

Henley Management College

JUNE 2005

Preface

The Quality Assurance Agency for Higher Education (QAA) exists to safeguard the public interest in sound standards of higher education (HE) qualifications and to encourage continuous improvement in the management of the quality of HE.

To do this QAA carries out reviews of individual HE institutions (universities and colleges of HE). In England and Northern Ireland this process is known as institutional audit. QAA operates similar but separate processes in Scotland and Wales.

The purpose of institutional audit

The aims of institutional audit are to meet the public interest in knowing that universities and colleges are:

- providing HE, awards and qualifications of an acceptable quality and an appropriate academic standard, and
- exercising their legal powers to award degrees in a proper manner.

Judgements

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 quality of its programmes and the academic standards of its awards
- 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.

These judgements are expressed as either **broad confidence**, **limited confidence** or **no confidence** and are accompanied by examples of good practice and recommendations for improvement.

Nationally agreed standards

Institutional audit uses a set of nationally agreed reference points, known as the 'Academic Infrastructure', to consider an institution's standards and quality. These are published by QAA and consist of:

- *The framework for higher education qualifications in England, Wales and Northern Ireland (FHEQ)*, which include descriptions of different HE qualifications
- *The Code of practice for the assurance of academic quality and standards in higher education*
- subject benchmark statements, which describe the characteristics of degrees in different subjects
- guidelines for preparing programme specifications, which are descriptions of the what is on offer to students in individual programmes of study. They outline the intended knowledge, skills, understanding and attributes of a student completing that programme. They also give details of teaching and assessment methods and link the programme to the FHEQ.

The audit process

Institutional audits are carried out by teams of academics who review the way in which institutions oversee their academic quality and standards. Because they are evaluating their equals, the process is called 'peer review'.

The main elements of institutional audit are:

- a preliminary visit by QAA to the institution nine months before the audit visit
- a self-evaluation document submitted by the institution four months before the audit visit
- a written submission by the student representative body, if they have chosen to do so, four months before the audit visit
- a detailed briefing visit to the institution by the audit team five weeks before the audit visit
- the audit visit, which lasts five days
- the publication of a report on the audit team's judgements and findings 20 weeks after the audit visit.

The evidence for the audit

In order to obtain the evidence for its judgement, the audit team carries out a number of activities, including:

- reviewing the institution's own internal procedures and documents, such as regulations, policy statements, codes of practice, recruitment publications and minutes of relevant meetings, as well as the self-evaluation document itself
- reviewing the written submission from students
- asking questions of relevant staff
- talking to students about their experiences
- exploring how the institution uses the Academic Infrastructure.

The audit team also gathers evidence by focusing on examples of the institution's internal quality assurance processes at work using 'audit trails'. These trails may focus on a particular programme or programmes offered at that institution, when they are known as a 'discipline audit trail'. In addition, the audit team may focus on a particular theme that runs throughout the institution's management of its standards and quality. This is known as a 'thematic enquiry'.

From 2004, institutions will be required to publish information about the quality and standards of their programmes and awards in a format recommended in document 03/51, *Information on quality and standards in higher education: Final guidance*, published by the Higher Education Funding Council for England. The audit team reviews progress towards meeting this requirement.

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Summary

Introduction

A team of auditors from the Quality Assurance Agency for Higher Education (QAA) visited Henley Management College (the College) from 27 June to 1 July 2005 to carry out an institutional audit. The purpose of the audit was to provide public information on the quality of the opportunities available to students and on the academic standards of the College's awards and those that it offers on behalf of Brunel University, which formally awards the College's research degrees.

To arrive at its conclusions the audit team spoke to members of staff throughout the College, to current students, and read a wide range of documents relating to the way the College 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 UK.

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 them.

In institutional audit, both academic standards and academic quality are reviewed.

Outcome of the audit

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

- broad confidence can be placed in the soundness of the College's current and likely future management of the quality of its programmes and security of its awards.

Features of good practice

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

- the work of the Assessment Regimes Working Party in the development and documentation of assessment practice
- the College's approach to external examiners and their reports
- the immediacy of response to student feedback provided through the student representative system and workshop evaluations
- the integrated approach to the pedagogic development of all members of faculty
- the organised and thoughtful approach, including that for the compilation of course material, to the assurance of the student learning experience from recruitment to qualification
- the provision of the e-Library, which is notable for highly relevant and carefully selected material to support students' learning
- the provisions for constructive feedback to students on assessed work.

Recommendations for action

The audit team also recommends that the College should consider further action in a number of areas to ensure that the academic quality and standards of the awards it offers are maintained.

The team advises the College to:

- establish clearly the purpose of its academic and operational processes, including the interrelationship between self-evaluation, objective evaluation and evidence based judgements, in the ongoing monitoring and review of programmes of study and of associate organisations

- draw on existing good practice, exemplified by the Academic Approval Committee's approaches to approval processes, to codify and document its procedures for quality assurance and enhancement and the assurance of academic standards
- in developing Programme 5, ensure that assessment methods are aligned with the stated learning outcomes, with particular reference to the distance learning mode
- systematise and document its requirements and expectations for the quality assurance of the support and delivery of programmes in each type of collaborative arrangement.

It would be desirable for the College to:

- clarify and codify the relationships between informal working groups and formal deliberative bodies in the College's framework for assurance of quality and standards
- further develop its approach to the collection and analysis of data that will inform quality assurance and contribute to quality enhancement
- foster increased engagement of faculty and support staff with current issues and developments in the Higher Education sector
- ensure that student expectations and needs are taken fully into account when deciding on priorities for the development of the College's ICT provision.

Outcomes of the discipline audit trail - Master of Business Administration (MBA)

The audit team also looked in some detail at the College's MBA provision to find out how well its systems and procedures were working at programme level. The College provided the team with documents, including student work, and members of the team spoke to staff and students. As well as its findings supporting the overall confidence statement given above, the team was able to state that the standard of student achievement was appropriate to the

title of the award and its place within *The framework for higher education qualifications in England, Wales, and Northern Ireland* (FHEQ), published by QAA. The team was also able to state that the quality of learning opportunities was suitable for the programme of study leading to the award.

National reference points

To provide further evidence to support its findings the audit team also investigated the use made by the College of the Academic Infrastructure that QAA has developed on behalf of the whole of UK higher education. The Academic Infrastructure is a set of nationally agreed reference points that help to define both good practice and academic standards. The findings of the audit suggest that the College has responded appropriately to the subject benchmark statements, programme specifications and the FHEQ, while noting that there remains some work to be undertaken in relation to the *Code of practice for the assurance of academic quality and standards in higher education*, published by QAA.

In due course, the institutional audit process will include a check on the reliability of information set published by institutions in the format recommended in Higher Education Funding Council for England's (HEFCE) documents *02/15 Information on quality and standards in higher education* and *03/51, Final guidance*. The College is not in receipt of public funding and is therefore not obliged by HEFCE to publish the teaching quality information (TQI); QAA's expectations that, as a subscriber, the College would publish the TQI information sets were notified in October 2004. At the time of the audit, the College had started work on meeting the requirements of HEFCE documents *02/15* and *03/51*.

Main report

Main report

1 An institutional audit of Henley Management College (the College) was undertaken during the week of 27 June 2005. The purpose of the audit was to provide public information on the quality of the opportunities available to students and on the academic standards of the College's awards and those that it offers on behalf of Brunel University, which formally awards the College's research degrees.

2 The audit was carried out using a process developed by the Quality Assurance Agency for Higher Education (QAA) in partnership with the Higher Education Funding Council for England (HEFCE), the Standing Conference of Principals (SCOP) and Universities UK (UUK), and has been endorsed by the Department for Education and Skills. For institutions in England, it replaces the previous processes of continuation audit, undertaken by QAA at the request of UUK and SCOP, and universal subject review, undertaken by QAA on behalf of HEFCE, as part of the latter's statutory responsibility for assessing the quality of education that it funds.

3 The audit checked the effectiveness of the College's procedures for: establishing and maintaining the standards of its academic awards; for reviewing and enhancing the quality of the programmes of study leading to those awards; for publishing reliable information, and for the discharge of its responsibility for the degrees of Brunel University. As part of the audit process, according to protocols agreed with HEFCE, SCOP and UUK, the audit included consideration of an example of institutional processes at work at the level of the programme through a discipline audit trail (DAT). The scope of the audit encompassed all of the College's provision and collaborative arrangements leading to its awards.

Section 1: Introduction: Henley Management College

The institution and its mission

4 The College is a monotechnic institution, located on a single campus near Henley-on-Thames in Oxfordshire, whose predecessor, the Administrative Staff College, was established in 1945. It gained its Royal Charter in 1991 and was granted taught degree-awarding powers in 1997. It is an independent institution with registered charity status and is not publicly funded. The main provision comprises the MBA, offered in a variety of delivery modes; at the time of the audit, the College was in the process of developing MSc programmes in the business and management areas. The College's research provision leads to awards of Brunel University. The College also offers management development programmes which do not lead to an academic award.

5 In July 2004 there were about 5,500 students on qualification programmes, as follows:

MBA/Diploma/Executive Certificate Programmes

● Executive Full Time MBA (EFTMBA)	81
● Flexible Evening MBA (FEMBA) - London & Frankfurt	107
● Modular MBA	148
● Distance Learning MBA (DLMBA) - Henley based	2111
● DLMBA based with international associate organisations	1741
● DLMBA on tailored company programmes	1200
Total students	5388

Research Programmes (degrees awarded by Brunel University)

● DBA part-time	72
● PhD part-time	13
● PhD full-time	1
● MPhil full-time	0
Total students	86

6 The College and its programmes are accredited by the Association of MBAs, (AMBA), the European Quality Improvement System of efmd (EQUIS), and the Association to Advance Collegiate Schools of Business (AACSB International).

7 At the time of the audit, there were 42 full-time and 10 part-time academic staff in five faculty groups: Human Resource Management and Organisational Behaviour; Marketing; Strategy; Information, Operations and Project Management and, Accounting and Finance. There were 175 workshop and 111 marking tutors (see paragraphs 105 to 108).

8 The College's mission is 'to help people and organisations, anywhere in the world, to develop their management capability'. The College's mission and values include the goal of being widely known as 'a world leader in the delivery of management education and development both in teaching and content'.

9 The distance-learning mode of the MBA is delivered overseas through a network of 11 associate organisations, local Henley Management College offices in Germany and Hong Kong, and a wholly owned subsidiary in South Africa. Further detail of the College's approach to collaborative provision may be found at paragraphs 129 to 145.

Background information

10 The published information for this audit included:

- the information available on the College's website
- the report of the previous quality audit of the College, undertaken in 1997
- the College's prospectuses.

11 The College provided QAA with the following documents:

- the self-evaluation document (SED) and annexes
- a discipline self-evaluation document (DSED) for the DAT.

The audit process

12 Following a preliminary meeting at the College in October 2004, QAA confirmed that one DAT, covering the MBA provision, would be conducted during the audit visit. QAA received the SED in March 2005 and the DSED in May 2005. The DSED was based on the most recent periodic reviews of the provision.

13 The audit team visited the College from 23 to 25 May 2005 for the purpose of exploring with the Principal, other senior members of staff and student representatives, matters relating to the management of quality and standards raised by the SED and other documentation provided for the team. During this briefing visit, the team signalled a number of lines of enquiry for the audit and developed a programme of meetings for the audit visit, which was agreed with the College.

14 The audit visit took place from 27 June to 1 July 2005 and involved further meetings with staff and students of the College, both at institutional level and in relation to the DAT. The audit team was Ms P Boulton, Professor J Cowan, Mr G Curtis and Ms H Johnson, auditors and Ms S Brooks, audit secretary. The audit was coordinated for QAA by Mrs S Patterson, Assistant Director, Reviews Group.

Developments since the previous academic quality audit

15 The College was subject to quality audit by QAA in 1997 resulting in a report published in 1998. The SED clearly and systematically identified the actions taken in response to the report. The report acknowledged the College's internationally recognised status and its careful approach both to the development of its quality assurance mechanisms and the growth of its international student numbers. The College was commended for:

- the Academic Approval Committee's (AAC) detailed attention to the consistent application of the College's procedures for institutional and programme approval

- the increased involvement of staff in the process of annual programme and subject review at faculty group level
- the care taken in gathering student views, and responding to the results of annual monitoring by making appropriate changes to the delivery of programmes
- its student support arrangements and the high quality of its learning materials
- the arrangements for the prompt return to students of assessed work with helpful supporting commentaries
- the operation of its appeals mechanisms
- its responsiveness to the interests of external clients
- the operation of its appointment procedures for full-time faculty
- the operation of its appraisal processes.

16 The College was invited to consider the necessity of formalising its own procedures for the appointment of external examiners and clarifying the associated transition arrangements connected with the transfer of responsibility from Brunel University to the College pursuant to the granting of taught degree awarding powers.

17 The College was recommended to consider the advisability of:

- giving further consideration to the ways in which continuing discussions regarding the academic standards of College awards might usefully be drawn together and formalised
- its major deliberative committees devoting more of their time to engagement with national quality assurance debates, thus enabling them to formulate authoritative advice and recommendations on best practice, to the Academic Board
- the AAC, Academic Reviews Committee (ARC) and Research Committee providing annual overview reports to the Academic Board, examining the effectiveness of the operation of the College's quality assurance procedures for taught and research degree programmes

- requiring all external assessors of new programmes to attend formal meetings of scrutiny panels with the proposers of programmes
- ensuring that annual programme monitoring reviews append all relevant external examiners' reports, and considering whether such reviews might usefully be copied to the relevant external examiners and to partner organisations
- considering whether the guidance given to external examiners regarding the format and content of their monitoring reports might usefully be revised
- reviewing the mechanisms used to establish, implement and then monitor institutional priorities for staff development.

And to consider the desirability of:

- providing more concise and user friendly guidance on its quality assurance procedures, for reference by full and part-time staff
- considering how best practice can be routinely disseminated and innovation promoted at an institutional level
- ensuring it has expert scrutiny of learning support issues when considering applications for associate and accredited organisation status
- considering how it might secure greater involvement in its quality management systems of those staff involved with the provision of support services
- formalising the relationship between part-time staff and the College and considering whether the information provided to such staff, both at induction and subsequently, could be further strengthened
- considering the merit of preparing a composite staff handbook.

