



Outcomes from institutional audit

Validation and approval of new provision, and its periodic review



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Linney Direct

Adamsway

Mansfield

NG18 4FN

Tel 01623 450788

Fax 01623 450629

Email qaa@linneydirect.com

Summary

The institutional audit reports published by November 2004 indicate that, in general, institutions have sound approval procedures in place, which they oversee effectively. Approaches to periodic review are more various, and some are too recent for their operation to be judged. Nonetheless, many audit reports reflect good practice in the design and conduct of periodic review. There is wide evidence, in both approval and periodic review, of consistency with advice given in *Section 7 of the Code of practice for the assurance of academic quality and standards in higher education (the Code of practice)*, as well as of incorporation of the Academic Infrastructure as a whole.

Features of good practice are cited in 12 reports. These identify strengths in guidance on quality assurance procedures and the role of central academic administrations; the extension of approval and validation processes to collaborative provision; the rigour and integrity of periodic review processes; action planning and monitoring; and externality in periodic review.

Recommendations on validation and approval procedures are found in 23 reports and relate to response to the Academic Infrastructure; the design and operation of approval procedures; institutional oversight; processing of approval conditions; and externality in approval processes.

Recommendations on periodic review are also to be found in 23 reports and relate to response to the Academic Infrastructure; the establishment and scheduling of review procedures; the design and operation of review procedures; programme revalidation; externality in review processes; response to review findings; and monitoring of periodic review.

Institutional overview of approval procedures is considered, by various reports, in terms of the nature of the senate's or academic board's involvement in conferring approval, particularly where the procedures have been delegated to faculties or schools. Some reports commented, apropos delegated systems, on inconsistencies in approval criteria and processes.

The link between the quality of central oversight of periodic review schemes and desirable consistency in their operation is also the subject of reports. The scope of review schemes is identified as an issue where the extent and complexity of provision, or the range of departmental topics, being reviewed affects the focus that can be placed on individual programmes and specifically academic matters.

The role played by external advisers, and the criteria for their appointment, in both approval and periodic review systems is a key topic in many reports, which reflect the disparate approaches among institutions. Some often turn to their external examiners for advice on approval, whereas others exclude external examiners from the role; others again are reported as reviewing their positions on externality. Appointment criteria may be related to the ways in which external advisers are deployed, whether at the design or final approval stage. Reports reflect the varying degrees of involvement allocated to external advisers, from a written submission to membership of approval panels. In many reports full participation is identified as a positive feature.

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Periodic review raises the same issue of distinction between external examiners and external advisers/assessors and the need in some cases for institutional appointment criteria.

Reports also reflect much variability in approaches to the internal composition of periodic review panels both between and within institutions. A number of reports comment on the value placed by the institutions concerned on the use of disinterested internal members of approval and review panels.

Preface

An objective of institutional audit is 'to contribute, in conjunction with other mechanisms, to the promotion and enhancement of high quality in teaching and learning'. One of the ways in which this can be accomplished is through identifying features of good practice across the reports and areas where reports have commonly offered recommendations for improvement.

In due course, QAA intends to produce an extended reflection on institutional audit in the *Learning from audit* series, but since the final institutional audit reports in the present audit cycle will not be published until spring 2006, *Learning from institutional audit* is unlikely to be published before late 2006. To give institutions and other stakeholders more timely information, QAA has therefore decided to produce a series of short working papers, describing features of good practice and summarising recommendations from the audit reports, to be published under the generic title *Outcomes from institutional audit* (hereafter, *Outcomes...*).

A feature of good practice in institutional audit is considered to be a process, a practice, or a way of handling matters which, in the context of the particular institution, is improving, or leading to the improvement of, the management of quality and/or academic standards, and learning and teaching. *Outcomes...* papers are intended to provide readers with pointers to where features of good practice relating to particular topics can be located in the published audit reports. Each *Outcomes...* paper therefore identifies the features of good practice in individual reports associated with the particular topic and their location in the Main report. Although all features of good practice are listed, in the interests of brevity not all are discussed in this paper. In the initial listing in paragraph 3, the first reference is to the numbered or bulleted lists of features of good practice at the end of each institutional audit report, the second to the relevant paragraphs in Section 2 of the Main report. Throughout the body of this paper references to features of good practice in the institutional audit reports give the institution's name and the paragraph number from Section 2 of the Main report.

It should be emphasised that the features of good practice mentioned in this paper should be considered in their proper institutional context, and that each is perhaps best viewed as a stimulus to reflection and further development rather than as a model for emulation. A note on the topics identified for the first series of *Outcomes...* papers, to be published throughout 2005, can be found at Appendix 3 (page 23).

This first series of *Outcomes...* papers is based on the 70 institutional audit reports published by the end of November 2004. The second series will draw on institutional audit reports published following the 2004-05 audits. It is likely that there will be some overlap in topics between the first and second series. Papers in each series are perhaps best seen as 'work in progress'. Although QAA retains copyright in the contents of the *Outcomes...* papers they can be freely downloaded from QAA's website and cited, with acknowledgement.

Validation and approval of new provision, and its periodic review: introduction and general overview

- 1 One of the chief purposes of institutional audit is to provide information through published reports which will enable stakeholders, including the public, to judge the soundness of higher education institutions as providers higher education provision and 'tertiary qualifications of national and international standing' [*Handbook for institutional audit: England*, paragraph 11] (the *Handbook*). For this reason all institutional audit reports examine the effectiveness of an institution's internal quality assurance structures and mechanisms in the light of the *Code of practice*.
- 2 The 10 sections of the *Code of practice* provide a source of advice for higher education institutions on good practice in academic quality assurance and in safeguarding academic standards, and authoritative points of reference for the enquiries that underpin the institutional audit reports. For that reason almost each audit report (other than when, for example, an institution offers no taught undergraduate or postgraduate programmes) refers to the *Code of practice, Section 7: Programme approval, monitoring and review*, published in May 2000, and gives careful consideration to how the institution approves new programmes of study and how it conducts periodic reviews of their progress. Material from the institutional audit reports that is relevant to programme monitoring is considered in another *Outcomes...* paper.

