

School of Pharmacy

APRIL 2007

© The Quality Assurance Agency for Higher Education 2007

ISBN 978 1 84482 730 5

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

Printed copies are available from:

Linney Direct
Adamsway
Mansfield
NG18 4FN

Tel 01623 450788

Fax 01623 450481

Email qaa@linneydirect.com

Registered charity numbers 1062746 and SC037786

Contents

Preface	iii
Explanatory note on the format for the report and the annex	iv
Summary	1
Introduction	1
Outcomes of the institutional audit	1
Institutional approach to quality enhancement	1
Institutional arrangements for postgraduate research students	1
Published information	1
Features of good practice	2
Recommendations for action	2
Reference points	3
Report	4
Section 1: Introduction and background	4
Section 2: Institutional management of academic standards	4
Section 3: Institutional management of learning opportunities	5
Section 4: Institutional approach to quality enhancement	7
Section 5: Collaborative arrangements	8
Section 6: Institutional arrangements for postgraduate research students	8
Section 7: Published information	9
Section 8: Features of good practice and recommendations	10

Preface

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

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

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

The aims of the revised institutional audit process are to meet the public interest in knowing that universities and colleges in England and Northern Ireland have effective means of:

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

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

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

Audit teams also comment specifically on:

- the institution's arrangements for maintaining appropriate academic standards and quality of provision of postgraduate research programmes
- the institution's approach to developing and implementing institutional strategies for enhancing the quality of its educational provision, both taught and by research
- the reliance that can reasonably be placed on the accuracy and completeness of the information that the institution publishes about the quality of its educational provision and the standards of its awards.

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

Explanatory note on the format for the report and the annex

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

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

The report is as concise as is consistent with providing enough detail for it to make sense to an external audience as a stand-alone document. The summary and the report, without the annex, are published in hard copy. The summary, the report and the annex are published on QAA's website. The institution will receive the summary, report and annex in hard copy (*Institutional audit handbook: England and Northern Ireland 2006 - Annexes B and C* refer).

Summary

Introduction

A team of auditors from the Quality Assurance Agency for Higher Education (QAA) visited the School of Pharmacy (the School) from 23 to 26 April 2007 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 School offers.

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

The words 'academic standards' are used to describe the level of achievement that a student has to reach to gain an award (for example, a degree). It should be at a similar level across the United Kingdom.

Academic quality is a way of describing how well the learning opportunities available to students help them to achieve their awards. It is about making sure that appropriate teaching, support, assessment and learning opportunities are provided for the students.

In institutional audit, the institution's management of both academic standards and academic quality are reviewed.

Outcomes of the institutional audit

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

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

The audit team produced commentaries on the institution's approach to quality enhancement, postgraduate research students, and published information which are set out in full in the report.

Institutional approach to quality enhancement

The audit team found that, although the School is engaged in enhancement activity at both institutional and departmental level, there was scope for this to be done in a more strategic way.

Institutional arrangements for postgraduate research students

The audit team concluded that the School's arrangements for its postgraduate research students met the expectations of the *Code of practice for the assurance of academic quality and standards in higher education (Code of practice), Section 1: Postgraduate research programmes* and noted that these arrangements and effective practice in this area allowed for the securing of academic standards and quality of provision for postgraduate programmes.

Published information

The audit team found that, although there were areas to be addressed in the consistency and updating of some aspects of the School's published information, overall, the accuracy and completeness of such information was improving.

Features of good practice

The audit team identified the following areas as good practice:

- the central register of external examinerships held by staff to avoid reciprocity
- the sense of community fostered within the School, as exemplified by the 'buddying' systems for new undergraduate and overseas students, and the arrangements to support disabled students
- the effective careers support which is embedded throughout the curriculum
- the well-received Academic Tutor scheme which operates on the MPharm programme
- the School's responsiveness to the changing needs of pharmacy education, particularly those of the National Health Service and post-registration practitioners, where the School is playing a leading role in establishing a cadre of practice educators
- the procedures for reviewing the progress of postgraduate research students, in particular the annual one-to-one meetings which all such students have with the Director of Graduate Studies.