18 In 2000, QAA undertook an overseas audit of the collaborative arrangement between the College and InterCollege in Cyprus. The report expressed confidence in the soundness of the arrangements made by the College, enhanced by the professionalism of the management of the programmes by the College and its partner.

19 Since the previous QAA audit, the College has been subject to professional body visits from AMBA in April 2004, EQUIS in February 2005 and AACSB in 2002, all of which confirmed continuation of accreditation. Issues raised by Professional, Regulatory and Statutory Bodies (PRSB) are considered by the Academic Board which also monitors resultant requirements for action (see paragraphs 70 to 73).

20 The audit team noted that, since the previous audit, all modes of the MBA had undergone some updating and refinement and had been placed under the control of one academic organisational authority led by a Director of Graduate Qualifications to provide 'greater opportunities for academic synergy' and to achieve 'greater efficiency, professionalism and consistency of procedures'. The operational infrastructure was reorganised with effect from January 2005. In the SED, the College stated the expectation that 'the full benefits of these changes [would] become apparent during the remainder of the year and into 2006'.

21 The audit team considered that the College had made a systematic response to the key recommendations of the previous audit and noted ongoing developments in a number of areas. In particular, the College has established procedures for the appointment of its own external examiners and has robust procedures for dealing with external examiners and their reports (see paragraphs 54 to 62). The team also noted that the College had strengthened its guidance and support in induction for external academic staff and associate faculty. The SED stated that 'engagement with national quality assurance debates [had] continued to be a feature of the work of the Academic Board and its established sub-committees'. The team noted progress in awareness of the national quality assurance agenda in the College's deliberative structures but considers that benefit would be derived from more direct engagement of staff with current issues and developments in the higher education (HE) sector (see paragraph 172). Other matters raised in the report of the previous audit are considered elsewhere in this report.

22 The institutional SED reported that 'a review of the College's strategy and of its management structure' were priorities for the College and its Principal who took up post on 1 January 2005. During the briefing visit in May 2005, the audit team learnt of wide ranging changes proposed by the Principal, agreed by the Court of Governors in April 2005 and announced to staff on 12 May 2005. In meetings, the audit team heard that the proposals, to be implemented from 1 July 2005, would involve a revised faculty and management structure and an emphasis on greater internationalisation of faculty staff. A new appointee to the post of Academic Dean would have responsibility for a faculty structure in the schools of: Leadership, Change and Human Resource Management; Reputation and Relationships; Growth, Innovation and Enterprise; Projects, Processes and Systems and, Management Knowledge and Learning. Centres of Excellence would be developed to support the faculty areas. A larger and more inclusive Operations Board would replace the Management Team, and there would be an Executive Committee of 10 senior staff with responsibility for specific areas of strategic planning and development. Further development of the MBA provision (Programme 5), would be postponed by six months (see paragraph 147) to allow a review of its orientation and content in the light of these strategic changes. The review would consider the future nature of the Executive Full time MBA (EFTMBA). In meetings with the audit team, the Principal was firm in stating that he did not expect changes in the strategic direction of the College to impinge on quality assurance mechanisms. In the course of its enquiries, the team was concerned to explore how the College would secure the quality of the student learning experience while implementing significant changes in roles, responsibilities and structures.

Section 2: The audit investigations: institutional processes

The institution's view as expressed in the SED

23 The SED stated that the College had an 'established and comprehensive framework through which it manage[d] its quality strategy and confirm[ed] academic standards'. The SED continued 'the management processes, structures, mechanisms, responsibilities and procedures, which [the College had] developed and defined, [had] proved to be robust and effective in both delivering and confirming the level of its academic achievements...'. A Quality Strategy for Teaching and Learning (2002-2006) was approved by the Academic Board in June 2002 and by the Court of Governors in July 2002. The Quality Strategy codified the generic quality aims and objectives of the College and outlined the formal committee mechanisms responsible for quality assurance and the confirmation of academic standards on all award-bearing programmes. The SED affirmed the College's confidence that its framework, systems and procedures were sufficient to assure academic quality and confirm academic standards in its award-bearing programmes.

The institution's framework for managing quality and standards, including collaborative provision

24 The Court of Governors is the supreme governing body of the College, delegating to the Academic Board its powers relating to academic matters in accordance with the College's Charter of Incorporation. The Academic Board has overall responsibility for approval of programmes and for prescribing the criteria, procedures and guidelines for the assurance of quality and standards.

25 The Principal is the Chief Executive Officer of the College. At the time of the audit, the Principal's responsibilities were discharged through a Management Team comprising the Dean, the Director of Graduate Qualifications

Programmes, the Director of Research who has responsibility for Learning and Teaching Services, the Director of Resources, the Director of International Business, the Academic Registrar and College Secretary, and the Director of Hotel Services and Estates. A Director of Marketing and Business Development joined the team in February 2005. As noted above (see paragraph 22) at the time of the audit, the College was in the process of moving to a revised management structure.

26 Every programme has a director of studies who has a shared responsibility for the quality of learning and provision in both taught and research programmes. Directors of studies for taught programmes report to the Director of Graduate Qualifications Programmes. The Director of Studies, Doctoral Programmes reports to the Director of Research. Faculty group leaders are responsible for scholarship, curriculum development and staff development in their subject areas. There are lead tutors who are subject specialists responsible for the delivery of a particular syllabus on taught programmes.

27 The College's portfolio of activity includes a substantial number of students overseas, following the MBA programme. The College retains full responsibility for the quality assurance and academic standards of provision delivered through collaborative arrangements. Specifically, the College is responsible for:

- the admission of students
- academic content and learning materials
- academic support for students
- approval of workshop tutors and monitoring of their performance
- the assessment of students, as part of an integrated process across all programme provision which is monitored and reported upon by the College's external examiners
- the confirmation of academic standards and the award of certificates, diplomas and degrees.

Further detail of the College's approach to the operation of its collaborative provision may be found at paragraphs 129 to 145.

28 The SED set out the College's Academic Regulations framework, including the Handbook of Academic Regulations and Procedures which it stated provided 'a strong regulatory framework for the maintenance of standards'. Programme specifications, the external examining process and assessment procedures are the other major elements of the framework.

29 The SED described the 'comprehensive framework' within which the College assured the standards of its awards and the quality of its programmes as comprising a 'variety of elements' but did not offer a commentary on how the elements were interrelated. The Quality Strategy for Teaching and Learning (2002-2006) provides a more specific account, identifying aspects of teaching and learning, enhancement of the teaching and learning infrastructure and the promotion of staff development as three specific elements of the strategy. The strategy also emphasises the importance of recognition of best practice and of benchmarking.

30 The Quality Strategy points to four key committees, reporting to the Academic Board, through which the College maintains the quality and standards of its provision:

- the Approvals and Accreditations Committee (in the SED and during the audit visit this was referred to as the Academic Approvals Committee) (AAC)
- the ARC
- the Research Committee
- the Board of Examiners.

The Academic Board maintains oversight of the College's provision through regular reporting from these sub-committees, including formal annual overview reports.

31 The Quality Strategy also identifies a 'less formal network' of working groups of staff, reporting to individual members of the Management Team and to the Academic Board where appropriate, as elements of the College's quality assurance framework. Some of these groups are constituted by reference to roles, such as directors of studies and lead tutors, while others, for example the Assessment

Regimes Working Party (ARWP) (see paragraph 33) are focussed on particular issues.

32 The AAC is responsible for approval of programmes of study, associate organisations and all academic arrangements in collaborative provision. It is also responsible for approving modifications to existing programmes of study and collaborative arrangements where these are related to academic quality assurance. The ARC is responsible for the annual monitoring and periodic review of all programmes of study. The Research Committee advises the Academic Board on the formulation of strategy and policy for the College's research activities. It also oversees the compliance of the College's doctoral provision with the requirements of Brunel University. The Board of Examiners is responsible for the conduct of all assessments for the MBA and MSc programmes and for Stage 1 of the DBA.

33 The ARWP is the longest-standing cross-College working group, having been established in 1999 with a focus on encouraging best practice and raising awareness of assessment issues; in meetings with senior staff, the audit team heard it described as a sub-committee of the Academic Board. The Academic Board receives ARWP minutes but the relationship between the two bodies is not formalised in their constitutions and terms of reference. In addition to providing advice to the Academic Board, the ARWP contributes to the operation of the Board of Examiners. The audit team saw evidence that, in the course of its work, the ARWP had considered a wide range of issues, had made recommendations on assessment practice to the Board of Examiners, and produced a number of helpful guidance documents for the staff group as a whole. The team formed the view that the work of the ARWP in the development and documentation of assessment practice was a feature of good practice.

34 The Quality Implementation Team (QUIT) was established in 2003, with responsibility for reviewing the College's policies and procedures against the expectations of *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ) and the *Code of*

practice for the assurance of academic quality and standards in higher education (Code of practice), published by QAA; QUIT has a formal reporting line to the Academic Board. Further detail of the College's approach to the FHEQ and the *Code* may be found at paragraphs 63 to 69.

35 In the course of the briefing visit, the audit team learnt of a further working group, the Collaborative Provision Working Group (CPWG), established subsequent to the submission of the SED, to create a 'formally established forum whereby operational, academic and commercial issues relating to Collaborative Provision ...should be co-ordinated'. In meetings with senior staff, the team was informed that there were no terms of reference for the CPWG and that its genesis had been seen as an opportunity to establish a more inclusive forum for the discussion of all matters related to collaborative provision. The team understood that the rationale for the CPWG was to provide a dedicated forum for discussion of matters related to collaborative provision, including periodic review of associate organisations which had previously been the responsibility of the ARC. The team noted that the College had identified the need to define the extent of the responsibilities of the ARC and CPWG in this area.

36 Throughout the audit, the audit team explored the way in which the various elements of the framework for the management of quality and standards contributed to the whole, including the contribution of the various working groups to the work of the College. The team concluded that the ARWP made a useful contribution to the College's overview and maintenance of academic standards. The CPWG had been established too recently for the team to express a view on its effectiveness. The team noted that QUIT had not met formally in the academic year 2003-04, delegating responsibility for its activities to individual members of the group. There was evidence that this delegation had not been entirely effective in meeting the responsibilities of the group in respect of the *Code of practice* as described to the team (see paragraphs 65 to 67). From scrutiny of committee papers and

discussions with staff, the team concluded that the main academic committees of the College undertook valuable work and were effective in keeping under review the various strands of the quality framework. In the light of the potential for overlap between the remits of the formal committees and working groups, the team considered that the College's framework for the management of quality and standards would be enhanced if it were to clarify and codify the relationships between informal working groups and formal deliberative bodies.

The institution's intentions for the enhancement of quality and standards

37 The SED did not include any explicit detail about the College's intentions for the enhancement of quality and standards other than to indicate an intention to review the periodic review process in the light of the experience of the recent review of provision and the outcomes of the present audit. In meetings with the audit team, staff identified the following activities as contributing to enhancement of the work of the College:

- the development of Programme 5, the next version of the MBA provision
- developing pedagogic approaches to e-Learning
- action on the need to update the information and communications technology (ICT) infrastructure.

38 The audit team considered that the College's implicit and explicit intentions for quality enhancement were appropriate but that the lack of information in the SED about planned activities in this area was indicative of the need for a greater degree of objective reflection on the effectiveness of processes for assuring quality and standards.

Internal approval, monitoring and review processes

Programme approval

39 The SED set out the College's processes for approval of new programmes and amendments

to existing provision, describing them as 'well established'. Approval is overseen by the AAC acting on behalf of the Academic Board and 'in conformity' with the section of the *Code of practice* on programme approval, monitoring and review. The AAC establishes a scrutiny panel, with membership comprising College staff and 'appropriately qualified external advisers' to consider proposals for new programmes. Since the previous audit there has been only one scrutiny panel which was constituted in 2004 to consider the proposal for the MSc in Strategic Marketing Leadership. The AAC has also been involved in the early stages of development of Programme 5.

40 At the time of the audit, the AAC had recently produced and made available on the intranet a clear and comprehensive set of guidance documents on its procedural requirements, drawing on the relevant precepts in the *Code of practice*. The audit team formed the view that the AAC was effective in overseeing the College's approval processes, including the provision of useful and relevant guidance to staff.

Annual monitoring

41 The main focus in the College for monitoring and review is the ARC, chaired by the Principal. The ARC meets four times a year and each meeting focuses on a specific aspect of review. The ARC monitors all delivery modes of the MBA through a process of annual review, reviews subjects through annual subject review and considers annual reviews of accredited centres and associate organisations. The approach to annual review of overseas collaborative organisations is considered later in this report at paragraphs 139-141. The ARC also receives annual reports on academic support services for example, Learning and Teaching Services and ICT.

42 There is an annual review of each mode of delivery of the MBA in October and of each subject in July. Annual programme and subject reviews are based on reports prepared by the relevant directors of studies and faculty group leaders, who, according to the SED, are encouraged to be 'reflective and self-critical'; the reports are presented in person by the

authors to the ARC. ARC identifies actions to be taken and draws institutional issues to the attention of the Academic Board or the Management Team. The ARC receives progress reports on action taken in response to matters identified through annual monitoring.

43 The template for annual review reporting was reviewed and revised, taking account of the *Code of practice, Section 7: Programme approval, monitoring and review*, 'to encourage a greater degree of reflection'. The template was first adopted for some reviews in 2003; the audit team was informed that due to the volume of periodic review activity in late 2004, no annual reviews of programmes were undertaken for the academic year 2003-04 but that annual reviews of subjects were undertaken in July 2004. From the annual reports available to it, the audit team found that, despite following the template, the reports showed considerable variation in emphasis of treatment of topics and in style. Statistics were not presented in common formats and it appeared that little reference was made to those presented. The team found that the review reports largely focussed on operational matters, and contained varying degrees of reflection and little subject or curriculum critique. Nonetheless, it was evident to the team that despite variability in reporting, the process did identify areas for improvement on the operational side.