Features of good practice

- 3 Consideration of the 70 institutional audit reports published by November 2004 shows the following features of good practice relating to validation and approval:
 - 'the approach to the collaborative arrangement with the NFTS, in particular, the operation of the validation process' [Royal College of Art, paragraphs 156 i and 38]
 - the quality of the administrative support provided for quality and standards matters [Bath Spa University College, paragraphs 179 i and 34]
 - the comprehensive Course Developer's Guide that has had a positive impact on the development of consistent practice [University of Central Lancashire, paragraph 198 ii and paragraph 34]
 - the University's successful integration of the quality management processes of associate colleges with its own [University of Kent, paragraphs 237 bullet 3 and 54]
 - the flexible approach to the integration of provision offered through the [Centre for Lifelong Learning] into the formal approval, monitoring and review processes [Coventry University, paragraphs 273 i and 48].
- 4 Consideration of the published institutional audit reports shows the following features of good practice relating to periodic review:
 - 'the effective and constructive evaluation by the RCNI of its work which contributes to enhancement of its provision' [Royal College of Nursing Institute, paragraphs 158 iii and 47]

- the thoroughness and integrity with which its internal reviews and school audits are conducted, and the frankness with which the resulting reports convey their findings [Aston University, paragraphs 253 i and 45]
 - the [Internal Quality Audit] process [University of Keele, paragraphs 208 i and 52]
 - the thoroughness with which the University's [Periodic Programme Reviews] have been undertaken [Loughborough University, paragraphs 317 ii and 52]
 - the high degree of critical reflection, level of externality and the central monitoring of emerging action plans within the University's periodic review process [University of Sussex, paragraphs 259 ii and 59]
 - the pervasiveness and impact of the work of the [Quality Assurance and Standards Unit] [St Martin's College, Lancaster, paragraphs 217 iii and 56]
 - the College's self-reflective and open approach to monitoring and review processes which are proactive, forward-looking and robust [Trinity College of Music, paragraphs 153 ii and 37].
- 5 Consideration of those sections of the institutional audit reports which address validation and approval of provision suggest the following broad themes:
- frameworks and guidance
 - external reference points
 - the design and operation of approval procedures
 - monitoring and evaluation of conditions attached to approvals
 - monitoring and evaluation of the approvals process
 - external advice.
- 6 Likewise, consideration of those sections of the institutional audit reports which address the periodic review of provision suggest the following broad themes:
- the role and context of periodic review in institutions' arrangements
 - the design and operation of periodic review
 - scope of periodic review
 - scheduling
 - documentation
 - panels and their membership
 - follow-up
 - monitoring and development of periodic review findings and the periodic review process overall.

The features of good practice and recommendations relating to the periodic review of provision are discussed in paragraphs 35-57 below.

Validation and approval of provision

- 7 The *Handbook* states that as part of their enquiries, audit teams will consider the use made [by the institution] 'of external reference points, including the *Code of practice*, *The framework for higher education qualifications in England, Wales and Northern Ireland* (the FHEQ), and *Subject benchmark statements*' [the *Handbook*, paragraph 12, bullet 2]. The *Handbook* also states that 'when considering the institution's management of quality and standards, the audit team draws upon a range of external reference points, including the FHEQ, *Subject benchmark statements* and the *Code of practice*'. It continues that in so doing the audit team is not seeking 'evidence of compliance, but rather for evidence that the institution has considered the purpose of the reference points, has reflected on its own practices in the relevant areas, and has taken, or is taking, any necessary steps to ensure that appropriate changes are being introduced' [the *Handbook*, paragraph 55].
- 8 From the information above, it follows that in the sections of the audit reports which address the validation and approval (and periodic review) of modules, courses and programmes of study, audit teams make frequent reference to *Section 7*. This was used as a reference point by teams from the point when institutional audit commenced, at the beginning of the 2002-03 session.

Frameworks and guidance

- 9 Precept 2 of *Section 7* advises that 'institutions should ensure that the overriding responsibility of the academic authority (eg senate or academic board) to set, maintain and assure standards is respected and that any delegation of power by the academic authority to approve or review programmes is properly defined and exercised'. The Precept therefore calls for clear definition of the roles, responsibilities and authority of the different bodies involved in programme approval (and review) and for the monitoring and review of any delegated power. Precept 6 of *Section 7* also states that 'the final decision to approve a programme should be taken by the academic authority, or a body acting on its behalf', which should be independent of the department or unit that is to offer the programme.
- 10 In general, audit reports showed that institutional procedures for programme approval are consistent with the advice of *Section 7* referred to above, and that they are sound and fit for purpose. Indeed, it might be observed that the total number of features of good practice identified in reports of itself does not appear to represent the full extent of the good practice discussed in the course of the main text of the published audit reports and in respect of key areas of the procedures. The number of features of good practice and recommendations in the area of programme validation and approval needs to be put in the wider context of the numerous reports which, while not explicitly identifying features of good practice, nonetheless stated that programme validation and approval was being effectively conducted and provided for a clear overview of quality and standards. Among the reports offering such conclusions were:

- Brunel University [paragraphs 55-59]
 - University of Kent [paragraph 51]
 - University of Salford [paragraph 29]
 - St Martin's College, Lancaster [paragraph 44]
 - University of York [paragraphs 36 and 38]
 - University of Liverpool [paragraph 40]
 - The Nottingham Trent University [paragraphs 37-38]
 - University of Portsmouth [paragraph 43].
- 11 Commonly, the approval process begins with an outline approval stage conducted at institutional level and addressed to strategic and resource issues. Thereafter most institutions conduct detailed academic approval processes at both faculty/school and institutional levels. A number of institutions, however, delegate responsibility for this phase to faculties/schools, while requiring formal confirmation of outcomes at senate/academic board level. The audit reports indicate that institutions employing devolved arrangements generally exercise institutional control and oversight via regulatory templates and central administrative and committee monitoring. In several instances, the composition of faculty/school validation panels in delegated procedures includes institutional members in order to 'encourage consistency of approach'. In some other cases responsibility for validating programmes involving collaborative and innovative delivery arrangements, or new subject areas or levels of award, is undertaken by institutional panels [University of Central Lancashire, 33]. In another case, an institution made provision to appoint a 'researcher' to work with course teams developing new proposals 'to assist in the gathering of data on current sector practice' [Trinity College of Music, 37].
- 12 Many institutions not employing devolved procedures adjust their approval requirements for collaborative provision; panel specifications, for example, may reflect the management implications of collaborative partnerships. The care shown in the approval of collaborative arrangements was identified by two reports as a feature of good practice [Royal College of Art, 38; University of Kent, 49]. In a number of other cases, audit reports commented on the rigour of collaborative approval procedures. Evaluation of practice in operating approval procedures is discussed in paragraphs 18-19 below.
- 13 *Section 7* also advises that 'institutions should publish guidance...on principles to be considered when programmes are designed' [Precept 5] and that 'approval and review processes should be clearly described and communicated to those who are involved with them' [Precept 4]. Audit reports show that there is very general provision of clear and helpful institutional guidance on development and approval processes, published in handbooks, manuals, templates and on websites. Some of this material is described as representing good practice or endorsed in other terms. One institutional guide is described as 'an excellent resource for staff, and an example of good practice, that comprehensively explains programme development and approval, including a checklist that clearly identifies the areas staff need to consider in their proposals' [University of Central Lancashire, 34] and another, by staff, as a particularly helpful resource.

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- 14 In addition, many institutions have established networks of advisers, at both central and faculty levels, to assist development teams through the various phases of the process and its requirements. One report, among others, noted the involvement of central officers with subject staff from an early stage, and the institution's view that this had helped to enhance programme planning, design and specification. Another report also identified the assistance provided to departmental staff by the institution's quality enhancement office and its course planning and approval handbook as worthy of note.

External reference points

- 15 *Section 7* indicates that institutions should 'ensure that their responsibilities for standards and quality are discharged effectively through their procedures for...' the design and approval of programmes [Precept 1]. They are advised to consider, inter alia, 'external reference points, including any relevant benchmark statements, national qualifications frameworks for higher education and, where appropriate, the requirements of professional and statutory bodies and employers'.
- 16 A review of the audit reports published by November 2004 shows that the integration of these external reference points, and the *Code of practice*, into the design and approval of programmes is generally very well established. Many reports note the incorporation of reference to the elements of the Academic Infrastructure in templates for programme specifications and there is frequent note of reference to alignment with the requirements of professional, statutory and regulatory bodies (PSRBs) and occupational standards. It is also evident that guidance on external reference points has been widely provided through handbooks and other means, including staff development. One audit report noted 'clear evidence of an understanding of external reference points...among staff'. In other cases, however, reports identified institutions which had still to address the Academic Infrastructure (or elements of it) in the approval of programmes or had still to develop programme specifications (or both), and these matters were the subject of recommendations.
- 17 A number of reports commented on active cooperation between the relevant institutions and PSRBs in the development and approval of programmes. This may involve 'extensive consultation' with the relevant bodies, PSRB representation on approval panels, consideration of a proposal conjointly with an accreditation panel, or joint development of programmes. Some reports, however, signalled a lack of clarity in institutional relationships with PSRBs, particularly in terms of their role if any in programme approval.

The design and operation of approval procedures

- 18 For the most part, audit reports confirmed the general soundness, and in many cases the rigour, of approval procedures, while noting the effectiveness of the institution's overview of their operation. A number of recommendations were, nonetheless, addressed to this area and some reports had concern about the effectiveness of institutional oversight. This might be because the final decision to approve - taken by the senate/academic board - appeared to have only formal

substance; in one case involving only the receipt of a list of approvals, which might have conditions outstanding. In another case, where approval was effected at school level, the report found 'little evidence of an institutional overview of the process other than the formal recommendation for approval to the Senate'. In a further case, where responsibility for the final approval stage had been devolved to schools, the report identified 'significant variability in the quality and quantity' of approval documentation, with proposals endorsed by schools although lacking key information required by the relevant institution's standard template. In this case it was recommended that the institution should ensure 'a more effective institutional oversight of final programme approval by confirming, at the institutional level, the appropriate completion of the process'. Two reports found a lack of clarity in the responsibilities of institutional panels concerned with programme approval.

- 19 One institution in which the approval process had been very largely delegated to faculties had encountered problems arising from the lack of any clear institutional statement on the criteria to be employed in testing course proposals and, hence, a lack of consistency in departmental approaches. Another provided no guidelines on the expected contents of validation documents. Conversely, one institution's adoption of an 'integrated' approach to delegated responsibilities, with central committee support for faculty approval processes, was found to be 'a strength' of its arrangements.
- 20 Two reports commented on the danger of 'incremental drift', where changes in curriculum structure and content could aggregate over time to alter a programme's generic aims and outcomes, and the need therefore for institutional mechanisms to address this. Some reports identified procedural complexity as a bar to efficiency both because of its demands on staff time and its impact on scheduling.