Recommendations for action

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

Recommendations for action that the audit team considers advisable:

- in order to guarantee the overall coherence of the academic committee structure, including the location of the strategic and operational responsibility for the management of quality and standards:
 - a) review the terms of reference of the Academic Board, and
 - b) complete the review of the functions and membership of the Academic Standards Committee and of its relationships to the Academic Board, the Undergraduate Studies Management Group, the Taught Postgraduate Studies Committee, the Higher Degrees Committee and the newly established Education Directorate, so as to ensure that it can fulfil its central role in quality assurance and enhancement
- expedite progress with the new quality assurance manual to meet the planned implementation date, ensuring that the Academic Infrastructure is embedded within it and that its contents and purpose are communicated to all staff
- introduce a system of periodic review for all taught provision which will enable the School to take a strategic view of its present and future curricula
- ensure adherence to programme validation procedures, and develop criteria for establishing the independence of external panel members.

Recommendations for action that the audit team considers desirable:

- update the School's learning and teaching strategy and incorporate an assessment strategy
- continue to develop a consistent approach to appraisal to enable transparent identification of the development needs of all groups of staff.

Reference points

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

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

The audit team found that the School took account of *The framework for higher education qualifications in England, Wales and Northern Ireland* and the subject benchmark statements in its management of academic standards and the quality of learning opportunities available to students, although the team recommended further engagement with programme specifications and a more School-wide approach to consideration of sections of the *Code of practice*.

Report

1 An institutional audit of the School of Pharmacy (the School) was undertaken during the week commencing 23 April 2007. The purpose of the audit was to provide public information on the School's management of the academic standards of its awards and of the quality of the learning opportunities available to students.

2 The audit team comprised Professor C Clare, Dr D Fligg, Professor D Lockton, Dr F Quinault and Ms H Uglow, audit secretary. The audit was coordinated for the Quality Assurance Agency for Higher Education (QAA) by Ms F Crozier, Assistant Director, Development and Enhancement Group.

Section 1: Introduction and background

3 The School of Pharmacy is an independent college of the University of London that specialises in teaching and research in pharmacy and the pharmaceutical sciences. Approximately 700 students are enrolled in its single undergraduate programme, the MPharm; 50 on one or other of its MSc degrees; and 125 as research postgraduates. In addition, the School collaborates with other higher education institutions in England (and two elsewhere in Europe), and with the National Health Service, to provide flexible learning opportunities for practising pharmacists and pharmacy technicians. All of this provision was included in the present audit.

4 The last comprehensive review of the School was the QAA institutional audit of 2003. The audit report expressed confidence in the School's management of standards and quality, but advised the need for improved strategic direction by its Academic Standards Committee. The present audit team found that the School was still progressing with this, and other associated issues, but now with fresh leadership from the new Dean of School, appointed in April 2006.

5 The MPharm was re-accredited, without conditions, by the Royal Pharmaceutical Society of Great Britain in 2006.

6 Research degree provision was not a major focus of the 2003 institutional audit and is not within the scope of the Royal Pharmaceutical Society of Great Britain's accreditation. However, it was covered by the QAA's Special Review of research degree programmes in 2006 which found the School's management of the standards and quality of its research degree programmes to be appropriate and satisfactory. These positive findings were borne out by the present audit team's visit to the School.

Section 2: Institutional management of academic standards

7 The School awards its degrees under Ordinances of the University of London but is itself responsible for the maintenance of standards and quality. Procedures that were lodged with the University in 1999 attribute that responsibility to the School's Academic Board, acting with the assistance of its Academic Standards Committee. The recommendation from the 2003 institutional audit, that the remit and composition of the Academic Standards Committee should be reviewed in order to improve the School's strategic management of standards and quality, was subsequently endorsed by three internal reviews. The new Dean, as Head of School, has already made changes to the trio of committees which oversee, respectively, undergraduate, taught postgraduate and research degree programmes, has established a new Education Directorate, and now intends to modify the Academic Standards Committee in order to clarify and strengthen its role as the body that audits the management of standards and quality on behalf of the Academic Board. This approach is fully supported by the present audit team which further advises that this is an opportune moment to review the terms of reference and interrelationships of all of these bodies.