44 From scrutiny of ARC documentation and discussions with staff, the audit team confirmed that the annual review procedures were in alignment with the relevant precepts of the *Code of practice*. On the basis of the evidence available to it, the team formed the view that a greater degree of objective reflection on academic matters in the process would contribute to enhancement of the provision. Nonetheless, the team concluded that the processes provided an appropriate institutional overview of the outcomes of annual review activity and were operating as intended.

Periodic review

45 Periodic review of programmes normally takes place every 5 years. Reviews are

conducted by a panel consisting of the Chair and two other members of the ARC, 'two independent advisers' and a representative of Brunel University. The process is documented in the College's Academic Regulations which are available to staff on the intranet.

46 In October and November 2004 the College undertook a periodic review of all of its programmes. Two meetings of the ARC were held, one focusing on MBA programmes and one on the Doctoral Programmes. The SED reported that the College brought forward the periodic reviews by a year to aid preparation for external scrutiny by EQUIS and QAA. In preparation for the reviews, the ARC revised the templates for periodic review reports to require more detailed consideration of the strategic overview, individual reports and supporting data; the revised templates were issued in September 2004. The SED stated that the tight timescale for the review process had prevented directors of studies from discussing the draft reports with faculty members and student representatives as intended, but that the full consultation process would be implemented for future reviews.

47 The SED recognised the difficulties of developing appropriate objective annual and periodic review procedures in an institution covering only one major subject area, and highlighted the outcomes of the periodic review process as providing useful external perspectives on its provision. The outcomes of the reviews were recorded as minutes of the meeting of the Periodic Review Panel, which were received by the ARC. The minutes of the meeting of the Periodic Review Panel included advice from the external members of the panel that the College should seek a focus in periodic review 'on overarching processes, their effectiveness in demonstrating quality and standards and the need to demonstrate effectiveness by means of a comprehensive evidence base', a view endorsed by the audit team. The team noted from the SED the College's intention to consider this feedback in tandem with the findings of the EQUIS 2005 re-accreditation visit and the present audit.

48 The audit team discussed the College's current approach to periodic review with staff in the light of the periodic review reports and the records of the Periodic Review Panel and ARC meetings. In the view of the audit team, the Periodic Review Panel membership was appropriate and the reviews had been undertaken with due care but the extent of reflection in the review reports was variable. The periodic review reports were written and presented by the directors of studies and the panel did not meet any other staff involved in course delivery. The team noted that the panel had had access to only limited direct evidence about the delivery of the programmes, particularly the perspective of students about their experience. A meeting was held with a small number of students but the panel did not have any direct contact with students from associate organisations. The team also noted that appraisal of and reflection on the currency of the curriculum was being undertaken in the preparation for Programme 5 of the MBA, and did not feature strongly in the periodic review process.

49 The College's Academic Regulations for the periodic review process require the production of a report and stipulate a range of categories for recommendations for action. The minutes of the Periodic Review Panel meeting seen by the audit team did not include recommendations as set out in the relevant regulations and recorded no recommendations about the nature, content or delivery of the programme. It appeared to the team that the periodic review had been more akin to the annual monitoring which it had replaced for that year.

50 The audit team agreed with the view of the external members of the Periodic Review Panel that the College should reflect further on the purposes and benefits of undertaking periodic review and clarify the distinction between periodic review and annual monitoring. The team also suggests that the College consider whether there would be benefit in greater involvement of staff delivering the programmes in the discussion of the review report with the Periodic Review Panel. The College may also wish to review the range of direct and indirect evidence to be

provided to periodic review panels. The team therefore advises the College, in its planned review of the periodic review process, to establish clearly the purpose of the academic and operational processes involved, including the interrelationship between self-evaluation, objective evaluation and evidence based judgements. The team also considers that the College should draw on the good practice, exemplified by the AAC's approaches to approval processes, to codify and document its other procedures for quality assurance and enhancement and the assurance of academic standards (see paragraph 40).

External participation in internal review processes

51 The College recognises that being a monotechnic institution requires particular efforts to bring externality into the institution. The SED noted that the nature of the College's educational provision meant that it was not 'exposed to the normal cross-disciplinary discussions' that take place in other HE institutions. The SED explained that the College sought to remedy this by 'co-ordinating feedback from its extensive network of associate faculty, company clients and collaborative partners, at various stages of programme development, delivery, and improvement'.

52 The College has also constituted a formal Academic Advisory Board (AAB) that meets annually and reports to the Academic Board and to the Court of Governors and is composed of academics from other institutions. The AAB's function is to provide independent external advice on the relevance and standards of the College's degrees and research. The audit team reviewed the minutes of the AAB and also met a member of the Board in the course of the audit. The team formed the view that the AAB provided a useful external perspective on the College's provision.

53 The College's Academic Regulations require it to draw on external views in its periodic review process. The audit team confirmed that the Periodic Review Panel for the most recent review of the MBA programme

was constituted in accordance with the Academic Regulations and included two independent external advisors and two representatives from Brunel University. The Periodic Review panel for Doctoral Programmes in November 2004 included one representative from Brunel University as an external member. The team concluded that the use of externality in the periodic review process supported its judgement of broad confidence in the College's current and likely future management of the quality of its academic programmes and the academic standards of its awards.

External examiners and their reports

54 The College appoints all the external examiners for its programmes on the recommendation of faculty group leaders and lead tutors. There is a pro forma for the nomination of external examiners that requires information about internal and external examining experience, qualifications and details of the current post held by the nominee. The SED explained that external examiners were 'normally expected to have recent and relevant, internal and external examining experience at postgraduate level and to be senior members of staff of either UK or international higher education institutions'. If nominated external examiners are not working in the HE sector, there is a requirement for them to demonstrate awareness of assessment processes and approaches to security of academic standards. External examiners are subject-based and are responsible for units and modules regardless of location and mode of delivery.

55 In the SED the College set out its responsibilities in respect of the external examining of the DBA programmes. The College makes nominations of external examiners for Stage 1 of the DBA which are passed to Brunel University, following approval by the Academic Board. The College also nominates thesis examiners for approval by the University.

56 All newly appointed external examiners are offered induction sessions to introduce them to the College staff and procedures. Information provided to external examiners includes the

Academic Regulations, programme specifications and relevant course materials. External examiners are also invited to attend workshops related to assessment practice. The College considers that it has a good relationship with its small group of examiners, at least three of whom attend each quarterly Board of Examiners meeting. The Board of Examiners reviews reports from external examiners and confirms that action has been taken.

57 The SED described the approach to the consideration of external examiners' reports, including 'procedures for wide circulation of ...the reports'. When the reports are received at the College, the Academic Registrar identifies and records matters requiring action on a coversheet. The reports and the coversheet are then forwarded to senior staff, including the Principal, and faculty and administrative staff as appropriate to secure the requisite response. The audit team concluded that the procedure whereby coversheets for reports were completed by the Academic Registrar prior to circulation in the College provided for rigorous identification of action points and follow up on matters raised.

58 An institutional overview of the reports is achieved by appending the reports to the ARC's annual overview report to the Academic Board. Further assurance of appropriate responses to external examiners' reports is provided through ARC reviewing the action points annually. This approach secures an institutional overview of the work of external examiners which contributes to the assurance of the academic standards of the College's provision. The audit team saw evidence that input from external examiners influenced assessment processes in the College. By way of example, discussion by the ARWP of the regulations on condonement took account of comments made by external examiners about the kind of information that might be taken into consideration.

59 Reports from external examiners viewed by the audit team confirmed that the College's assessment processes worked well and included particular praise for the administrative arrangements for the Board of Examiners. They expressed satisfaction with the College's

response to their advice given both orally at the Board of Examiners meetings and in their reports. From a review of documentation and discussion with staff, the audit team concluded that the College's approach to consideration of reports from its external examiners was robust and thorough and operating as intended.

60 The reporting pro forma for external examiners was reviewed and a revised version was approved by the Academic Board in 2002. The audit team noted that the pro forma did not seek differentiated responses in relation to work from students on different modes of study or at different locations. The College may wish to consider whether more specific comment from external examiners on student performance for each of the modes of study and delivery sites might contribute to its assurance of the standards of its awards and contribute to the annual and periodic review processes. In addition, the audit team noted that the current pro forma was not aligned with TQI requirements (see paragraphs 170 to 172); the College indicated that it planned to introduce a revised pro forma with effect from the end of the academic year 2004/05. In reviewing the reporting format in the context of TQI, the College may wish to take the opportunity to review its expectations for comment from its external examiners, taking account of the range of delivery patterns and locations for its provision.

61 The QAA audit of the College's collaborative linkage with Intercollege Cyprus suggested that the College consider the merits of sharing specific issues from external examiner reports with associate organisations on a systematic basis. In response, the College decided to send relevant extracts but not the full reports to associate organisations.

62 The SED stated that the College considered its external examining process to be a 'particular strength'. On the basis of documentary evidence and discussion with staff, the audit team concluded that the SED provided an accurate account of the College's approach to external examining arrangements. The team also confirmed that the Colleges' approach to external examining was in alignment with the

relevant sections of the *Code of practice*. The audit team formed the view that the College's approach to external examiners and their reports represented good practice in the assurance of standards. The College's use of external examiners in summative assessment supports a judgement of broad confidence in the College's current and likely future management of its academic awards.

External reference points

63 The SED explained that the College used the Academic Infrastructure to enhance its own quality infrastructure. The SED noted that the College sought to adhere to 'both the spirit and the requirements' of the various elements of the Academic Infrastructure.

64 The College's initial approach to the *Code of practice* was to establish a QAAHE Quality Assurance Framework Working Party to 'track and monitor' the *Code* on behalf of the Academic Board. In 2003 the working party was replaced by the Quality Implementation Team (QUIT) which began to map current practice against the precepts of the *Code*, recommend action and report on implementation to the Academic Board. The SED provided many examples of action taken in response to the *Code of practice* and the audit team saw evidence of the mapping exercises that had underpinned action. Work on careers education and guidance, and revisions to the regulations on complaints and appeals are just two examples of developments influenced by the College's engagement with precepts of the *Code*. Some of the periodic review reports, particularly that for the Modular MBA, also demonstrated an awareness of the various sections of the *Code* and the ways in which it had enhanced practice; by way of example, the periodic review report for the FEMBA analysed effectively the influence of the original section of the *Code* on collaborative provision on delivery of the programme.

65 While QUIT was active as a group during 2003, once the initial mapping had been completed responsibility for continuing monitoring was passed to identified individual members of the group, and it did not meet

formally again until June 2005. In meetings with senior staff, the audit team was assured that this system worked effectively but the team found evidence when reviewing the College's approach to the revised section of the *Code of practice* on collaborative provision that this delegated approach had not always secured a timely response to revisions to the *Code*. The SED indicated that the College's procedures would be reviewed in light of the revised section on collaborative provision which was published in September 2004 and a report provided to the Academic Board. The SED also reported, in the context of agreements governing the operation of its collaborative provision, that 'detailed scrutiny of the revised version of the code (2004) was underway, under the leadership of the Directors of Graduate Qualifications Programmes and International Business'. In February 2005, ARC noted the need to map the revised section of the *Code of practice* on collaborative provision, and in March 2005 the Academic Board asked the relevant QUIT member responsible to undertake the review with other key staff and 'put forward proposals for addressing any gaps'. The team did not see evidence of the review having been conducted or a resultant report having been made.

66 Minutes of the ARC from October 2004 included mention of the importance of the QAA *Guidelines on distance learning*, published by QAA, without any apparent recognition that these had been incorporated into the revised section of the *Code of practice* on collaborative provision. The periodic review report of the DLMBA showed a similar lack of awareness. In a meeting with staff, the audit team was told that the relevant section of the *Code* had been discussed by the CPWG but an updated version of the mapping had not been available for the QUIT meeting in June 2005.

67 The audit team discussed the relative responsibilities of QUIT, delegated individuals and other working groups in respect of the *Code of practice* with staff. The team confirmed that the initial mapping work on the *Code* had been thorough. The delay in the consideration of the revisions to the section of the *Code* on

collaborative provision led the team to conclude that the College had not maintained its initial effective approach and that the revised arrangements for engagement with the *Code* were not working as well as intended. The team considers that the College should review its current arrangements for addressing the various sections of the *Code* to restore the effectiveness that was evident in previous years.

68 The SED did not include any detailed information about the way in which the College had considered the FHEQ at institutional level but did provide examples of action taken in the development of Programme 5 and the review of programme specifications for the DBA to take account of the guidance in the FHEQ on intermediate qualifications. The SED claimed, and the audit team was able to confirm that the master's level *Subject benchmark statement* in business and management and the FHEQ 'M' level descriptors were used extensively in the development of programme Specifications.

69 From its review of documentation and discussion with staff, the audit team concluded that, in making use of external reference points the College had responded appropriately to the FHEQ and subject benchmark statements, but that there was some work to be undertaken in relation to the *Code of practice*.

Programme-level review and accreditation by external agencies

70 There have been no QAA reviews at the subject level since the previous audit. As noted (paragraph 6), the College holds professional accreditation from AMBA, EQUIS and AACSB. In the SED the College stated that it was one of only eight business schools in the UK with such triple accreditation. In meetings with the audit team, senior staff stressed the importance to the College of accreditation of the MBA by international and UK professional bodies, noting that such recognition was seen as a key performance indicator.

71 The SED identified the Academic Board as having responsibility for consideration of reports from PRSBs. In practice, this responsibility is exercised through groups of staff or individuals taking the required action and reporting subsequently to the Academic Board and the PRSB as necessary.

72 There was an accreditation visit from AMBA in March 2004 and from EQUIS in February 2005. At the time of the audit visit, the confirmed report from AMBA had not been received at the College but reaccreditation of the MBA programmes for a further five years with effect from May 2004 had been confirmed.