Monitoring and evaluation of conditions and recommendations attached to approvals

- 21 The processing of approval conditions, while not generally found to be problematic, was the basis for recommendations in several reports. These recommendations addressed a number of aspects. In one instance the status of the conditions listed in validation reports, and their relationship to recommendations, was unclear; it was also unclear 'whose responsibility it was formally to ensure that such conditions or recommendations had been satisfied and with what timescale', neither matter being mentioned in the institutional quality handbook.
- 22 A feature common to several reports was a concern about ineffective arrangements for, and monitoring of the fulfilment of conditions and the lack of prescribed timescales. This concern was reinforced by the fact that in some cases, the number of conditions set appeared to the audit teams to be unusually high and might involve a collaborative arrangement. In a number of reports where there was evidence of programmes being allowed to run in a context where 'significant conditions' remained an outstanding concern (even for up to two years) was expressed in the form of recommendations. One of these reports

noted also the lack of information provided by validation reports about such matters as their documentary status, the roles and positions of participants, or relevant dates; this missing detail was not supportive, in the audit team's view, of 'appraisal of the rigour of the process'. In contrast, other reports noted the care with which validation conditions were addressed and monitored and more generally the developmental use made of the validation process [Royal College of Art, 38; Trinity College of Music, 39].

Monitoring and evaluation of the approvals process

- 23 Several reports commented on institutional monitoring and evaluation, generally annual, of programme approval operations. This may take the form of a central administrative report to the institutional quality assurance committee, with associated review of procedures and identification of good practice.
- 24 One report noted the responsiveness of a validated institution to external input on programmes submitted for approval and the impact on internal academic review, and several others the use of external feedback in monitoring processes. Another report referred to an institution's annual audit of programme approval, which examines the various stages of the process and samples collaborative as well as internal provision. In this particular case, the focus of the internal audits on review and enhancement of quality assurance procedures was found to represent noteworthy practice. Another institution was reported as having established an annual programme of validation workshops 'to reflect on the way in which validation panels and faculties discharge their duties, [and] to identify good practice and any limitations in the process' [University of Brighton, 31].

External advice

- 25 *Section 7* advises institutions to 'ensure that the approval and review of programmes involves appropriate persons who are external to the design and delivery of the programme' [Precept 3], and among such persons includes 'external advisers who provide relevant information and guidance on current developments in the workplace and/or in the discipline(s)'. Many audit reports confirm that institutions have put in place satisfactory (or better) arrangements for incorporating such external advice into their approval procedures. Many other reports, however, expressed concerns about the robustness of institutional arrangements for external input and made corresponding recommendations. Some institutions were found not to have or see any requirement for external participation in the approval process, although in such cases departments might choose to seek advice on proposed developments, usually from their external examiners. Examples were cited of institutions which, lacking any general requirement for external input to approval, would be likely to ask for external comment on developments linked to PSRBs or entering new curricular areas. In one institution, external consultation was deemed to be sometimes useful where new or substantially altered programmes were being considered, although it was not a requirement. Nonetheless, the majority of institutions appear to require some form of external input to the approval of programmes.

The selection of external advisers

- 26 A review of the institutional audit reports published by November 2004 shows differences of approach on the part of institutions to both the selection and the deployment of external advisers. For example, some institutions resort largely or commonly to their external examiners in choosing advisers, although additional external expertise might be sought for more innovative proposals; other institutions in contrast exclude current (or former) external examiners from the role of external adviser.
- 27 Some reports noted the clear guidelines provided on criteria for selecting external advisers or, conversely, a lack of clarity or consistency in the appointment procedures. In the case of one institution, where on occasion the external adviser might have been identified as a potential teacher on the proposed course, the relevant report observed that 'while not excluded by the procedure, it appeared that this might not be entirely in the intended spirit of externality'.
- 28 In a wide range of reports it was clear, however, that the relevant institutions' criteria for identifying and appointing external advisers took account (as appropriate) of both academic and work-related factors. Some reports showed that institutions were either considering or had revised their approach to externality in the approvals process. One example was given of an institution which had introduced a requirement for external peer involvement over and above consultation with external examiners, and another of an institution which had determined that 'independent' external advisers should, in future, normally exclude current or former external examiners. In another instance, consideration was being given to the introduction of external peer scrutiny at the approval stage, reportedly in the light of the *Code of practice*. Another institution was reported as making a clear distinction between the role of external subject specialists, who contributed at the design stage of a proposal, and might be current or former external examiners, and external peers centrally appointed to take part in the approval process, who might not be current external examiners. Institutions commonly devolve responsibility for the selection of external advisers to faculties or schools and, in particular, when the external input is limited to the design phase or when approval responsibility overall is so delegated.

The deployment of external advisers

- 29 A wide variety of practice in the deployment of external advisers is reflected in the published audit reports. For many institutions, the role of the external adviser is identified with the design and development stages of new programmes. Matters on which external advisers are typically asked to comment include programme aims and outcomes, curriculum design, assessment strategy, benchmarks, the FHEQ and academic standards. In such instances, external advisers generally provide reports which go forward as part of the approval evidence. Some reports, however, referred to arrangements in which the external adviser's link with institutional approval was, at best, very limited. This was due to the fact that the advice provided was not, or rarely, forwarded to the institutional committee responsible for giving approval or, in one case, followed the institutional outline approval stage in a process where final approval was delegated to the school.

- 30 A number of the published reports include recommendations that external advisers should not merely supply written comment, but should attend the meetings of the panel or committee at which programme approval was considered; this would enable them to contribute fully to the discussion and, as one report said, 'face-to-face'. Two reports describe contrasting institutional approaches to approval and review in respect of the level of external involvement. One of these reports found the institutional position 'anomalous', 'given the weight afforded to the views of external peers at annual and periodic review'. Many reports, however identified the full participation of external advisers in programme approval meetings as a positive feature.
- 31 Some reports gave examples of effective institutional arrangements for briefing external advisers through arrangements such as checklists and model briefing letters and, in one case, of central revision of the briefing procedures in the light of external performance. Other reports noted institutional arrangements for receiving feedback from external members of approval panels, and one report suggested attention be paid to external comment on matters of standardisation and consistency.