8 One of the conditions regarded by the Dean as necessary for the Academic Standards Committee to discharge its audit role effectively is the creation of a Quality Assurance Manual. A start has been made and the audit team has advised the School to expedite progress so as to ensure that it meets its own target date.

9 The need for such a manual is exemplified by the School's relations with its external examiners. Although the audit team found that these were mostly consistent with the *Code of practice for the assurance of academic quality and standards in higher education (Code of practice)*, not all staff knew whose responsibility it was to respond to external examiners' reports, nor was there evidence of a clear procedure for dealing with missing external reports. This notwithstanding, the School's use of a central register of external examinations held by staff to avoid reciprocity was identified by the team as good practice.

10 The School's procedures for developing and approving new programmes have been codified but they also illustrate the need for a comprehensive Quality Assurance Manual and for a review of committee remits. The current procedures need to be supplemented by the inclusion of criteria that will guarantee appropriate external involvement and the introduction of measures to ensure that the Academic Board actually fulfils its stated responsibilities.

11 The School's policies on assessment have not been drawn together, resulting in piecemeal presentation and the risk of inconsistency. Once again, this situation should be remedied by the completion of the Quality Assurance Manual, the draft index for which includes a substantial section on assessment. As a first step, however, it would be desirable for the School to formulate an assessment strategy. This could be done as part of its acknowledged need to update its Learning and Teaching Strategy.

12 Taking into account measures already being introduced by the School, in particular changes to its Academic Standards Committee and the creation of a Quality Assurance Manual, the audit team found that confidence can reasonably be placed in the soundness of the institution's present and likely future management of the academic standards of its awards.

Section 3: Institutional management of learning opportunities

13 The School's Learning and Teaching Strategy 2002-05 states that the aim of the undergraduate pharmacy education 'is to ensure graduates achieve a standard of competence to be able to discharge the duties of a pre-registration pharmacist. The over-riding principles for the strategy will be the quality assurance of syllabus content, programme delivery, development of staff professional needs, integrity of assessment methods and the authenticity of student work'. In January 2007, the School created the Education Directorate which has both quality assurance and enhancement functions and which aims to enhance the School's learning and teaching through a remit 'to monitor and develop strategy and co-ordinate this with operational management'. Given the new arrangements, the audit team considered it would be timely to update the Learning and Teaching Strategy to reflect the different approaches and include within it assessment as an explicit element of that strategy.

14 The School has had in place processes for annual monitoring of modules since 1999. The annual reports are in standard format and take into account the relevant section of the *Code of practice*. This process also applies to collaborative provision.

15 Formal procedures for the development and validation of new programmes were introduced in 2003. At the time of the visit there had been two validations under this procedure. It was apparent to the audit team that although the validation itself had been rigorous, some of the reporting procedures contained within the processes had not been observed and minutes of the Academic Standards Committee suggest that members were unclear which body in the School had the power to grant final approval. In addition, while the Briefing Paper stated that all provision had been mapped against *The framework for higher education qualifications in England, Wales and Northern Ireland (FHEQ)* and that those non-adherent were being phased out, the validation report seen by the team did not refer to the Academic Infrastructure explicitly. Furthermore, while the report indicates a rigorous process had been undertaken, it could be questioned whether the external panel member was totally independent in that they were an existing external examiner on another programme.

16 The School does not yet have in place a system of periodic review although its undergraduate provision (the MPharm) is accredited by the Royal Pharmaceutical Society of Great Britain every five years. The audit team was told that the School intended introducing periodic review for all of its provision. Overall, it was clear to the team that the School is still in the process of developing its procedures for the development and review of new and existing programmes. It was also clear to the team, from meetings with staff, that some are still unconvinced of the advantages of periodic review of programmes, despite the intention of the School to introduce such a process for all its provision. The team felt that the excellent documentation provided for the re-accreditation of the MPharm provided the School with valuable information and gave it oversight of the bulk of its provision over an extended period of time.

17 The School has in place systems for the assurance of the quality of teaching. New members of staff are required to attend a Higher Education Academy accredited programme and are provided with a mentor to provide support and guidance. They are given reduced teaching and administrative duties in the first three years of appointment. New members of staff are peer observed as part of the accredited programme and the audit team was told that sometimes more established staff request this in order to develop their teaching. The School believes that in such a small institution there are opportunities for informal discussions which obviate the need for a more formal system. It is, however, the intention of the Dean to roll out a more formalised system of staff appraisal in order to facilitate heads of departments in identifying any staff development needs. The team would encourage this.