73 The outcome of the recent EQUIS visit was seen as broadly positive by the College. The audit team saw evidence that the College was considering the recommendations in the report through discussion at management meetings; at the time of the audit, they had not been presented formally to the Academic Board. The audit team noted progress in addressing the matters raised in the report through current initiatives at the College to revise its approach to the approval of associate organisations (paragraph 131); the work of the recently established Search Committee (paragraph 96), and the Improving Management Information (IMI) initiative (paragraph 91). The team concluded that the College's approach to accreditation by external agencies was appropriate and responses to accreditation reports were timely and are used to enhance and assure quality.

Student representation at operational and institutional level

74 The nature of the student body at the College is such that there is no Students' Union or equivalent. There is provision for formal student representation on the Board of Studies, the Academic Board, the Research Committee and the Court of Governors. The SED noted that student attendance at the Academic Board and the Court was irregular, due to the nature of the students' employment responsibilities. The SED continued 'the College regrets the lack of engagement of students in committee activities, and intends to find ways to improve the situation'.

75 There is a student intake representative for each class group on each programme, and for research associates. The representatives take responsibility for gathering feedback from their colleagues about quality matters and programme satisfaction and liaise with lead tutors and directors of studies accordingly. The SED noted that these representative arrangements 'complement[ed]' student representation on committees. Students whom the audit team met confirmed that this was an established, active and effective arrangement to identify and deal thoroughly with matters of common relevance, raised by the representatives or by the College. The team noted that in the South African collaborative linkage there was a formal Students' Representative Council.

76 In its SED the College did not express a view about the overall usefulness and effectiveness of its arrangements for student representation. The audit team found that, although the student intake representative system was more ad hoc than systematic or structured, it was valued by the students as responsive, informing students of action taken or why a particular response was not feasible. The audit team identified as good practice this immediacy of response to student feedback provided through the student representative system which has demonstrable effects on the quality of the student learning experience. By contrast, the team found little evidence that the formal representation of students on College committees was used systematically in the assurance of quality and standards. The team noted the College's intention to find ways of improving students' engagement with the committee activities and would encourage it to seek alternative and innovative ways of incorporating the student voice in its formal decision-making processes.

Feedback from students, graduates and employers

77 Direct feedback from students is obtained through a range of approaches but primarily from feedback questionnaires, described in the SED as 'less formal mechanisms for managing student feedback'. The SED noted that useful

feedback was also gathered less systematically in the course of tutorial and academic support, and from e-Learning databases, e-mails, and oral informal feedback. Feedback is also obtained in the course of staff visits to associate organisations.

78 Questionnaires completed after every workshop session at the College provide immediate feedback on the perceived quality of the learning experience. The College uses workshop questionnaires in associate organisations as one of the methods for the evaluation of student satisfaction. There is also oral feedback from students to associate organisation tutors which is not recorded. Response rates for workshop questionnaires seen by the audit team were variable and the audit team saw individual instances of nil returns. The forms are scanned and summarised by Learning Technology Section (LTS) using survey software and the results are notified within two weeks to relevant staff. The team saw evidence of good practice, confirmed in meetings with students, in prompt action taken in response to any adverse feedback on workshop sessions.

79 The College also administers end-of-module questionnaires. The SED reported that response rates in this area were 'poor' and the periodic review of the DLMBA in 2004 noted that the process 'continue[d] to resist efforts for improvement'. The SED went on to say that '[m]echanisms for raising the response rate had been explored but to date no clear way forward had been identified'. Some of the students whom the audit team evinced limited awareness of the existence of such questionnaires.

80 The SED pointed out that '[w]hilst the creation of feedback surveys and the processing of data ha[d] increasingly been centralised,... responding to student feedback and closing the communications loop to the student body remain[ed] decentralised and consequently variable in nature and frequency'. At the time of the audit, the College was considering proposals for mechanisms for responding to feedback, improving response rates, and ensuring consistency in approaches to the gathering of feedback.

81 In addition to the mechanisms outlined above, the College undertakes detailed module and programme evaluations, in the form of action research enquiries, initiated and supported by the Centre for Management Learning (CML) and LTS. Examples of such activity cited in the SED were based upon relatively small samples which had not been selected to be representative and drew upon personal impressions of the learning experience. In one example examined by the audit team, valuable data had not all been summarised or carried through into the recommendations and findings.

82 The College's educational provision is in an educational field where there are rapid developments in the sector in respect of the pedagogy of e-Learning. An internal report seen by the audit team noted that 'workshop questionnaires particularly seem[ed] to have limited value to the tutor in respect of understanding of their performance, and give little opportunity for students to give an overall perception of the value of the workshop and their learning'. It seemed to the audit team that the College's current approach to gathering feedback does not allow it to evaluate effectively its overall approach to students' learning and e-learning.

83 Although the College has acknowledged difficulties in securing meaningful response rates, from scrutiny of documentation, the audit team noted that response rates to questionnaires at associate organisations had been improved and the need for better feedback on electives and e-Learning had been identified by the ARC. From meetings with senior staff and in documentation, the team noted that more explicit handling of feedback from and to students was included in the College's suite of Key Performance Indicators, an intention that the team would support.

84 The College has reviewed its approach to feedback from research associate students and concluded that it was in alignment the *Code of practice, Section 7: Postgraduate research programmes*. Research associates are asked to complete questionnaires, for which internal reviews have identified a low response rate. The

periodic review of doctoral programmes in 2004 noted that oral feedback suggested that research associates were highly satisfied with their experience and were therefore disinclined to return completed forms in addition to providing direct feedback.

85 The College gathers feedback from its graduates through post-programme questionnaires. The audit team noted the high response rate and satisfaction returned by graduates from the doctoral programmes. In minutes of the ARC, the team found reference to a project for customer evaluation, launched in 2003, but in meetings was unable to gather further information in this area. The team noted that 'useful' feedback was obtained from alumni who choose to act as 'Henley Ambassadors' whose role includes the promotion of the College to prospective clients, students and the media and assistance at MBA fairs, exhibitions and alumni events.

86 The 2004 periodic review report for the open DLMBA for 2000-4 stated that 'there [was] no current mechanism for obtaining regular and reliable feedback from employers'. The audit team noted that the responsibilities of the College client directors included collecting feedback from companies sponsoring tailored programmes. Other feedback is gained from incidental professional contacts. The 2004 periodic review report for the doctoral programmes commented that it was often not appropriate to contact the employers of senior executives engaged in doctoral studies.

87 Notwithstanding the acknowledged shortcomings, the audit team concluded that the College devoted considerable and adequate effort to keep itself informed of the reactions and opinions of alumni and employers, which would have an impact on the success of its future recruitment. The team saw no evidence to doubt the claim in the periodic review report for the MBA programmes that 'in general, feedback from customer evaluations reveal[ed] a high level of satisfaction with current MBA programmes'.

88 The audit team formed the view that the College might wish to consider the value of

giving more priority to rigorous evaluations and to action research enquiries which concentrated attention on obtaining direct data, as well as opinions, about the learning experience. These would better enable it to analyse and build responsively upon information about individual students' e-Learning experiences in response to the College's teaching. The team considered the immediacy of response to student feedback provided through workshop evaluations to be a feature of good practice in the assurance of the students' learning experience.

Progression and completion statistics

89 The College has identified the provision and use of statistical information as an area of priority for action. The College currently draws on statistical information in periodic and annual reviews through the inclusion of basic progression statistics showing the number of students that have completed each part of the award. The statistics are used to support identification of failure rates in relation to associate organisations or particular modes of delivery. Annual review reports for associate organisations include statistics on student performance and information on progression rates. Boards of examiners compare assignment marks with examination marks, and also marks across associate organisations.

90 In 2002, the College moved to a phased introduction of a new student record database following its identification that the existing system did not provide the range and quality of reports that it required. The SED noted initial 'implementation issues' that had delayed the generation of data to support annual and periodic review.

91 The College has set up an IMI project in response to its recognition of 'the need to have a more precise data bank of information in order to inform internal decision-making'. At the time of the audit, the IMI project director had started to identify the set of information requirements necessary for the effective management of academic quality. In the SED, the College reported that, through the IMI project, it would also be redesigning its approach to statistics and

data collection based on Higher Education Statistics Agency requirements to assist its compliance with teaching quality information (see paragraph 170).

92 From scrutiny of documentation and discussion with staff, the audit team formed the view that the implementation of the IMI project would generate data to meet the various user requirements. The team noted the aim to establish more granularity in the data to allow the consideration of progression statistics at module level. The team also noted that effective analysis of progression rates in associate organisations had been inhibited by the limited nature of the relevant data.

93 The SED did not include any evaluation of how data were used at programme or institutional level other than to identify that the College did not monitor performance in relation to entry qualifications. However, in meetings with staff, the audit team heard examples of action taken as a result of statistical analysis, with particular reference to the FEMBA. In the view of the team, the 2004 periodic review report for this programme demonstrated effective statistical analysis across delivery sites and appraisal of links between student performance and pedagogical considerations. There was also evidence of action taken in the form of workshops to support dissertations in response to poor rates of completion. The team did not encounter such detailed analysis and use of data in other periodic review reports available to it and would suggest that this good practice could be applied to review of all modes of delivery of the MBA.

94 From review of documentation and discussion with staff, the audit team confirmed that the SED provided an accurate representation of the College's capacity to compile and analyse progression and completion statistics in the quality assurance of its provision. The team concluded that the use of statistical data was adequate to confirm academic standards, but considers it desirable that the College develop further its approach to the collection and analysis of data that would inform quality assurance and contribute to quality enhancement.

Assurance of the quality of teaching staff, appointment, appraisal and reward

95 The College has a relatively small establishment of full-time academic staff, supported by a large network of associate faculty and external faculty and external associate tutors. Associate faculty are employed on an individually contracted basis which may require their fulfilling more than one role. External faculty and external associate tutors undertake workshop tutoring and some assessment work, under the direction of College staff. At the time of the audit visit, the Dean was responsible for the oversight of the management of academic staff.

96 The SED outlined the College's approach to the appointment of teaching staff. There is a recruitment and selection policy that is in line with the College's equal opportunities policies. The SED explained that the College had found that seeking new staff through academic networks was generally more successful than press advertising, while acknowledging the potential drawbacks in the approach. The SED went on to say that the College sought to redress this by involving a range of College staff in selection and recruitment. In meetings, the audit team met a number of members of staff who had been recruited through a gradual process of engagement with course delivery, often starting from having been students of the College themselves. The College has moved to formalise this approach with the establishment of a Search Committee in March 2005 to consider a range of issues in relation to faculty appointments, including the development of explicit criteria in line with the College's strategic planning. Recruitment of tutors in associate organisations is initiated locally but is controlled centrally by the College. Lead tutors are involved in the process and undertake interviews, by telephone if necessary.

97 The College operates a compulsory institutional induction process, supported by local arrangements tailored to the role of the member of staff. At the time of the audit induction for part-time staff had recently been improved by the development of an e-Learning

Primer to guide external tutors in the use of e-Learning databases and the on-line Tutor Resource. The performance of all staff is reviewed after six months in post and, where necessary, guidance is given on how improvements might be made. In meetings with the audit team staff confirmed the effectiveness of the induction process in preparing them for course delivery.

98 Tutors work under the direction of faculty group leaders, who conduct performance reviews for the staff in their group, under the overall direction of the Dean. The SED explained that the annual appraisal system had been revised in 2002 to provide a 'better basis for resource planning and improved procedures for development'. Appraisals cover performance review, workload planning and personal development planning. Staff whom the audit team met confirmed that the appraisal process was undertaken in accordance with the stipulated requirements and was effective in supporting their professional development. The College has a Reward Strategy which includes guidance on salary bands and criteria for 'Development Breaks'. Staff whom the team met had limited awareness of the Reward Strategy.

99 On the basis of scrutiny of documentation and discussion with staff, the audit team concluded that the arrangements for staff recruitment and selection, induction, appraisal and reward were fit for purpose and operating as intended. The work of the Search Committee should enhance practice in this area. The team considered that the College's processes for the appointment, appraisal and reward of its teaching staff made an effective contribution to the assurance of the quality of the student learning experience.

Assurance of the quality of teaching, including distributed and distance methods

Staff support and development

100 The SED expressed the College's belief that the quality of the student experience depended on an 'inclusive collegial approach' to the development of all its employees. The SED went

on to state that the College 'aimed to provide rich and relevant development opportunities' for its faculty. In meetings with the audit team, staff confirmed that faculty, including associate faculty, had access to a range of development opportunities, including the possibility of developing a research profile and engagement with externally-funded projects. In-house events organised by the CML, including seminars, workshops and round table discussions, support pedagogical development. Generic issues such as assessment practice and plagiarism have also been the focus of developmental activities. In addition, the College organises bi-annual formal meetings at the College which provide an opportunity for College staff and those from associate organisations to discuss the delivery of the MBA and related matters.

101 In discussions with staff the audit team explored the degree of interaction of faculty with their colleagues in the HE sector outside the College. Staff indicated that they saw subject networks as the primary focus of engagement with peers; they had more limited awareness of the development of the Higher Education Academy, the subject centres, and peer networks for quality assurance. The audit team would suggest that the College consider the desirability of fostering increased engagement of faculty and administrative staff with current issues and developments in the HE sector in support of their professional development.

102 The College recognises the need for different talents and experience in staff providing on-line tuition from those needed for face-to face delivery. Considerable thought and effort is therefore taken to assure, before the delivery of materials and the provision of tutoring, that the desired standards of support for learning are achieved. All local tutors are briefed and trained before they lead workshops or undertake any marking. In documentation and in meetings, the audit team found evidence of good practice in the induction and support of local tutors delivering workshops face to face, of those undertaking marking and of e-Facilitators. Local tutors benefit from team teaching experiences with full-time faculty who

visit associate organisations and monitor performance. Feedback is also provided by staff who moderate the marking of assessed work. Lead tutors may provide mentoring or coaching to support local tutors, as necessary. From documentation and discussion with staff, the team formed the view that the College was scrupulous in ensuring that the desired standards of support for learning were secured before the delivery of materials and the provision of local tutoring were implemented.

e-Learning

103 The nature of the College's provision means that the development of faculty skills in relation to e-Learning is important for effective course delivery. In March 2001, a report on Electronic Faculty Competences followed up work that had been undertaken on more generic faculty competences. As a result, a major development has been the College's e-Learning Primer (see paragraph 97). Both College-based and external faculty are encouraged to work through the Primer to ensure familiarity with the e-Learning provision and associated methodologies. The audit team noted that the internal information technology (IT)-based communication systems were used for electronic messaging and conferencing on issues relating to e-Learning and learning support.