The role of external input

- 32 A number of reports offered insight into institutional views on the role and value of external contributions. The key benefit identified was the confidence given by such input to institutional judgements on academic standards and vocational currency. Linked with this was appreciation of the more general value of an external perspective: one institution was said to regard external participation in programme approval as 'an essential complement to internal knowledge and expertise'. In the case of an accredited institution, contact with external members of approval panels was seen to be an important element in its development of externality and an external network.

Internal externality

- 33 The concept of 'internal externality' is used in several reports to refer to internal arrangements for individuals from across the institution to participate in approval processes. In this connection, some reports comment on the value placed by the relevant institutions on inter-disciplinary and cross-representational exchange, one seeing it as contributing to the dissemination of good practice, and others to the 'robustness' of the approval process. One report commented, however, referring to those cases where 'independent input from sources external to the [institution] is paramount', on the need not to 'cloud' the distinction between institutional and internal externality. Two reports raised questions about the independence of certain internal roles in the approval of programmes. One, in the context of a system of faculty-level validation, in which the chairing of validation panels was assigned to the dean of the interested faculty (or nominee), noted at least the possibility of a conflict of interest, whereas by contrast in the case of periodic review only a dean external to the faculty might act as the review chair. Another report questioned a system in which institutional advisers participated in all phases of the design and approvals processes, being members of panels at each level, acquiring thereby 'both a developmental and judgemental role...that could, potentially, jeopardise the independence of the [institution's] approval panel'.

Periodic review

Introduction

34 As with the validation and approval of new provision, the number of features of good practice and recommendations in the area of periodic review needs to be put in the wider context of the numerous reports which, while not explicitly identifying features of good practice, nonetheless stated that periodic review was being effectively conducted. In such cases periodic review processes were found to be operating effectively, and many of the relevant processes were described in terms of their thoroughness, rigour, reflectiveness and capacity to effect improvements in practice. Among the reports offering such views were:

- Royal College of Art [paragraphs 44-45]
- University of Bristol [paragraphs 59-60]
- The Open University [paragraph 59]
- University of Liverpool [paragraph 49]
- Royal Veterinary College [paragraph 74]
- University of Warwick [paragraph 58]
- University of Lincoln [paragraph 62].

The role and context of periodic review

35 *Section 7* advises institutions to review periodically 'the continuing validity and relevance of programme aims and intended learning outcomes' [Precept 8]. In general, the published reports show that institutions' periodic review arrangements focus on programmes and their aims and outcomes. Many reports confirm that institutional review processes are in alignment with the precepts of *Section 7*. In some cases reports go further and indicate that the arrangements seen were in alignment with the Academic Infrastructure as a whole. Conversely, some reports note, as a basis for recommendations, lack of reference to the *Code of practice*, or more widely to the Academic Infrastructure, in the design of review schemes. In many instances, the reports show that institutions have taken over or adapted the methods of the former subject review or academic review or, with the cessation of the latter, have seen a need to enhance their internal processes.

36 The published audit reports commented variously on institutions' handling of the relationship between internal periodic review and the reviews conducted by PSRBs. One report noted that programmes subject to PSRB inspection had been exempted from the institution's internal periodic review, although the relevant PSRB's statutory requirements did not fully cover the quality issues addressed in the institution's own review processes, and might not therefore be thought to fulfil the institution's purposes. Another report observed that where the internal review process had been combined with PSRB accreditation, documents appeared designed to meet the requirements of the PSRB rather than of the broader developmental consideration of issues associated with internal review. In another instance, a report commented on the absence from an institutional quality assurance handbook of any reference to the need to consider PSRB

reports or outcomes within the internal review process. Other reports, however, referred to effective combination with, or linkage between, PSRB and internal review events.

- 37 In a number of institutions the periodic review of programmes and subjects functions in tandem with that of departments (or schools) and the two may be scheduled to complement and inform each other. Alternatively, periodic review of departments may incorporate programme review. One report picked out the need, in this arrangement, for follow-up processes to ensure that teaching and learning, and quality assurance issues had been as well addressed by the centre as were resource and staffing issues. Another report, commenting on changes to its review arrangements, quoted the institution's determination to ensure that teaching and learning received 'explicit consideration' within a departmental process also encompassing research, resources, accommodation and internal governance. In the contrasting instance of three distinct periodic review processes being operated by an institution, the audit report warned of the possibility of overlap and overload. In a number of cases, reports suggested that the effectiveness of periodic review in the particular institutions was being impaired by the unduly burdensome processes employed.
- 38 Another report noted that in the relevant institution, the periodic review process included the appointment of a senior peer external reviewer to undertake a detailed appraisal of the course. 'The reviewer scrutinises course and college documentation, meets staff and students, scrutinises a range of other evidence including external examiner reports, and makes comparisons with the rest of the sector'. This report, which 'is considered by all the appropriate academic committees', 'informs the deliberations of the [institution's internal] working group in their review of the course'. The audit report agreed with the institution's view that this procedure was fully consistent with the advice of *Section 7*. It also came to the view that the particular way the institution had combined an external perspective with internal processes supported an 'approach to monitoring and review [which] was self-reflective and open, proactive, forward-looking and robust' [Trinity College of Music, 45].
- 39 In many institutions the processes of periodic review and revalidation (or re-approval) are effectively one and the same, falling generally within a five or six-year cycle and re-employing the validation procedures, but with additions such as a critical appraisal or self-evaluation document. Some of the published reports have identified uncertainties of delineation and blurring between procedures, with programmes taking a review or a revalidation route on the basis of inexplicit criteria. Where required, one institution conducts revalidation concurrently with review, a single panel producing separate review and revalidation reports 'which might have significant elements of commonality'. In two reports recommendations were made arising from the absence of formal or clear procedures for re-approval of programmes and the risk, through module and other amendments over a period, of 'incremental drift'. One report noted that the relevant institution provided for periodic revalidation, but not review of programmes, and observed the apparent lack of opportunities consequently for retrospective analysis of programmes or of elements across programmes.