18 The smallness of the School promotes a supportive environment which provides effective support for students, both academically and personally. Student induction is well-organised and there is a well-received 'buddy' system for new undergraduates and international students. Undergraduates also benefit from a well-organised and well-received academic tutor scheme and such tutors are well-supported by their Academic Tutor Handbook and Teaching Pack. Careers guidance is effectively embedded throughout the curriculum. Students are provided with a range of learning resources which has recently been increased after discussions with focus groups of students.

19 There is student representation on all key committees in the School, both undergraduate and postgraduate. Course boards for taught courses act as staff student liaison groups with a clear remit, and students who met the team felt that their feedback was acted upon where possible and were aware why, in some cases, action could not be taken. In addition, there is the Joint Committee of Academic Board and Students which meets three times a year with a standard agenda and which feeds recommendations to relevant committees. The School also holds an annual meeting for all taught and research postgraduates which the students feel is a useful forum. On the evidence it saw, the audit team concluded that the School has efficient systems in place to engage students in its quality mechanisms.

20 While there is no formalised learning resources strategy, there are detailed procedures for the allocation of funds for such, described in the accreditation document prepared for the Royal Pharmaceutical Society of Great Britain, which also details the resources available. The locus for determining appropriate strategies and objectives for coordinating and enhancing information systems lies with the Information Systems Advisory Group which reports to the Executive Committee. In addition, Library and Information Services report on a regular basis to the Academic Board. The re-accreditation of the MPharm is testament to the fact that institutional oversight is maintained and that resourcing is deemed appropriate.

21 The audit team found that confidence can reasonably be placed in the soundness of the School of Pharmacy's present and likely future management of the quality of learning opportunities available to students.

Section 4: Institutional approach to quality enhancement

22 The School does not have an institutional strategy for enhancement. However, it has enhanced discrete areas of activity, and has future plans to enhance the quality of its provision, and the monitoring thereof.

23 The audit team saw examples of areas of activity that could benefit from an institutional overview or strategic approach to enhancement. These included:

- a) Annual course reports that are normally received by the Academic Standards Committee which reports to the Academic Board. However, as the Academic Standards Committee did not meet between May 2005 and June 2006, annual course monitoring issues were not forwarded to the Academic Board during this period.
- b) The School has a number of procedures which relate to the assessment of students, but these have not been drawn together in course documents consistently. Nor is there an assessment strategy. The audit team felt that such a strategy would enhance the existing learning and teaching strategy by allowing for more consistency within policies in this area.
- c) Management information is used as part of annual course monitoring to measure achievement and progression, but its use is inconsistent, and insufficiently utilised to monitor the academic health of the School. For example, the terms of reference for the Academic Board do not mention the monitoring or receiving of management data.
- d) There are opportunities for School-wide staff development initiatives. The accredited higher education learning and teaching programme has produced some excellent portfolios, made available to the audit team, from staff attending the programme. Whilst the level of reflection on teaching and learning is here exemplary, little use is made of peer observation of teaching. Nor is there a consistent and systematic approach to staff appraisal.

24 The audit team also noted examples of developing practice. The School has modified its admissions requirements in the light of the correlation between student failure, and GCE A-Level grades on entry. Tutors receive detailed guidance on interviewing candidates, and there is a flexible and rapid system for the admission of research students.

25 There is very good student support for undergraduates and postgraduates alike. This includes pre-entry advice, and a well-organised and integrated induction process which embeds a buddy system for new undergraduates and overseas students. There is a well-received Academic Tutor scheme, effective curriculum-based careers guidance, and effective arrangements to support students with disabilities. Research students are well-supported and submission rates for research students are well above the national average.

26 The School takes seriously the feedback it receives from students, and it has efficient systems in place to engage students, both undergraduate and postgraduate, in its quality mechanisms. Action taken in the light of student feedback is reported back to students. The School has responded with rigour and effectiveness to the relatively poor results concerning resources as identified in the 2005 and 2006 National Student Survey. Positive steps have resulted in considerable improvements being made in a relatively short space of time, including WiFi network access in a number of communal areas, the extension of library opening hours and the provision of greater information technology access.