104 The provision of tutor support for e-Learning mainly involves associate faculty, but ARC has also emphasised the need to involve College based faculty in the development of e-Learning databases. The challenge of ensuring that all faculty were adequately prepared for e-Tutoring led to the development of a Certificate in Virtual Tutoring which has been piloted with a number of College staff and staff in associate organisations. The audit team viewed course documentation for the Certificate and spoke to staff involved in the pilot and concluded that it was pedagogically well-founded and exposed staff, as students on the course, to direct experience of the challenges, concepts, possibilities and issues in the provision of e-Tutoring. The team considers the course to be a noteworthy feature of good practice, illustrative of the College's integrated approach to the pedagogic development of all members of faculty

through activities centred upon the practical application of learning and development.

Quality of learning opportunities, including distributed and distance learning

105 Teaching at the College through distributed and distance methods is mainly provided through course materials, workshop activity and e-Learning support for staff responsible for the submission, marking and return, with comments, of assignments. The principles underlying the College's holistic approach to curriculum development, delivery and evaluation in distance learning are that for all modes of delivery wherever students are based, the key elements of the learning experience should be consistent, and that learning should be progressively learner-centred.

106 Course materials are mainly web-based or provided as CD-ROMs but also include bespoke written texts. Documentation seen by the audit team and discussion with staff and students confirmed that the preparation and testing of course materials was planned with care and undertaken by a team comprising subject specialists and staff from Learning and Teaching Services with input from core associate faculty, if appropriate. In meetings, the audit team heard that the materials were designed to be an integral part of the student learning experience.

107 The quality of student learning is monitored through student feedback. A report on student feedback for all faculty is sent to the Dean and lead tutors also receive information on faculty in their subject areas. The Dean monitors the evaluations and identifies any member of faculty whose average score is below the target level for more than two quarterly returns. Faculty group leaders take the necessary action in response; this feedback also links into the performance review system. Lead tutors are responsible for monitoring the evaluations of the performance of external faculty. In meetings with the audit team, staff who were involved with external collaborative organisations confirmed that new workshop tutors were guided and mentored and their performance evaluated in accordance with

the College's procedures. Each year, the Dean provides a report on staff performance using data derived from the evaluations to the Management Team and another on staff development to ARC.

108 The audit undertaken by QAA of the College's linkage with InterCollege in Cyprus confirmed the capacity of the College's systems at that time to identify matters for attention and for tutors or the associate organisation to take remedial action. In the course of the present audit, the audit team found evidence to confirm that lead tutors were alerted to deficiencies in teaching, materials and delivery of workshops through responses to module questionnaires (paragraph 78) and through results for assignments in which a class had not performed to the standard expected. The relevant lead tutor either raises the matter directly with the tutor concerned or as part of the annual review of the module.

109 The College's Teaching and Learning Strategy described the MBA as a leading edge programme delivered by an institution which aimed to promote developments in teaching and learning. A working paper seen by the audit team stated that, as such, curriculum development and review had to engage with risk. The team noted that the same working paper identified the alignment of assessment with learning outcomes in accordance with the clients' strategic reasons for investing in the programme as a key feature of the rationale for course design.

110 The audit team read of significant matters identified by the College for resolution in the development of Programme 5 for delivery through collaborative arrangements (see paragraph 155). One of these was a lack of alignment between some learning outcomes and the corresponding assessment. In this context, the team would advise the College, as it develops Programme 5, to ensure that assessment methods are aligned with the stated learning outcomes, with particular reference to the distance learning mode. The team also noted that while the current job description for lead tutors included some reference to responsibilities for quality assurance and academic standards, these were not fully codified to reflect their overarching role in quality monitoring.

111 From its review of a range of committee papers and review reports, the audit team noted that the College's routine quality assurance arrangements had identified a number of significant issues that, at the time of the audit, were being considered or were scheduled for appropriate action. The team saw evidence of effective action in response to identification of areas for action in the provision of a resource base for e-Learning tutors and e-Learning support for associate organisations. From its reading of ARC papers and minutes, the audit team concluded that ARC received the necessary information to allow it to exercise an effective institutional overview of delivery of the College's programmes through distance or distributed methods.

112 In meetings with the audit team, staff expressed the view that the present systems for quality assurance were sufficiently rigorous and robust to provide assurance of quality and standards throughout the changes being implemented at the College. The team concurs with that conviction in the case of the College's systems for the quality assurance of its teaching at a distance which the team found to be both sound and comprehensive. The team noted in particular the robust system for the development of course materials. Practice in this respect seemed to the team to exemplify the College's organised and thoughtful approach, including that for the compilation of course material, to the assurance of the student learning experience from recruitment to qualification.

113 From scrutiny of documentation and meetings with staff, the audit team concluded that the SED presented an accurate account of the College's approach to the assurance of the quality of teaching through staff development and support. The team considered the College's integrated approach to the pedagogic development of all members of faculty to be a feature of good practice.

Learning support resources

e-Delivery

114 The College described its technological provision as a 'rich mix of learning support

mechanisms' that supported student learning at a distance and on site at the College. A new student database has been introduced and the computer conference system replaced.

115 The audit team read a review of e-Delivery at the College that had been undertaken in April 2005. The review defined general use of the web as 'e-Delivery', reserving 'e-Learning' for the use of web environments specifically designed to support learning. The review reported that e-Delivery, including e-Learning and the e-Library (see paragraph 120), was used in support of almost all modes of delivery of the MBA programmes. A further working paper noted that, by 2001, e-Learning had become a core and integral process rather than a 'supplementary programme resource'. In meetings with the audit team, staff spoke of the College's considerable knowledge and expertise derived from its experiences with learning technology over the previous 15 years. The team also heard that faculty had an increasing awareness of the differences between traditional teaching and on-line facilitation of learning.

116 The review of e-Delivery identified significant issues for attention, including a need for greater robustness and rigour in the College's systems, the need to reconsider the extent of functionality available, the limited evidence of ongoing updating and the substantial variability of demand being placed upon capacity and capability by individual projects. Difficulties for users were also identified in relation to the proliferation of databases, storage limitations, the phasing out of multiple and outdated platforms, and outdated equipment. The review also indicated that the diverse nature of the projects related to the expansion of e-Learning delivery in the College's operations was jeopardising 'prospects of researching new technologies or novel applications of existing online features'. The LTS review concluded that e-Delivery in its current format was no longer sustainable, and that some urgent action was required. The College has taken action to resolve the matters identified in the review by establishing a project delivery board, moving management

responsibility to the Operations Board and introducing e-Learning templates for all learning activity. As a result, LTS has been able to resume its focus on e-Learning research and associated pedagogic development.

117 The SED noted that all of the College's 'core systems' had been replaced since the previous audit; in meetings with the audit team, staff indicated that there would be further enhancement over the following two years. In view of a level of student dissatisfaction with the on-site provision, particularly in comparison with faculties in the students' places of employment, the team concluded that it would be desirable for full account to be taken of student expectations and needs when deciding on priorities for the development of the College's ICT provision. In the course of the audit, the College confirmed that a further e-Learning investment package had been approved and that investment in these areas of College capability had already commenced.

118 In the course of the audit, the audit team explored the College's approach to evaluation and feedback of its learning resource provision to inform curriculum and institutional development. The team noted that in the past the College had conducted 'intermittent surveys' of student views and regular reviews for ARC of the IT support for learning. At the time of the audit, an appointment had recently been made in LTS, to take responsibility for user support. The postholder will be responsible for collecting feedback from users to inform decisions about the design and development of websites, information services and learning materials. In its reading of documentation and discussions with staff and students, the audit team noted a number of areas where the gathering of targeted feedback might assist in future plans for development. The team also noted that an investigation into the effectiveness of e-Learning from the learners' perspective had revealed 'some difference of view as to the impact of technology upon the depth of students' understanding'.

119 The audit team noted that ARC had recorded the view of staff that there was

'insufficient opportunity for faculty to take part in experimentation with ICT developments'. Faculty group leaders had reported to ARC that 'further data were needed to enable progress to be made in the e-Learning area. It was difficult to identify improvements because there was insufficient information from the learners' perspectives'. The audit team therefore welcomed evidence of a wide range of innovatory activities being undertaken in this area, some in receipt of outside funding. It noted that a pilot of computer-based examinations had encountered problems with cheating, and had been suspended while means of preventing cheating were explored. It also noted that some proactive suggestions for curriculum development from the e-Librarian did not appear to have been taken further. The team concluded that it would be advisable for the College to develop further its approach to the collection and analysis of evaluations and statistical data in respect of its learning resource provision that will inform quality assurance and contribute directly to innovation and quality enhancement.

Library and e-Library

120 The SED explained that the attendance pattern for the MBA meant that many students did not visit the College on a regular basis and therefore did not have ready access to the on-site library provision. The College has therefore developed an e-Library that offers a rich and readily accessible collection of full text peer-reviewed articles, relevant databases and information, and e-Books. The audit team noted a report to ARC in 2004 that stated that the e-Library was 'not used enough with some students still being unclear about what it could provide and how to use it'. By contrast, in meetings with the audit team students spoke very positively about the facilities provided through the e-Library which was accessible from all locations and at all times of day. Students found the on-line area easy to access and use, and very reliable. The team also heard confirmation of careful arrangements for induction to e-Learning. The team concluded that the provision of the e-Library, which is notable for highly relevant and carefully selected material to support students' learning, was a

feature of good practice in effective support for the type of open and student-centred postgraduate learning that the College seeks to promote.

Academic and personal guidance, support and supervision

121 Every MBA student has a learning and development advisor or personal tutor. The two designations describe the same role and responsibilities but for different modes of study, the former being for the attendance MBAs and the latter for the distance learning mode. In meetings with staff, the audit team heard that they provided both academic and pastoral support to avoid confusion in the context within which the College operates. All staff providing such support hold MBA qualifications themselves, receive formal training and induction, and are coached and supervised by the directors of studies. In meetings with students, the audit team heard that personal tutors and learning and development advisors played a key role in providing support and in maintaining regular contact with students. The students also reported that local administrators assisted in maintaining contact with students.

122 From discussion with staff and students and documentary evidence, including comment in external examiners' reports, the audit team noted that considerable effort and attention was given to the provision of apt and facilitative feedback to students on performance. This is often coupled with what is now commonly termed 'feedforward', being constructive advice about ways to enhance the students' approach to subsequent work. Students whom the audit team met confirmed the value of such support for their learning and the team heard on several occasions from students that they would have liked to receive more feedback about examination performance, 'in order to improve'. The College may wish to further consider how best to disseminate and extend this good practice in the provision of feedback to all assessed work.

123 From its enquiries in the course of the audit, the audit team found that the College's

approach to the quality assurance of support for taught postgraduate students arose from a manifest commitment to sometimes implicit but clearly well-understood goals and criteria for the provision of effective support for learning and individual learners. It is based upon careful selection, training and monitoring of suitable personnel and occurs within networks of staff whose concern is the support of students. There is evidence that it is developed in response to matters raised in reviews, by way of example, the provision of the e-Learning Primer and the on-line Tutors Resource. The team noted that it aimed wherever possible, but not universally, to facilitate an effective and equivalent learning experience for all students.

124 The audit team also heard and read of a range of ways in which the College maintained contact with and supported postgraduate research students at various stages in their studies and of the monitoring of this through periodic review. Approaches to induction, progression, supervision and assimilation of the students into the research community at the College are systematic and effective. The staff network provides continuity of support and monitoring which allows intervention and remedial action should it be necessary. Response rates and satisfaction ratings for post programme questionnaires are high.

125 The College provides a Careers Service which at the time of the audit had recently been enlarged. It provides assistance with the preparation of CVs, careers guidance, careers education, and support for personal development. In addition, some careers planning is embedded in the provision. The Careers Service is not available to sponsored students without agreement from the sponsors.

126 In meetings with the audit team, students confirmed the value of assistance provided by the Careers Service; students who were ineligible for support considered that they were deprived of a worthwhile element in the College's provision. In due course, the College will no doubt wish to evaluate the impact of the Careers Service on the total learning experience. The audit team confirmed that the

Careers Service operated in accordance with the relevant precepts of the *Code of practice*.

127 The College does not have formal legal responsibilities under the Special Educational Needs and Disability Act 2001 other than as a provider of hotel and conference facilities. Consideration by QUIT of the section of the *Code of practice* on students with disabilities identified areas for action in relation to the quality of the learning experience for students with disabilities. There are established processes for support for students with dyslexia or particular medical circumstances, including staff with designated responsibilities for admission, assessment, learning and teaching issues and site facilities. The audit team saw evidence of sensitive and careful handling of individual cases to ensure equality of opportunity, particularly in devising appropriate assessment arrangements.

128 On the basis of documentary evidence and discussion with staff and students, the team audit team confirmed that the SED provided an accurate account of the College's approach to personal and academic support and guidance. The team also found that provision in this area was in alignment with the relevant sections of the *Code of practice*. The team concluded therefore that the College's systems for the academic and personal support of its students were fit for purpose and operating as intended.

Collaborative provision

129 The College delivers the DLMBA through a network of associate organisations and local offices, all overseas. At the time of the audit, there were 11 associate organisations, two local offices in Hong Kong and Dusseldorf and one wholly owned subsidiary company in South Africa. The Associate Organisation in Frankfurt had recently begun to offer the FEMBA and local tutors on this programme had been trained to support module workshops. South African legislation requires that collaborative arrangements lead to a South African award and that all assessment processes be conducted locally. Arrangements have therefore been made for an Academic Board to be established and operate in South Africa and for the students to

receive a dual award. During the audit, the audit team met students studying at some of the College's collaborative partners, including a videoconference with students in South Africa.

