where the impression had been given that study would be at the University, rather than the partner during the first year of the programme. From views expressed in the SWS, students at Warsash Maritime Academy (WMA) were less well informed about their course and what to expect when they arrived at the University. This view was confirmed by students with whom the team met. It may reflect the fact that WMA students are all employed and their companies sponsor them to attend award-bearing programmes at WMA. This creates a three-way relationship involving the University, the student and the sponsoring employer, and the potential arises for lines of communication to be more complex than with usual student admissions.

281 A particular feature of the University's communication with potential students is its HelloUni website. As noted in paragraph 196, this is designed to provide potential students and new entrants with a range of information about the University, the City of Southampton, and aspects of University life relevant to new students. The site also contains information relating to University policies, procedures, student regulations and matters related to admissions, enrolments and student finance.

282 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 (VLE) myCourse. Students receive in hardcopy format the University student handbook. This contains information on the University regulations and policies, particularly as they relate to assessment, academic misconduct, and appeals, together with information relating to the student voice including various ways of giving feedback to the University and the complaints procedures. The University student handbook is supported by course and faculty-specific information provided in hard copy and/or electronic formats. University policy is that information for students is authored and maintained by the owners of the information in each faculty or service using the University's content management system. With more complex University policies relating to students, the Student Portal has procedural guidelines designed to help students understand how to use these policies.

283 While broadly satisfied with the accuracy and usefulness of information concerning the University and their courses, student responses recorded in the SWS suggested there were some areas where information was less satisfactory. In particular, students commented adversely on the variability of information available on different units through the VLE even within the same course. However, the audit team accepted that myCourse was still relatively new in the University. The SWS also showed a significant level of dissatisfaction with the communication of the cancellation of classes, while course handbooks did not receive a very high satisfaction score. The team also noted in relation to the ongoing special monitoring of the MBA programme that the action plan included areas of improvement relating to the accuracy, clarity and timeliness of information to students.

284 The audit team met with current students on undergraduate, collaborative, postgraduate and research degree programmes, and sought their views on the accuracy and completeness of information provided to them. Students were generally able to confirm the effectiveness of communication of information to them through the student portal although, as with students in the SWS, they also commented on the variability of unit-level information available on myCourse. Postgraduate students confirmed the value of their course handbooks and unit guides, and research students said they had their own handbook. However, students from WMA were less well informed by the University. They indicated that, as they approached the end of term, they had no information on the classes and timetables for the following term and this was a cause of concern to them. Also, when students were asked about the newly introduced procedures relating to extenuating circumstances, WMA 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 still referred to seeing tutors to obtain extensions.

285 Informed by student comments, the audit team undertook a review of how effectively the University had communicated the newly introduced policy on coursework extensions. This focused on the Student Portal as the main means by which the University indicated it communicated with current students. A general search on the Portal for extenuating circumstances drew students' attention to a news item relating to the new procedures. This included the statement 'you cannot submit extenuating circumstances for late coursework'. A search in the 'My Results' section of the Student Portal led students to section 2P of the University's Academic Handbook: Extenuating Circumstances. This indicated that extenuating circumstances for late coursework cannot 'normally' be submitted beyond the stated deadline. Students are also led to additional 'Guidance Notes for Students' relating to extenuating circumstances. The summary to this contained the statement 'you cannot submit extenuating circumstances for late coursework'. The body of these guidance notes did contain information on the University's 'fit to study' approach to the completion of assessments, and the possibility of submitting extenuating circumstances where the student decides he/she is not fit to submit an assessment. But it has a further section which repeats that the University does not accept extenuating circumstances for late coursework, but qualifies this with circumstances relating to an immediate event which might prevent handing in.

286 It was clear from later meetings with staff that, in practice, a more flexible approach was taken to the granting of extensions to deadlines for students with extenuating circumstances than had appeared to be the case in initial meetings with staff. While the audit team accepted that the University advised students to discuss the possibility of claiming extenuating circumstances with their faculty student support network officer, it felt that where students did not take this advice, there was sufficient ambiguity in the various communications to students to have the potential to discourage students with a genuine claim from seeking extenuation. 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 and consistently reflects the implementation of the policy.

287 The Director of Marketing of the University is responsible for ensuring the initial accuracy of all public information, including publicity and marketing material, published by a collaborative partner. This is done through consultation with the partner institution. ASQS 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 recorded by the University at present this is not an onerous task. In practice, the audit team was unable to find any reference to the collaborative programmes on the websites of either City College Southampton or Bournemouth and Poole College.

288 The audit team found that, overall, 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.

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