- 40 In discussing periodic review, several reports observed the link with annual monitoring. One, for example, noted that the critical review document incorporated the key aspects of cumulative annual monitoring reports. Another quoted the institution's institutional audit self-evaluation document to the effect that periodic review was an extension of annual monitoring, but involving the 'fresh eyes of independent external reviewers', and that it provided for more thorough programme evaluations and hence the approval of more extensive changes to programmes.
- 41 Several of the published reports have commented on the interface between periodic review and collaborative provision. In some cases, institutions include local collaborative arrangements within internal review procedures, which may incorporate a visit to the partner institution. Others may employ a similar review scheme for collaborative arrangements, but with suitable adjustments to panel composition and reporting routes. In one case it was noted that, for collaborative programmes, the validating institution halved its review cycle from six to three years.

The design and operation of periodic review

- 42 Reports indicated that certain key features are built into the majority of institutional approaches to periodic review. As stated above, most review cycles are now of five or six years' duration. Almost without exception, the process is based on an encounter, lasting one or two days, and more often the latter, between a panel and the staff group responsible for the reviewed provision. Normally, the panel also meets students. Several reports noted the involvement of, or intention to involve, postgraduate research students. One report recorded a paper-based process of review, although in this instance also the panel meets students undertaking the schemes concerned.

Scope of periodic review

- 43 The scope of periodic review was the subject of recommendations in several reports. Generally, the issue concerned the relationship between the size and complexity of provision under review and the ability of the process to achieve sufficient depth of scrutiny of individual programmes. Two reports questioned, given the wide range of programmes for review, whether the process encompassed the necessary external expertise.
- 44 A number of reports touched in various ways on the choice between breadth of review, facilitating strategic reflection, and a more pointed focus on individual (or grouped) programmes. In one example, an extensive overhaul of postgraduate provision, including both introduction and modification of awards, and involving delivery by UK and overseas partners, was felt by the audit report to be 'over-ambitious' as a single stage event. Another report alluded to an institution's practice of 'sampling' areas taken from 'particularly large and complex provision', but without guaranteeing inclusion of any omitted areas in subsequent reviews. In this case the institution was advised to amend its regulations to enable it to assure itself that all its programmes were in alignment with the appropriate external reference points.

Outcomes from institutional audit

- 45 A finding of some reports was that periodic review was not clearly identifying or pursuing institutional, as against programme or departmental issues. The conclusion of one report was that the process needed broadening. Some reports confirmed the ability of periodic review both to identify and disseminate good practice. Other reports, however, suggested a need for institutions to develop effective means of disseminating the good practice identified in review reports or to substantiate claims in respect of the identification and dissemination of good practice of which audit teams were unable to find evidence.

Scheduling of periodic reviews

- 46 Comments on the scheduling of periodic review occur widely in audit reports. A number of recommendations in several reports relate to the absence of periodic review schemes or to notable slippages in implementation of schedules. Several reports addressed the lack of current arrangements for review. In one example, an institution had found no requirement for a programme review process over and above its revalidation arrangements. In another case, an institution that operated a departmental review scheme was engaged in planning to bring in periodic review. A further institution was, at the time of the audit, considering what periodic review model it should adopt. In another instance, the proposed reintroduction of periodic review was associated with major institutional restructuring.
- 47 Generally, where audit reports identified that programmes and courses were not subject to periodic review, they drew attention to the precepts and guidance in *Section 7*, while advising of the need for expedition. Some institutions with review schemes in place were reported as experiencing difficulty in meeting review schedules, and lengthy delays were noted in several instances. Two reports associated slippage with the overall demands of the review process and suggested they be reconsidered. Finally, an audit team noted the particular risk involved in a case where a report on a periodic review of collaborative provision had still to be received by the awarding institution (the focus of the audit) 15 months after the event.

Documentation

- 48 From the published reports it is clear that documentation to support internal periodic reviews generally includes guidelines on the process and its aims; a self-evaluation document or critical appraisal; programme specifications; student handbooks; external examiners' reports; and annual monitoring reports. One report identified the documentation developed to support internal periodic review processes as a feature of good practice [St Martin's College, Lancaster, 56].
- 49 Audit reports variously mentioned, but with less frequency, the provision for the periodic review panel of other documents and information such as PSRB reports; responses to previous internal reviews; feedback from current and former students; a teaching and learning strategy; and statistical data on student progression and outcomes. Some audit reports commented on lack of use of such data in periodic review, as also in annual monitoring. One report recommended that an institution make more effective and systematic use of statistical and performance data in monitoring and review.