130 Local offices are operated by the College with no link to a local organisation and therefore do not fall within the definition of collaborative provision in the *Code of practice*; as the quality assurance requirements for local offices are largely the same as those applying to the other operations overseas, consideration of the College's approach in this area has been included in this section of the report for ease of reference.

131 The SED explained that, under the Charter and Statutes, the College was empowered to grant associate status to 'suitable organisations'. AAC, under delegated authority from the Academic Board, and the Management Team must give initial academic and business approval respectively to potential associate organisations. At the time of the audit, the Principal had final authority to approve the establishment of associate organisations but the SED indicated that in future that responsibility would be vested in the Academic Board.

132 The SED was clear that the College retained responsibility for the quality assurance and academic standards of provision delivered through associate organisations and emphasised that the programmes of study were not franchised. There are formal agreements for each of the College's collaborative arrangements that define the responsibilities of the parties for delivery of the programmes. The SED claimed that the agreements were 'compliant' with the original section of the *Code of practice* on collaborative provision, which the audit team was able to confirm from its examination of the agreements. Associate organisations provide defined support and facilities as stipulated in the agreements governing the operation of the collaborative arrangements. All programme materials and content remain the intellectual property of the College and all programmes are delivered to the curriculum requirements and programme specifications of the College. Examinations are conducted in accordance with College procedures.

133 The College's Academic Regulations for the approval of associate organisations and accredited centres (see paragraph 131) set out the framework for the establishment of collaborative arrangements and there is a Review Manual that includes procedures for review visits (see paragraph 139), review reports and annual reports. An Administrative Guide 'intended for additional help and guidance for the programme administrator' provides advice in support of the administration of partnerships and contains brief mention of annual and periodic reviews but little information about the quality assurance of student learning. The audit team saw a Procedures Manual for the Associate Organisation in New Zealand that adopted a more holistic approach to the partnerships and included some detail on academic matters, but in the context of operational and service quality rather than academic quality. At the time of the audit not all collaborative arrangements had procedural manuals.

134 The SED outlined the key contact figures for staff at collaborative organisations: academic matters are dealt with by the Director of Graduate Qualifications Programmes; contractual queries are answered by the Director of International Business, and operational matters are referred to the Director of Operations. The International Business Operations Manager is a key liaison figure for partner organisations and, according to the SED, 'provides an additional overarching contact point for Associate Organisations'. The Manager co-ordinates bi-annual meetings with managers from associate organisations and the local offices; there was evidence that while such meetings were designed to focus on operational issues, they provided a forum for the exchange of ideas and dissemination of good practice.

135 College lead tutors take responsibility for academic oversight of subject areas. Many of the collaborative organisations make frequent, sometimes exclusive, use of tutors who are employed in a full or part-time role at the College for workshops and dissertation support. In meetings with staff, the audit team heard that these tutors trained local staff in 'the

Henley way' and also monitored local staff performance. The audit team noted that use of College tutors was more common in geographically close partnerships. The team also noted that the College had recognised the effective contribution of the use of College tutors to the assurance of quality and standards in its collaborative work and would encourage it to extend the use of College tutors to all of its collaborative organisations.

136 In the course of the audit, from documentation and discussion with staff, the audit team established that one of the associate organisations was also an 'accredited centre'. The section of the SED on collaborative provision made no mention of accredited centres and there is no reference in the College's register of collaborative provision to such arrangements. The audit team found that tutors from the accredited centre were assessing work that led to awards of the College, and minutes of an ARC meeting in February 2005 highlighted problems with the marking of the work and the need for further action.

137 The audit team did not see any documentation providing definitions of the different types of collaborative arrangements and associated requirements for quality assurance. The report of the previous audit noted that the College had identified the need for more clarity in the definition of responsibilities for the operation of collaborative arrangements and the College is aware of the potential for problems to arise from a lack of clear and comprehensive documentation. In meetings with the team, senior staff acknowledged the need to codify procedures for the operation of separate categories of collaborative activity to establish clearly the roles and responsibilities of both parties to the arrangement. The minutes of a meeting of ARC meeting in October 2004 referred to a 'project to review the codification of procedures' for associate organisations. The team also noted that the ARC Panel convened in February 2005 to consider periodic review reports recommended that '[t]he College should establish its core requirements with Associate

Organisations, set expectations and set out how it would manage the relationship. These would be the key elements to be covered in the College's contracts with its Associate Organisations'.

138 The audit team saw evidence that the process of codification of procedures had begun in revised guidelines for the approval of local tutors, which were comprehensive and clarified roles and responsibilities. Further evidence seen by the team consisted of revised and refined procedures for the approval of associate organisations and the creation of formal procedures relating to the closure of partnerships that were an evolution of the careful approach employed in recent closures. The team noted good practice in the induction and training of local staff and visits by College staff which could usefully be formalised in the College's procedures for the quality assurance of the student learning experience in partnerships (see paragraph 135).

139 Collaborative organisations are required to submit annual review reports and are subject to periodic review visits 18 months after approval and then 'approximately every 4/5 years' thereafter. At the time of the audit, the procedures and reporting pro formas for annual and periodic reviews had been recently revised to secure a better alignment of information between the two processes. Periodic review visits are undertaken by two members of College staff: one academic and a 'senior member of professional/administrative staff'. Reports are produced to a template and are presented to ARC by the reviewers in person. The SED claimed that '[i]ssues stay[ed] on the ARC agenda until they ha[d] been resolved', which the audit team's reading of the relevant minutes corroborated. Documentation seen by the team stated that outcomes of periodic reviews of associate organisations would in future be considered by the CPWG (see paragraph 35).

140 The audit team read a range of recent annual review, periodic review and overview reports for collaborative arrangements. The latter are compiled by the director of studies for the DL MBA and presented to ARC. Matters discussed included staffing issues related to overseas tutors, the process of review of

associate organisations and local offices, and operational details about individual collaborative institutions. Most of the more recent periodic reviews had annual reviews appended.

141 Although written to a template, there was inconsistency in the presentation of content in the annual and periodic review reports, by way of example, some had action points within the text, some had action plans and some had neither. Although periodic review was designed to cover periods of three or more years, the audit team noted a tendency for the reports to focus on the most recent year of operation. The Review Manual states that the purpose of the review visit is the maintenance of quality and the safeguarding of standards but reports seen by the team emphasised operational matters rather than the quality of student learning and there was little comment on teaching quality and student feedback. One report seen by the team followed up issues from the previous review visit and identified that agreed action had not been taken. The SED signalled plans to avoid a recurrence by requiring review reports to be considered by a group of 'senior staff' on receipt to allow any necessary actions to be taken without delay. A report on the actions taken would accompany the review report when submitted to the ARC for consideration. The audit team noted that the College also intended to introduce a formal follow-up process one year after the review visit which the team would support as providing additional assurance of the quality of the College's collaborative provision.

142 At the time of the audit, the partnership in Frankfurt had not had a separate review but had been included in the Periodic Review of the FEMBA, which is also offered in London. The audit team considered that the review report exemplified critical evaluation of the academic quality of a programme of study and the student learning experience in a partnership. In developing its approach to periodic review of programmes and collaborative organisations, the College may wish to draw on and disseminate this good practice.

143 The audit team was provided with a schedule of review visits that indicated that a

number of partnerships had received fewer visits than provided for in the procedures. The associate organisations in Greece, Netherlands and Singapore had received no review visits from the mid 1990s until their recent closures. The audit team saw evidence that students from these organisations received continued workshop and dissertation support from the College to complete their studies. Denmark had had no review visits between 1996 and 2003. The College plans to give further consideration to the frequency of visits to collaborative organisations, an intention that the team would support, as it noted that a number of the partnerships that had not received regular visits had now closed.

144 The previous audit report included recommendations about the operation of collaborative links. The report asked the College to consider copying to partner organisations annual programme reviews with appended relevant external examiner reports, and providing for expert scrutiny of learning support issues when considering applications for associate status. The audit team confirmed that these recommendations had been addressed satisfactorily by the College. The report also noted College plans to reflect on, and clarify existing agreements and guidelines and felt this would be of benefit by 'clarifying the rights and responsibilities applicable to individual partnerships - thus enabling a consistent approach to their fulfilment'. The present audit team formed the view that this was an area where the need for further work persisted (see paragraph 137). The College's collaborative link with Intercollege Cyprus was audited by QAA in 2000. The report of the audit, published in 2001, expressed confidence in the arrangements for the management of the provision.

145 The SED stated the College's belief that its mechanisms for approval, monitoring, review and communication, were 'effective in ensuring the standards of its international provision.' At the same time it acknowledged that 'the operation of a network of this kind [was] challenging and demanding'. The audit team found that the College's approach to the maintenance of standards in collaborative

provision, achieved through its exercising control of the curriculum and assessment process was sound. From its examination of periodic review reports for collaborative linkages and associated documentation, the audit team concluded that the reviewers had reported with accuracy and attention to detail, but that there was scope for a greater focus on academic quality and more consistency of content and presentation. The team considered that there was potential for the current process for periodic review to lack objectivity as it used only internal staff from the College and the process includes appraisal of the College's own practices. Review reports seen by the team did demonstrate that strengths and areas for action were generally clearly identified and consideration of the reports at ARC was undertaken by senior staff not associated with the programme delivery. The team considers that the process of periodic review of collaborative organisations would be strengthened by the involvement of external experts to provide an additional perspective on the operation of the partnership and confirmation of comparability of the College's approach with sector-wide practice. The audit team therefore advises the College to establish clearly the purpose of academic and operational processes, including the interrelationship between self-evaluation, objective evaluation and evidence based judgements, in the ongoing monitoring and review of associate organisations. The team also considers that it would be advisable for the College to systematise and document its requirements and expectations for the quality assurance of the support and delivery of programmes in each type of collaborative arrangement.

Section 3: The audit investigations: discipline audit trails and thematic enquiries

Discipline audit trail

146 In the course of the DAT, appropriate members of the audit team met staff and students to discuss the programmes, studied a sample of assessed student work, saw examples

of learning resource materials, and studied annual module and programme reports and periodic reviews relating to the programmes. Their findings in respect of the academic standards of awards are as follows.

Masters in Business Administration

147 The scope of the DAT was the MBA, delivered in a number of modes:

- Executive Full Time MBA (EFTMBA) on campus at Henley Management College over one year (81 students)
- Modular MBA delivered on campus at Henley Management College over two years involving 67 days attendance (148 students)
- Flexible Evening MBA (FEMBA) delivered in London and in Frankfurt (107 students)
- Distance learning MBA (DLMBA) delivered: (i) from Henley Management College (2,111 students); (ii) with international associate organisations (1,741 students); (iii) as a tailored company programme (1,200 students).

The MBA has a common core curriculum, common elements of assessment and common external examining arrangements, although modes of study and delivery are different 'in response to the learning needs of students'. There are plans to replace the existing MBA with a revised version, Programme 5, which at the time of the audit was in development.

148 The DSED was based on the latest internal periodic review reports for the various modes of delivery of the MBA with the relevant minutes of the meeting of the Periodic Review Panel and the minutes of the Academic Board meeting at which the Periodic Review Panel report was considered.

149 Programme specifications and an assessment framework for each mode were provided for the various modes of delivery. The programme specifications made clear linkages between the programmes of study, the FHEQ and the *Subject benchmark statement* master's awards in business and management. Staff whom the audit team met demonstrated a clear understanding of the role of programme

specifications and students reported they found them useful. The website made good use of programme specifications in providing information about the programmes of study. The team found the specifications to be clear and informative.

150 The College developed its programme specifications between 2003 and 2005 to replace its 'schemes of studies'. The audit team noted that at the time of the periodic review of the DLMBA, the programme specification for the MBA (Project Management) by Distance Learning was 'still under development'. While the introduction of this aspect of the Academic Infrastructure has not been timely, the audit team found that processes used in the design and implementation of programme specifications had been effective and demonstrated good practice. The College used an external advisor to raise staff awareness of learning outcomes. Staff attended external workshops on the compilation of programme specifications and the College reviewed the programme specifications for MBAs offered at other institutions. The College's systematic engagement with practice in the HE sector has resulted in well designed programme specifications which meet the challenges inherent in producing one document for multiple audiences. In the view of the audit team, the College may wish to extend this approach to other areas as it develops its policies and procedures for quality assurance and enhancement to foster increased engagement of faculty and support staff with current issues and developments in the HE sector.

151 Statistical data on student performance and characteristics were supplied in the periodic review reports for each mode of the programme, but different statistics were supplied in different formats. While the data were summarised, it was not clear to the team whether any systematic use was made of the data to monitor quality and standards, particularly across the various modes of delivery, or to inform change. Successful implementation of the IMI project (see paragraph 91) will assist staff in monitoring

systematically the performance of students relative to their entry qualifications.

152 From scrutiny of documentation and discussion with staff, the audit team confirmed the approach to annual monitoring and periodic review as reported at paragraphs 41-50. The team found that the current processes for annual and periodic review were being followed at the discipline level and were leading to some changes, by way of example, modifications to the format of the modular MBA. The team formed the view that, given the centrality of the MBA to the College's provision, the inclusion in annual and periodic review of a systematic comparison of the performance of students from the various modes, and the performance of students from Associate Organisations, would provide useful information to the College in its management of quality and standards.

153 The audit team reviewed external examiners' reports and the College's responses to matters raised. The team found that the procedures for external examining were followed systematically and effectively at the discipline level. External examiners' reports seen by the team were consistently supportive of the programme and of the way in which the business of the Board of Examiners and its pre boards was conducted. The team concluded that the entire process for external examining as implemented at local level was rigorous, businesslike and helpful in identifying matters for attention in development of the provision.

154 The College has a standard framework for the weighting of assessment over all modes of the MBA which is incorporated in the programme specifications. Each mode has a separate assessment framework which clearly identifies the assessment requirements against programme learning outcomes. The SED stated that the clear communication of assessment criteria was seen as a 'quality control mechanism'. The SED also indicated that module assignments varied between the different modes of study with equivalence being established by lead tutors.