27 The audit team concluded that the features of good practice highlighted above (paragraphs 24 to 26) could be maintained effectively and further improved by a School-wide strategic approach to enhancement.

28 The School does not have developed or formal systems for disseminating good practice. However, the e-learning implementation group, intranet newsletters, and staff development days, are beginning to emerge as suitable vehicles to disseminate good practice. Moreover, the School responds to the changing needs of pharmacy education through regular, formal meetings with National Health Service representatives as part of the collaborative provision, through the Pharmacy Advisory Committee, and through the Bloomsbury Colleges group. Again, the audit team concluded that the dissemination of good practice could be effectively facilitated by an institution-wide approach to enhancement.

29 The audit team saw and heard evidence regarding both areas where a strategic approach to enhancement could facilitate the improvement of processes (paragraph 23) and those where an institutional approach is working effectively to ensure that student learning opportunities are effectively considered and improved (paragraphs 24 to 26). Consequently, it concluded that an institution-wide strategic approach to enhancement could assist the School in further developing, monitoring and disseminating effective practice.

Section 5: Collaborative arrangements

30 The collaborative provision undertaken by the School consists of flexible and distance-learning programmes offered at a variety of sites accredited by the School, and managed through the Education Directorate. The majority of the sites are United Kingdom, National Health Service providers, with the current overseas provision being phased out. There is also a Diploma in General Pharmacy Practice programme that is run in partnership with a number of other higher education institutions who manage it through a Joint Programme Board.

31 The procedures for validation operate as specified in the procedures introduced in 2003. They involve approval of the partner and, where provision is new, the programme, and involve external representation on the panel. Formalised memoranda of agreement are signed for each partnership, with financial annexes updated annually.

32 The annual monitoring of programmes offered through collaborative partnerships operates in a similar way to the programmes offered within the School. External examiners for collaborative programmes are appointed by the School under the same process as that used for the in-house programmes, and examination boards operate under the same procedures. The audit team felt that the procedures for the approval and monitoring of collaborative programmes were operating effectively and in line with the *Code of practice, Section 2: Collaborative provision and flexible and distributed learning (including e-learning)*.

33 The assessment procedures for collaborative provision are under the control of the School in terms of setting and marking the assessments. The procedures involve the external examiners fully and align with the *Code of practice, Section 2*.

34 Evidence seen by the audit team indicated that the systems for obtaining student feedback, through questionnaires and student representation, are operating effectively within the partner institutions. Staff development programmes at the School are available to partner staff.

35 The audit team found that there are good working relationships between staff at the School and in partner institutions and there are regular formal meetings between the School and its National Health Service partners. These meetings contribute to the School's responsiveness to the changing needs of pharmacy education, particularly within the National Health Service.

Section 6: Institutional arrangements for postgraduate research students

36 The responsibility for the standard and quality of research degrees is shared between the School and the University of London as the School has chosen to operate under the University of London's federal regulations. The application of these regulations and the supporting systems and procedures for postgraduate research students align with the *Code of practice, Section 1: Postgraduate research programmes*.

37 The School offers a number of research studentships each year. These are publicised on the website and through an open day for prospective research students. The application and interview processes are being standardised, with all students initially registering for an MPhil. There is an induction process for new and continuing students which forms part of a comprehensive training programme. This programme is also part of the Bloomsbury Postgraduate Skills Network which allows resources from a number of local institutions to be pooled for the benefit of research students.

38 Research students have two supervisors who undergo formal training through a recently introduced workshop. Primary supervisors must have previous supervisory experience before being appointed. There is a comprehensive PhD Supervisor Handbook available to support them. The audit team felt that the supervisory arrangements were supportive and effective and this view was echoed by the students.

39 Research students' progress is monitored on a six-monthly basis, using a progress form completed by both student and supervisor. This process is monitored by the Director of Graduate Studies, who also interviews each student on an annual basis. There is a formal transfer from MPhil to PhD via a report and viva after 10 months and students are also formally monitored for progress at the end of their second and third years. The audit team felt that the monitoring processes used by the School were rigorous and in line with the *Code of practice, Section 1*. These procedures, in particular the one-to-one meetings with the Director of Graduate Studies, were considered to be an example of good practice.