Panels and their membership

- 50 Review panels typically, but not invariably, consist of members external to the provision being reviewed. Audit reports show that review panels usually include one or two members external to the institution as well as others either external to the department or, at greater remove, to the school or faculty involved. The panel chair is likely to be a senior manager or academic from outside the school or faculty, although there were instances reported of panels appointing their own chairs from among their members.
- 51 Across the institutional audit reports published by November 2004, many recommendations and textual comments link to panel composition. Objectivity, balance and consistency emerged as key issues. A number of reports tied these to a lack of institutional criteria for determining membership and insufficient formality in the appointments process. In such cases, reports advised of the need for 'more explicit criteria' and consistent application of the criteria in the appointment of external members of review panels. A recurring aspect of the appointment rationale mentioned in reports is the lack of distinction which may be made by institutions between external examiners and external assessors or specialists. Thus one institution was advised to 'clarify and distinguish the roles of external assessors and external examiners in the (review) process'. Similar advice was given elsewhere: 'the fact that the review process would, in effect, be inviting serving or recent external examiners to comment on their own performance and reports did not seem to the team to contribute to the objectivity of the process'. In another example, an institution that had tended to rely on employment of the same external consultant for all reviews was advised of the need for broader choice.
- 52 Another facet of panel composition addressed in a number of reports is the practice of filling out panels with members of the department or subject area being reviewed, with limited representation from elsewhere in the institution. One report stated of the institution in question that, 'It might also be advisable...to consider whether the balance of the membership of [review] panels should be less weighted towards those with a direct interest in the programme or programmes under review'. Another report observed similarly on a comparable imbalance: 'The team was not convinced that this arrangement was sufficiently distanced from day-to-day business to be sure of appraising potential weaknesses, or strengths, in the delivery of degree schemes'. Another report also observed '...the inclusion of not only the course director but representatives from the course under review in the membership of a review panel...is likely to inhibit the objectivity of the review process itself and diminish the standing of its findings'. One report found that where responsibility for conduct of periodic review was devolved to the level of faculties, schools or departments the composition of review teams might be characterised by 'considerable variability'. In another case, an institution was advised that 'safeguards were needed to ensure impartial panel selection'.
- 53 By way of contrast, many institutions are stated in the reports to have effective criteria and arrangements for the appointment of review panel members and to make strong use in particular of external members. One report quoted the

institution's view that external members were critical to the value of the review procedure as a whole and that they provided a 'vital and largely fresh perspective'. Others commented on 'strong and scrupulous use of external persons', 'robust use of external assessors', and on 'effective use of external representation in its internal review processes'.

- 54 Some reports commented on the presence or absence of briefing for panel members as well as members of departments or programmes experiencing review. One report referred to the provision of comprehensive briefing documentation on the review process, including guidelines for the self-evaluation document, which included the requirement for description of the area's approach to key aspects of the Academic Infrastructure. Other reports observed that review panels were provided with training and staff development, which might extend also to staff preparing for the review process. Conversely, one report concluded that there was insufficient formality in the induction of external panel members, while another noted the lack of any terms of reference for panels or of any specification for them of review documents.

Monitoring and development of periodic review findings and the periodic review process overall

- 55 Reports generally confirmed that institutions have effective arrangements for identifying actions needed in the light of review and for ensuring that action plans are followed up, with monitoring by central bodies responsible for quality assurance. Some reports, however, identified shortcomings in this area. One report advised an institution of the need to ensure that timely responses were made to review findings. Two other reports were unable to locate the mechanisms in place to ensure effective follow-up to review outcomes and advised the institutions concerned of the need to consider how progress in the meeting of conditions and responses to recommendations would be monitored. One report, however, identified the thoroughness of the institution's follow-up procedures as a feature of good practice. In this instance, action plans produced by staff teams following consideration of the periodic review report were found to be 'detailed and focused, with a clear timescale for implementation'. More particularly, the central monitoring of the 'emerging action plans' was identified in the report as a feature of good practice [University of Sussex, 59]. Another report commented on an 'institutional culture which promoted the identification of actions likely to sustain the quality of...provision' and in which 'monitoring and review activity was the key business of all committees in the quality management structure' [Royal College of Nursing Institute, 47].
- 56 Some reports observed the link between robust central oversight of the review process and desirable consistency in its general operation or, more specifically, in the way in which the process employed external participants. Other reports detected a corresponding link between lack of a central overview or regulatory framework and inconsistent practices. In this context, some institutions were encouraged to strike a balance between standardisation and devolved variation. In one report, however, the constructive engagement of departments with the institution's periodic review process, when allied to close and informed monitoring by the centre, was identified as a feature of good practice

[Loughborough University, 52]. Another audit report found good practice in the production and central monitoring of detailed quinquennial reports and action plans and the effectiveness of this process in informing the institution about the well-being of its provision [University of Keele, 52].

- 57 Numerous reports commented on the recent introduction of the periodic review schemes currently in use in institutions. This meant, often, that little evidence was available of the conduct of these review processes on which to form a view of their effectiveness. In such cases, reports therefore either offered a tentative opinion or reserved judgement. Some reports stressed the need for institutional monitoring of the review process or endorsed institutions' intention to monitor, or monitoring of, practice. In one example, an institution was encouraged to continue its evaluation with specific reference to the degree of staff engagement; another was advised of the need to monitor consistency across schools; and another advised of the need to monitor consistency in panel membership. Some reports acknowledged how institutional monitoring of the periodic review process had produced incremental improvements, for example in follow-up procedures and implementation of recommendations.

Conclusion

- 58 The evidence of the 70 institutional audit reports published in 2003-04 is that validation, approval and periodic review processes are in general soundly designed and operating effectively. The reports also indicate that in developing their systems most institutions have had paid close attention to the Academic Infrastructure and advice contained in *Section 7* of the *Code of practice*.
- 59 Overall, it is apparent that validation, approval and periodic review are contributing significantly to institutions' arrangements for establishing and maintaining quality and standards.