155 The SED pointed to group work as an 'increasingly effective mechanism' for assessing collaborative work on attendance modes of study. A maximum of 50 per cent of an assessment scheme may be group based. The College has developed guidelines for group assessment. The College does not use summative peer assessment. The audit team found that assessment criteria were appropriate and there was strong confirmation from students whom the audit team met of their understanding and use of these. Group work is not summatively assessed for the DL MBA: in meetings with the team, faculty and senior College staff expressed the belief that team learning occurred in all modes. Staff also stated that the College had considered the assessment of collaborative skills by means of group work for distance learning students and had not decided to follow this route for operational reasons. The audit team would advise the programme team in developing Programme 5 to ensure that assessment methods are aligned with the stated learning outcomes, with particular reference to the distance learning mode.

156 Students whom the audit team met confirmed that feedback on assignments was provided within the time frame stated and that, in most cases, it was useful to them in improving their performance; review of feedback on samples of assessed work seen by the team confirmed the appropriateness of the feedback. The students were aware that individual feedback on examinations was also available.

157 The audit team viewed samples of student work from a range of subjects, across all modes of delivery, including some from associate organisations. The work was in alignment with programme specifications and was consistent across modes of delivery and organisations. The team found that current assessment processes were in line with the relevant precepts of the *Code of practice*. From scrutiny of the programme specifications and external examiners' reports the team confirmed that the standard of student achievement was appropriate to the award of the MBA as located within the FHEQ.

158 Student handbooks, known locally as Programme Organisers, and adapted for each of the modes are supplied to all students. The audit team viewed a sample of the handbooks and formed the view that they were generally comprehensive and contained the requisite information and regulations. In meetings with the audit team, the students strongly endorsed the usefulness of the Programme Organiser, much of which is supplied electronically.

159 Students make use of the e-Library, particularly during the e-Elective, project and dissertation stages. As noted above (paragraph 120), the e-Library is viewed by students as an impressive and excellent resource both in terms of scope and content, particularly as a complement to the range of e-Electives. The audit team found that the e-Environment was accepted by students as a natural context for learning and that they were well supported by the College in this respect. Students whom the audit team met spoke less favourably about the information technology (IT) facilities at the College, dissatisfaction with which has featured in feedback to the College. Students whom the audit team met were satisfied with the personal support provided through personal tutors and learning and development advisers and also identified administrators and tutors as additional sources of support.

160 Students are invited to supply feedback on workshops and modules. In meetings with the audit team, students indicated that the College acted in an effective and timely way in response to feedback about the workshops. Students were less positive about the approach to module feedback. In the SED the College identified approaches to feedback at the subject level, including improving response rates, as an area requiring further action.

161 The SED explained that, at the programme level, feedback was obtained through student intake representatives who collect the views of their colleagues and discuss these directly with the directors of studies. In meetings with the audit team, students confirmed that this system operated effectively; all the students knew the identity of their representatives. Overall, the

team was satisfied that mechanisms for gathering student feedback were operating as intended at the point of delivery.

162 From scrutiny of documentation and meetings with staff and students, the audit team concluded that the College had achieved a student-focussed and supportive environment for delivery of the MBA and that the quality of learning opportunities was suitable for the programmes of study leading to the award.

Thematic enquiries

163 The audit team did not select any areas for thematic enquiry.

Section 4: The audit investigations: published information

The students' experience of published information and other information available to them

164 The audit team viewed a range of information and publicity material, including College brochures, brochures produced by local offices and associate organisations, programme organisers and the College's website. The team discussed the value and accuracy of the material with students at the briefing and audit visits, with students in the DAT, and by video conference with a group of students studying at the College's South African subsidiary.

165 The SED noted that published material for prospective students included programme brochures and website information, the latter covering admission requirements; accreditation; college processes and procedures. The SED identified the e-learning database as a valuable source of information for registered students; it contains guides to study, programme organisers, examination guides, dissertation guides and administrative arrangements. The SED pointed to the Director of Marketing and Business Development as responsible for bringing together 'all aspects of communications and marketing material', but was not explicit about

where responsibility lay for the assurance of the accuracy of published information.

166 In meetings with the audit team, students in meetings stressed the importance of programme information to their decision to apply to the College. The students had also used the brochures and information on the web to inform their choice; in particular, website information was used extensively to compare requirements for the College's MBA with those from other institutions. The audit team considered that the website for intending students made particularly good use of programme specifications in giving guidance to students about the aims, learning outcomes and assessment of the College's programmes. For students intending to study with an associate organisation, the College has produced a Programme Guide for International Associates that provides simple and useful guidance and gives details of the support provided by associate organisations.

167 For students on programmes, the main formal source of information is the programme organiser; students whom the audit team met confirmed the value and usefulness of this publication. While the programme organisers provide brief basic information about appeals, not all versions include information about complaints procedures, the standardised inclusion of which would, in the view of the audit team, make programme organisers a more comprehensive source of information.

168 The audit team found that the College had clearly taken steps to ensure that publicity and other materials prepared by partner organisations were checked for accuracy and adherence to protocols. The audit team saw evidence that prior approval had to be sought from the Director of International Business for the publication of advertising and any other promotional material. Local brochures, some in the local language, are produced by most associate organisations and by local offices and mostly reflect the College's own brochures. It was not clear to the audit team, from the evidence available to it, how the accuracy of publicity material in languages other than English was assured.

169 In meetings with the audit team students confirmed that the information available to them prior and after entry to the College was helpful and accurate. The audit team concluded that the SED presented an accurate account of the College's approach to securing the accuracy of its published information which was secure and operating as intended.

Reliability, accuracy and completeness of published information

170 As the College is not publicly funded, there was for a time some uncertainty as to whether it would be required to implement the publication of teaching quality information (TQI) as set out in HEFCE's document 03/51, *Information on quality and standards in higher education: Final guidance*. In October 2004, QAA confirmed that, although institutions not in receipt of public funding were not obliged to publish TQI, it expected that all of its subscribers would implement fully the agreed Quality Assurance Framework for higher education in England, which included TQI. The College set up the IMI project, led by the Director of Operations, to enable it to address in a 'planned manner requirements for routine reporting, data quality evaluation, quality assurance matters and the consideration of student input and feedback information'.

171 Documentation seen by the auditors demonstrated how the project was intended to improve the College's capability for data reporting and analysis. It also confirmed that internal publication of such data would take place from September 2005, with external publication commencing in January 2006 on a rolling programme.

172 The SED stated that there had been 'informed College discussion on information requirements in the public sector'. The audit team found that at the time of the audit, the College was making progress towards meeting the quantitative requirements of TQI but had still to consider its position in respect of the qualitative requirements. The team considers that this is an area where there might be benefit in the College encouraging its faculty

and support staff to draw on experience in other institutions in the HE sector to gather information on current sector-wide approaches and practice.

Findings

Findings

173 An institutional audit of Henley Management College (the College) was undertaken during the week beginning 27 June 2005. The purpose of the audit was to provide public information on the quality of the College's programmes of study and on the discharge of its responsibility as a UK degree-awarding body and for the provision that it offers on behalf of Brunel University, which formally awards the College's research degrees.

174 As part of the audit process, according to protocols agreed with HEFCE, SCOP and UUK, one audit trail was selected for scrutiny at the level of an academic discipline. This section of the report of the audit summarises the findings of the audit. It concludes by identifying features of good practice that emerged from the audit, and recommendations to the College for enhancing current practice.

The effectiveness of institutional procedures for assuring the quality of programmes

175 The Court of Governors is the supreme governing body of the College, delegating to the Academic Board its powers relating to academic matters in accordance with the College's Charter of Incorporation. The Academic Board has overall responsibility for approval of programmes and for prescribing the criteria, procedures and guidelines for the assurance of quality and standards. There are four principal committees reporting to the Academic Board and the roles of these are defined in the institution's Quality Strategy 2003-2006. The Academic Board receives annual overview reports from each of its sub-committees as well as the minutes of each meeting.

- the Academic Approvals Committee (AAC), previously known as Approvals and Accreditations Committee
- The Academic Reviews Committee (ARC)
- The Research Committee
- The Board of Examiners.

The Academic Board maintains oversight of the College's provision through regular reporting from these sub-committees, including formal annual overview reports.

176 The Quality Strategy also identifies a 'less formal network' of working groups of staff reporting to individual members of the Management Team and to the Academic Board where appropriate as elements of the College's quality assurance framework. Key among these are the Assessment Regimes Working Party (ARWP), the Quality Implementation Team (QUIT) and the Collaborative Provision Working Group (CPWG), the latter having been only recently established at the time of the audit.

Programme approval, monitoring and review

177 The Academic Regulations document the processes of approval, monitoring and review. Programme approval is overseen by the AAC, which has recently undertaken valuable work in codifying procedures and promoting understanding of the systems and processes in place for the approval of programmes and programme elements. ARC exercises oversight of annual and periodic monitoring of programmes. Annual review of programmes, of subjects and of associate organisations is undertaken. Action points are identified and monitored by ARC. A quinquennial periodic review of both MBA and Doctoral programmes was undertaken in preparation for the audit. There is external representation in the membership of panels for the periodic review of programmes. The audit team noted the intention of the College to revise its approach to periodic review of programmes in the light of the findings of the present audit. Associate organisations delivering the College's programmes overseas are subject to approval and review processes with no external academic participation.

Feedback on the quality of programmes from students and other stakeholders

178 There is systematic and effective involvement of student representatives from each class and mode of delivery in raising points for action and responses to matters raised for consultation. Students have regular

opportunities to complete questionnaires after workshops with the expectation that any necessary action in response will be taken in time to benefit current students. There are some difficulties in securing a high completion rate of questionnaires. The College maintains a network of formal and informal ways of obtaining feedback and suggestions from alumni and employers on the content and suitability of programmes and plans for development. The ARC reviews the results of feedback and monitors action taken in response.

Procedures for assuring the quality of distance-learning programmes and collaborative programmes

179 Much of the College's provision is delivered by distance learning through collaborative arrangements. The quality assurance of this area of the College's activity is integrated and managed in the same way as its home provision. There is a coordinated team approach to the design of programmes and materials that involves specialists in the subject area and delivery and pedagogy in distance learning. Immediate feedback is sought from tutors and students on the effectiveness of elements of the programme, and there is evidence of action taken in consequence. The College takes steps to ensure that the planning, delivery and equivalence is comparable for students whatever their location and in each mode of delivery. Monitoring and review of the programmes of study are undertaken within the standard procedures for the MBA provision.

180 The SED stated that the College had an 'established and comprehensive framework through which it manage[d] its quality strategy and confirms academic standards. The management processes, structures, mechanisms, responsibilities and procedures, which it ha[d] developed and defined, ha[d] proved to be robust and effective in both delivering and confirming the level of its academic achievements...!.

181 The audit team formed the view that the formal core committee structure outlined in the Quality Strategy was soundly designed and worked well. The team also formed the view

that the informal groups undertook useful work and added value to the quality management processes. There was evidence that the remit of the groups was not always clear and that where their business involved both academic and operational matters there was a consequent risk that academic matters did not receive appropriate attention. In the view of the team this confusion is particularly evident in the academic monitoring and review of collaborative provision. The audit team concluded that it would be desirable for the College to clarify and codify further the relationships between informal working groups and formal deliberative bodies in its framework for assurance of quality and standards.

182 The audit team found that not all processes for the quality assurance of the College's provision were codified and documented and that guidance to staff in this area could be improved. The audit team identified the work of ARWP in the development and documentation of assessment practice as good practice which could usefully be extended to other areas of the College's work. The audit team would also wish to encourage the College to systematise and document its requirements and expectations for the quality assurance of the support and delivery of programmes in each type of collaborative arrangement.

183 Annual monitoring is generally actively undertaken. Reports by directors of study are scrutinised by independent senior staff. The audit team noted steps taken to require reports which were more reflective and to make more systematic use of statistical data. The team considered that the College could establish more explicit criteria against which annual monitoring reports could be judged objectively.

184 The outcome of recent periodic review activity identified a need for revision of periodic review processes, as reported in the self-evaluation document (SED). The audit team noted the College's intention to undertake such a review in the light of the findings of recent accreditation visits and the present audit. For both annual and periodic review, the College may find it useful to consider moving to a

process involving a greater range of people involved in the programme delivery, and, in respect of periodic review, to consider ways in which the external members of the panel might be engaged more directly with an objective evidence base. The audit team would wish to encourage the College to establish clearly the purpose of academic and operational processes, including the interrelationship between self-evaluation, objective evaluation and evidence based judgements, in the ongoing monitoring and review of programmes of study and of associate organisations.

185 From the evidence available to it and discussion with staff and students, the audit team formed the judgement that broad confidence could be placed in the soundness of the College's current and future management of the quality of its academic programmes.

The effectiveness of institutional procedures for securing the standards of awards

186 The College secures the standards of its awards through its Academic Regulations and associated documentation, its assessment framework, procedures and methodology, and the use of external examiners to verify the rigour of the assessment process and the academic standards set and achieved. Programme specifications for the MBA and MSc provision take account of the relevant QAA subject benchmark statements and the provision is in alignment with *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ).

187 The College draws on statistical information in periodic and annual reviews through the inclusion of basic progression statistics showing the number of students that have completed each part of the award. The statistics are used to support identification of failure rates in relation to associate organisations or particular modes of delivery. Annual review reports for associate organisations include statistics on student performance and information on progression rates. Boards of examiners compare assignment marks with

examination marks and also student performance in associate organisations.

188 In 2002 the College moved to a phased introduction of a new student record database to provide more comprehensive management information. The College has initiated an Improving Management Information (IMI) project designed to establish information requirements to support the College's assurance of academic quality and standards.

189 External examiners scrutinise student work, attend meetings of the Board of Examiners and report on assessment outcomes and procedures. The College provides external examiners with induction sessions and documentation including the Academic Regulations, programme specifications and relevant course materials to support their work. The Board of Examiners is responsible for the confirmation of the standards of the College's awards and Stage 1 of the DBA which is awarded by Brunel University. The Board of Examiners considers the work of all students registered for awards of the College, including those at associate organisations and local offices overseas.