40 At present, complaints are dealt with on an informal basis, although the School is developing a formal complaints procedure. The appeal procedure for the final examination is governed by the University of London regulations but any appeals against interim assessments are dealt with by the Dean.

41 Feedback from research students is obtained through their representation on the Higher Degrees Committee, chaired by the Director of Graduate Studies. There is also an annual student and supervisor meeting which provides further opportunities for feedback. The audit team was provided with examples where issues had been raised and satisfactorily dealt with and formed the view that the feedback mechanisms were working well.

42 On the evidence it saw and heard, the audit team concluded that the arrangements for postgraduate research students, including those for support, supervision and assessment, were rigorous, operated effectively and fully aligned with the *Code of practice, Section 1*.

Section 7: Published information

43 At the time of the audit, the School's printed prospectus had been out-of-print for some time. Although the School's informative and attractive website is regularly updated, the online prospectus contained therein was also out of date, and featured the previous Dean. However, there is a temporary, interim hard-copy prospectus which students have found helpful. The School has not engaged with the Teaching Quality Information website, and is awaiting the relaunch of its replacement, Unistats. Programme specifications were used for the first time for the 2006-07 academic year. Admissions requirements have recently been modified and are clearly articulated on the School's website.

44 Although the audit team felt that there was not enough uniformity and standardisation across course handbooks, they agreed with students that the quality of course information has improved year-on-year, and that pre-application information is comprehensive. In particular, the MPharm handbook is notable for its detail. Assessment briefs are similarly lucid. Students are clear on how they can access information on student support, appeals and complaints. Students are appreciative of the virtual learning environment (Blackboard), which is widely used, with imminent plans to extend its functions.

45 On the evidence it saw and heard regarding the continuing improvement of the School's published information, the audit team believes that reliance can be placed on its accuracy and completeness.

Section 8: Features of good practice and recommendations

Features of good practice

46 The audit team identified the following areas as good practice:

- the sense of community fostered within the School, as exemplified by the 'buddying' systems for new undergraduate and overseas students, and the arrangements to support disabled students (paragraph 18; 25)
- the well-received Academic Tutor scheme which operates on the MPharm programme (paragraph 25)
- the central register of external examinerships held by staff to avoid reciprocity (paragraph 9)
- the School's responsiveness to the changing needs of pharmacy education, particularly those of the National Health Service and post-registration practitioners, where the School is playing a leading role in establishing a cadre of practice educators (paragraph 35)
- the effective careers support which is embedded throughout the curriculum (paragraph 18)
- the procedures for reviewing the progress of postgraduate research students, in particular the annual one-to-one meetings which all such students have with the Director of Graduate Studies (paragraph 39).

Recommendations for action

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

Recommendations for action that the audit team considers advisable:

- in order to guarantee the overall coherence of the academic committee structure, including the location of the strategic and operational responsibility for the management of quality and standards:
 - a) review the terms of reference of the Academic Board, and
 - b) complete the review of the functions and membership of the Academic Standards Committee and of its relationships to the Academic Board, the Undergraduate Studies Management Group, the Taught Postgraduate Studies Committee, the Higher Degrees Committee and the newly established Education Directorate, so as to ensure that it can fulfil its central role in quality assurance and enhancement (paragraph 7)
- expedite progress with the new quality assurance manual to meet the planned implementation date, ensuring that the Academic Infrastructure is embedded within it and that its contents and purpose are communicated to all staff (paragraph 8)
- introduce a system of periodic review for all taught provision which will enable the School to take a strategic view of its present and future curricula (paragraph 16)
- ensure adherence to programme validation procedures, and develop criteria for establishing the independence of external panel members (paragraph 10).

Recommendations for action that the audit team considers desirable:

- update the School's learning and teaching strategy and incorporate an assessment strategy (paragraphs 11; 13; 23)
- continue to develop a consistent approach to appraisal to enable transparent identification of the development needs of all groups of staff (paragraphs 17; 23).