Appendix 1 - The institutional audit reports

2002-03

University College Chichester, February 2003
The Royal Veterinary College, February 2003
Cumbria Institute of the Arts, March 2003
Institute of Education, University of London, March 2003
London School of Hygiene and Tropical Medicine, March 2003
Middlesex University, March 2003
Royal Academy of Music, March 2003
Royal College of Art, March 2003
University of Cambridge, April 2003
School of Oriental and African Studies, University of London, April 2003
Bath Spa University College, May 2003
University of Lincoln, May 2003
London Business School, May 2003
Newman College of Higher Education, May 2003
Norwich School of Art and Design, May 2003
Rose Bruford College, May 2003
Royal College of Music, May 2003
Royal Northern College of Music, May 2003
The School of Pharmacy, University of London, May 2003
College of St Mark and St John, May 2003
The Surrey Institute of Art & Design, University College, May 2003
Trinity and All Saints College, May 2003
Trinity College of Music, May 2003
Royal College of Nursing Institute, July 2003

2003-04

University of Bath, October 2003
University of Bradford, November 2003
University of Buckingham, November 2003
University of Essex, November 2003
University of Exeter, November 2003
University of Manchester Institute of Science and Technology, November 2003
University of Sheffield, November 2003
Ravensbourne College of Design and Communication, December 2003
Royal Agricultural College, December 2003
University of Southampton, December 2003
St Martin's College, Lancaster, December 2003

University of Surrey, Roehampton, December 2003
University of York, December 2003
University of East Anglia, January 2004
University of Durham, February 2004
University of Liverpool, February 2004
Writtle College, February 2004
Bournemouth University, March 2004
The Institute of Cancer Research, March 2004
University of Kent, March 2004
University of Leeds, March 2004
Loughborough University, March 2004
Open University, March 2004
University of Oxford, March 2004
University of Salford, March 2004
University of Warwick, March 2004
University of Wolverhampton, March 2004
Aston University, April 2004
University of Birmingham, April 2004
University of Bristol, April 2004
University of Central Lancashire, April 2004
Coventry University, April 2004
The London Institute, April 2004
University of Portsmouth, April 2004
Anglia Polytechnic University, May 2004
University of Brighton, May 2004
Brunel University, May 2004
University of Keele, May 2004
The Nottingham Trent University, May 2004
University of Reading, May 2004
University of Sussex, May 2004
Wimbledon School of Art, May 2004
University of Greenwich, June 2004
King's College London, June 2004
University of Lancaster, June 2004
The Manchester Metropolitan University, June 2004

Appendix 2 - Reports on specialist institutions

The Royal Veterinary College, February 2003
Cumbria Institute of the Arts, March 2003
Institute of Education, University of London, March 2003
London School of Hygiene and Tropical Medicine, March 2003
Royal Academy of Music, March 2003
Royal College of Art, March 2003
School of Oriental and African Studies, University of London, April 2003
London Business School, May 2003
Newman College of Higher Education, May 2003
Norwich School of Art and Design, May 2003
Rose Bruford College, May 2003
Royal College of Music, May 2003
Royal Northern College of Music, May 2003
The School of Pharmacy, University of London, May 2003
The Surrey Institute of Art & Design, University College, May 2003
Trinity and All Saints College, May 2003
Trinity College of Music, May 2003
Royal College of Nursing Institute, July 2003
Ravensbourne College of Design and Communication, December 2003
Royal Agricultural College, December 2003
Writtle College, February 2004
The Institute of Cancer Research, March 2004
The London Institute, April 2004
Wimbledon School of Art, May 2004

Appendix 3 - Projected titles of *Outcomes...* papers

In most cases, *Outcomes...* papers will be no longer than 15 sides of A4. QAA retains copyright in the *Outcomes...* papers, but as noted earlier, they may be freely used, with acknowledgement.

Projected titles of *Outcomes...* papers in the first series are listed below.

Title	Publishing date (provisional)
Overview	April 2005
Programme specifications	April 2005
External examiners and their reports	April 2005
Staff support and development arrangements	October 2005
Student representation and feedback	November 2005
Programme monitoring arrangements	January 2006
Assessment of students	January 2006
Learning support resources (including virtual learning environments)	January 2006
Validation, approval and periodic review	January 2006
Academic advice, guidance and supervision	March 2006
Progression and completion statistics	March 2006
Subject benchmark statements	March 2006
The framework for higher education qualifications in England, Wales and Northern Ireland	March 2006
Institutions' frameworks for managing quality and standards	March 2006
Collaborative provision	March 2006
International students and their support	March 2006

Appendix 4 - Methodology

The methodology followed in analysing the institutional audit reports uses the headings set out in 'Annex H' of the *Handbook for institutional audit: England* to subdivide the Summary, Main report and Findings sections of the institutional audit reports into broad areas. An example from the Main report is 'The institution's framework for managing quality and standards, including collaborative provision'.

For each published report, the text was taken from the documents published on QAA's website and converted to plain text format. The resulting files were checked for accuracy and coded into sections following the template used to construct the institutional audit reports. In addition, the text of each report was tagged with information providing the date the report was published and some basic characteristics of the institution (base data). The reports were then introduced into a qualitative research software package, QSR N6®. The software provides a wide range of tools to support indexing and searching and allows features of interest to be coded for further investigation.

An audit team's judgements, its identification of features of good practice, and its recommendations appear at two points in an institutional audit report: the Summary and at the end of the Findings; it is only in the latter, however, that cross references to the paragraphs in the Main report are to be found, and it is here that the grounds for identifying a feature of good practice, offering a recommendation and making a judgement are set out. These cross references have been used to locate features of good practice and recommendations to the particular sections of the report to which they refer.

Individual papers in the *Outcomes...* series are compiled by QAA staff and experienced institutional auditors. To assist in compiling the papers, reports produced by QSR N6® have been made available to provide a broad picture of the overall distribution of features of good practice and recommendations in particular areas, as seen by the audit teams.

Quality Assurance Agency for Higher Education

Southgate House
Southgate Street
Gloucester
GL1 1UB

Tel 01452 557000
Fax 01452 557070
Email comms@qaa.ac.uk
www.qaa.ac.uk

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