190 External examiner reports are reviewed by the Academic Registrar who identifies matters for action. Reports are circulated widely to staff in the College, including the Principal. An institutional overview of the reports is achieved by appending them to the ARC's annual overview report to the Academic Board. The pro forma for external examiner reports do not seek differentiated responses in relation to work from students on different modes of study or at different locations.

191 The SED stated that the College considered its external examining process to be a 'particular strength'. On the basis of documentary evidence and discussion with staff, the audit team concluded that the SED provided an accurate account of the College's approach to external examining arrangements. The team also confirmed that the College's approach to external examining was in alignment with the relevant sections of the *Code of practice for the assurance of academic quality and standards in higher education* (Code of practice), published by

QAA. The College may wish to consider whether more specific comment from external examiners on student performance for each of the modes of study and delivery sites might contribute to its assurance of the standards of its awards. Overall, the team concluded that the College's approach to external examiners and their reports represented good practice in the assurance of academic standards.

192 The SED stated the College's belief that its regulations and procedures provided a strong framework for the maintenance of standards. The SED noted that programme specifications were in alignment with the relevant subject benchmark statements and the FHEQ and that external examiners confirmed the appropriateness of academic standards. The College has identified the provision and use of statistical information as an area of priority for action. The SED did not include detailed evaluation of how data were used in the assurance of academic standards. The audit team noted that assessment data were provided for each meeting of the Board of Examiners.

193 The audit team found that SED provided an accurate account of the College's approach to the assurance of academic standards. Curriculum design is sound and draws on subject benchmark statements and the FHEQ. The audit team considered that the use of statistical data was adequate to confirm academic standards, but concurs with the College that this is an area where further development of its approach to the collection and analysis of data, through the IMI project, would inform quality assurance and contribute to quality enhancement. The team noted that the College had identified instances of a lack of alignment between assessment methods and learning outcomes. The team would therefore advise the College, as it develops the next version of the MBA (Programme 5), to ensure that assessment methods are aligned with the stated learning outcomes, with particular reference to the distance learning mode.

194 From documentary evidence and discussion with staff, the audit team confirmed that the College made strong and scrupulous

use of independent external examiners in summative assessment procedures, supporting a judgment of broad confidence in the College's current and likely future management of the standards of its awards.

The effectiveness of institutional procedures for supporting learning

195 The College has two groupings with responsibility for learning support: the Centre for Connected Management Learning (CML) and Learning and Teaching Services (LTS). The former conducts research and evaluation into adult management learning, collates and disseminates research outcomes and contributes to the enhancement and awareness of pedagogic issues; the latter concentrates on the quality management of the College's provision. Support for student learning, whatever the mode of delivery, is provided through: e-Delivery, including e-Learning, the e-Library and e-Tutoring, and tutoring, mainly by associate faculty and personal tutoring.

196 Careful arrangements are made for the induction of students to e-Learning and the use of the e-Library. The e-Library offers a rich and readily accessible collection of full-text reviewed articles, relevant databases and information, and e-Books. While the College considers that the potential of the e-Library is not yet being fully exploited by all students in their learning, students whom the audit team met were unreserved in their praise of the facility, including its accessibility. The SED offered no explicit evaluation of this aspect of student support. The audit team considered the provision of the e-Library, which is notable for highly relevant and carefully selected material, to be a feature of good practice in the support of student learning.

197 The provision of an adequate information and communications technology (ICT) infrastructure has been affected by rapid growth in electronic communication and the increasing sophistication of the technology. The audit team found that, despite considerable expenditure and replacement of the core systems by the College, the systems had limited functionality and that students therefore tended

to rely on facilities provided in the workplace. The team noted the College's policy that its provision should be accessible to all international students regardless of resources available to them. The team concurred with the College's view that there was a clear need for a major injection of resource in this area and considers it desirable that the College ensure that student expectations and needs are taken fully into account when deciding on priorities for the development of its ICT provision.

198 There is a comprehensive system for the induction, training, appraisal and development of part-time and full-time staff, which is aimed at ensuring that they successfully fulfil the 'Henley way' of supporting learning. Staff support and development are managed through a matrix of the Dean, the faculty group leaders and, in the case of module delivery, the lead tutors. These arrangements provide effective support for staff to carry out their duties and to develop their practice in line with the College's pedagogic and strategic directions; the audit team found that they were demonstrably effective and were valued by staff. It was also apparent that staff engaged in subject-based and business-oriented networks, rather than those geared for academic practitioners in the UK. The team considered that the development of staff would be strengthened if the College were to foster increased engagement of staff with current issues and developments in the higher education sector.

199 The College has an integrated approach to the development of all of its staff through activities centred upon the practical application of learning and development which the audit team considers to be a feature of good practice. Care is devoted to selection, induction and monitoring of the associate faculty who are supported by lead tutors and directors of studies at the College. Learning support tutors are themselves MBA graduates and can therefore draw on first hand experience when supporting a variety of student needs in learning. The SED did not offer any explicit appraisal of the effectiveness of this aspect of support for learning but there was evidence of high ratings in student evaluations. The audit team noted good practice in the

provision by many of the tutors of constructive feedback to students about how to improve performance in subsequent work. The team suggests that the College may wish to consider how best to disseminate and encourage this good practice to all tutors and on all assessed work. The team noted that the College was aware of the potential for inconsistency in the quality of tutorial support and therefore kept it under review, but that some variability persisted.

200 The College has decided that provision of pastoral and academic support for each student through one individual is the most effective approach, given the nature of its student body, described in the SED as 'time-constrained, mature learners'. Every MBA student has a personal tutor or a learning and development advisor, depending on mode of study. In meetings with the audit team, students testified to the value and effectiveness of this element of support for their learning.

201 The SED emphasised the importance that the College attached to planning 'for the provision of learner support mechanisms and the role which these play[ed] in facilitating the student learning experience'. The College considers that it provides a 'rich mix of learner support mechanisms' which are responsive to the 'varying nature and timing of student demands'. From scrutiny of documentation and discussion with staff and students, the audit team concluded that the SED provided an accurate representation of the College's organised and thoughtful approach, including that for the compilation of course material, to the assurance of the student learning experience from recruitment to qualification which the audit team considered to be a feature of good practice.

Outcome of the discipline audit trail

Masters in Business Administration

202 The scope of the DAT was the MBA, delivered in a number of modes:

- Executive Full Time MBA (EFTMBA)
- Modular MBA
- Flexible Evening MBA (FEMBA)

- Distance Learning MBA (DLMBA), covering both open recruitment and tailored programmes for companies

203 Programme specifications and an assessment framework for each mode were provided for the various modes of delivery. The programme specifications made clear linkages between the programmes of study, the FHEQ and the *Subject benchmark statement* for master's awards in business and management. Student evaluations of the programme were generally positive.

204 The audit team viewed samples of student work from a range of subjects, across all modes of delivery, including some from associate organisations. From scrutiny of the programme specifications and external examiners' reports, the team confirmed that the standard of student achievement was appropriate to the award of the MBA as located within the FHEQ. On the basis of meetings with staff and students and reading of documentation, the audit team concluded that the College had achieved a student-focussed and supportive environment for delivery of the MBA and that the quality of learning opportunities was suitable for the programmes of study leading to the award.

The use made by the institution of the Academic Infrastructure

205 The College has employed different approaches to consideration of the developing guidance on academic quality embodied in each of the elements of the Academic Infrastructure. The *Subject benchmark statement* for business and management was used in the development of programme specifications for the MBA and the MSc in Strategic Marketing Leadership. The FHEQ was also referenced in the development of programme specifications for all master's programmes and the DBA, most of which were developed and approved in 2004. Programme specifications are used well in web-based information for prospective students, and are being embedded in College structures.

206 The College's initial approach to the *Code of practice* was to establish the QAAHE Quality

Assurance Framework Working Party to 'track and monitor' the *Code* on behalf of the Academic Board. In 2003 a Quality Implementation Team (QUIT) replaced the working party and mapped the College's current practice against the precepts of the *Code*, and to recommend action and to report on implementation to the Academic Board. QUIT was active as a group during 2003 but, once the initial mapping had been completed, responsibility for continuing monitoring was passed to identified individual members of the group and it did not meet formally again until June 2005. The audit team confirmed that the original mapping of the *Code of practice* had been thorough but found evidence that the subsequent delegated approach had not always secured a timely response to revisions to the *Code*. The team considers that the College might wish to review its current arrangements, particularly roles and responsibilities, for consideration of its policies and procedures in the light of the *Code of practice* to restore the original effectiveness of its initial approach.

207 The audit team concluded, from an examination of the programme specifications and their use, that the College had made appropriate use of the subject benchmark and the FHEQ. Minutes of the Academic Board seen by the audit team recorded little detailed discussion of the Academic Infrastructure beyond limited reporting and assurances on progress and action. From its scrutiny of the relevant documentation, the team formed the view that the College might wish to consider whether the formal deliberative structures of the institution were sufficiently engaged in academic debate related to the Academic Infrastructure.

The utility of the SED as an illustration of the institution's capacity to reflect upon its own strengths and limitations, and to act on these to enhance quality and standards

208 The SED provided a useful and accurate account of institutional procedures for the quality assurance of the College's provision and for the maintenance of academic standards.

The SED also identified the issues and concerns facing the College in relation to the management of quality and standards. The audit team considered that the SED did not provide a fully reflective discussion of the appropriateness and effectiveness of the institution's processes in relation to quality management and enhancement.

Commentary on the institution's intentions for the enhancement of quality and standards

209 The SED did not include any explicit exposition of the College's plans for the enhancement of quality and standards other than to indicate an intention to review the periodic review process in the light of the recent reviews and the findings of the present audit. In the course of the audit, the audit team found evidence of a range of planned activities for enhancement in relation to the quality of learning support and delivery of programmes, especially around the e-Learning strategy. In meetings with the team, staff were firm in the belief that the new strategic plan and associated revisions to academic and management structures would not have an adverse effect on the existing well-established quality management framework. The team formed the view that there would be merit in the College's giving active consideration of the potential for the revised arrangements to contribute to the enhancement of quality systems and processes. The team concluded that while the College's intentions in respect of enhancement were appropriate, they did not always draw on systematic evaluation of the effectiveness of the College's current approaches to the management of academic quality. The team therefore considers that there could usefully be a greater emphasis on an approach to future development based on informed objectivity, enabling judgements to be made about the potential effectiveness of proposed plans for quality enhancement.

Reliability of information

210 As the College is not publicly funded, there was for a time some uncertainty as to whether it

would be required to implement the publication of teaching quality information (TQI) as set out in HEFCE's document 03/51, *Information on quality and standards in higher education: Final guidance*. In October 2004, QAA confirmed that, although institutions not in receipt of public funding were not obliged to publish TQI, it expected that all of its subscribers would implement fully the agreed Quality Assurance Framework for higher education in England, which included TQI.

211 The College set up an 'Improving Management Information' (IMI) project, led by the Director of Operations, to enable it to address in a 'planned manner requirements for routine reporting, data quality evaluation, quality assurance matters and the consideration of student input and feedback information'. Documentation seen by the auditors demonstrated how the project was intended to improve the College's capability for data reporting and analysis. It also confirmed that internal publication of such data would take place from September 2005, with external publication commencing in January 2006 on a rolling programme.

212 The audit team found that at the time of the audit, the College was making progress towards meeting the quantitative requirements of TQI had still to consider its position in respect of the qualitative requirements. The team considers that this an area where there might be benefit in the College encouraging its faculty and support staff to draw on experience in other institutions in the higher education sector to gather information about current sector-wide approaches and practice.

Features of good practice

213 The following features of good practice were noted:

- i. the work of the Assessment Regimes Working Party in the development and documentation of assessment practice (paragraph 33)
- ii. the College's approach to external examiners and their reports (paragraphs 54-69)

- iii. the immediacy of response to student feedback provided through the student representative system and workshop evaluations (paragraphs 76 and 78)
- iv. the integrated approach to the pedagogic development of all members of faculty (paragraph 104)
- v. the organised and thoughtful approach, including that for the compilation of course material, to the assurance of the student learning experience from recruitment to qualification (paragraph 112)
- vi. the provision of the e-Library, which is notable for highly relevant and carefully selected material to support students' learning (see paragraph 120)
- vii. the provisions for constructive feedback to students on assessed work (paragraphs 122 and 156).

Recommendations for action by the institution

214 Recommendations for action that is advisable:

- i. establish clearly the purpose of the academic and operational processes, including the interrelationship between self-evaluation, objective evaluation and evidence based judgements, in the ongoing monitoring and review of programmes of study and of associate organisations (paragraph 50 and 145)
- ii. draw on existing good practice, exemplified by the Academic Approval Committee's approaches to approval processes, to codify and document its procedures for quality assurance and enhancement and the assurance of academic standards (paragraphs 50 and 145)
- iii. in developing Programme 5, ensure that assessment methods are aligned with the stated learning outcomes, with particular reference to the distance learning mode (paragraphs 110 and 155)
- iv. systematise and document its requirements and expectations for the quality assurance of the support and delivery of programmes

in each type of collaborative arrangement (paragraph 145).

215 Recommendations for action that is desirable:

- v. clarify and codify the relationships between informal working groups and formal deliberative bodies in the College's framework for assurance of quality and standards (paragraph 36)
- vi. further develop its approach to the collection and analysis of data that will inform quality assurance and contribute to quality enhancement (paragraph 94)
- vii. foster increased engagement of faculty and support staff with current issues and developments in the Higher Education sector (paragraphs 101, 150 and 172)
- viii. ensure that student expectations and needs are taken fully into account when deciding on priorities for the development of the College's ICT provision (paragraph 117).

Appendix

Henley Management College's response to the audit report

The audit of the College in June 2005 took place at a time of strategic and structural change following the appointment of a new Principal with effect from 1 January 2005.

The College welcomes the 'broad confidence' judgement of the audit team. It is particularly pleased that seven features of good practice, in key areas such as the development of assessment procedures, interaction with external examiners and the handling of their reports, the provision of constructive feedback to students and e-Library provision, have been highlighted.

The College has begun the process of addressing the recommendations for action made by the audit team, in the context of ongoing strategic and operational developments.

