

University of Wolverhampton

MARCH 2006

© The Quality Assurance Agency for Higher Education 2006

ISBN 1 84482 562 0

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

Printed copies are available from:

Linney Direct
Adamsway
Mansfield
NG18 4FN

Tel 01623 450788

Fax 01623 450629

Email qaa@linneydirect.com

Registered charity number 1062746

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. For institutions that have large and complex provision offered through partnerships, QAA conducts collaborative provision audits in addition to institutional audits.

The purpose of collaborative provision audit

Collaborative provision audit shares the aims of institutional audit: 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

Collaborative provision 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 the academic standards of its awards made through collaborative arrangements
- the confidence that can reasonably be placed in the present and likely future capacity of the awarding institution to satisfy itself that the learning opportunities offered to students through its collaborative arrangements are managed effectively and meet its requirements; and
- the reliance that can reasonably be placed on the accuracy, integrity, completeness and frankness of the information that the institution publishes, (or authorises to be published) about the quality of its programmes offered through collaborative provision that lead to its awards and the standards of those 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

Collaborative provision 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 includes 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

Collaborative provision 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 collaborative provision 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 six weeks before the audit visit
- visits to up to six partner institutions by members of the audit team
- the audit visit, which lasts five days
- the publication of a report on the audit team's judgements and findings 22 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 from the institution and from partners
- talking to students from partner institutions 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 through visits to partners. 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 how institutions are working towards this requirement.

Contents

Summary	1		
Introduction	1		
Outcome of the collaborative provision audit	1		
Features of good practice	1		
Recommendations for action	1		
National reference points	2		
Main report	4		
Section 1: Introduction: the institution and its mission as it relates to collaborative provision	4		
Background information	5		
The collaborative provision audit process	6		
Developments since the institutional audit of the awarding institution	6		
Section 2: The collaborative provision audit investigations: the awarding institution's processes for quality management in collaborative provision	7		
The awarding institution's strategic approach to collaborative provision	7		
The awarding institution's framework for managing the quality of the students' experience and academic standards in collaborative provision	8		
The awarding institution's intentions for enhancing the management of its collaborative provision	10		
The awarding institution's internal approval, monitoring and review arrangements for collaborative provision leading to its awards	11		
External participation in internal review processes for collaborative provision	12		
External examiners and their reports in collaborative provision	13		
The use made of external reference points in collaborative provision	15		
		Review and accreditation by external agencies of programmes leading to the awarding institution's awards offered through collaborative provision	16
		Student representation in collaborative provision	17
		Feedback from students, graduates and employers	18
		Student admission, progression, completion and assessment information for collaborative provision	18
		Assurance of the quality of teaching staff in collaborative provision; appointment, appraisal, support and development	19
		Assurance of the quality of distributed and distance methods delivered through an arrangement with a partner	20
		Learning support resources for students in collaborative provision	21
		Academic guidance and personal support for students in collaborative provision	22
		Section 3: The collaborative provision audit investigations: published information	23
		The experience of students in collaborative provision of the published information available to them	23
		Reliability, accuracy and completeness of published information on collaborative provision leading to the awarding institution's awards	23
		Findings	25
		The effectiveness of the implementation of the awarding institution's approach to managing its collaborative provision	25
		The effectiveness of the awarding institution's procedures for assuring the quality of educational provision in its collaborative provision	25
		The effectiveness of the awarding institution's procedures for safeguarding the standards of its awards gained through collaborative provision	27

The awarding institution's use of the Academic Infrastructure in the context of its collaborative provision	28
Commentary on the institution's intentions for the enhancement of its management of quality and academic standards in its collaborative provision	28
The utility of the CPSED as an illustration of the awarding institution's capacity to reflect upon its own strengths and limitations in collaborative provision, and to act on these to enhance quality and safeguard academic standards	29
Reliability of information provided by the awarding institution on its collaborative provision	29
Features of good practice	30
Recommendations for action	30
Appendix	31
The University of Wolverhampton's response to the collaborative provision audit report	31

Summary

Introduction

A team of auditors from the Quality Assurance Agency for Higher Education (QAA) visited the University of Wolverhampton (the University) from 27 to 31 March 2006 to carry out an audit of the collaborative provision offered by the University. The purpose of the audit was to provide public information on the quality of the programmes of study offered by the University through arrangements with collaborative partners, and on the discharge of the University's responsibility as an awarding body in assuring the academic standards of its awards made through collaborative arrangements.

To arrive at its conclusions the audit team spoke to members of staff of the University, and read a wide range of documents relating to the way in which the University manages the academic aspects of its collaborative provision. As part of the audit process, the team met with three of the University's collaborative partners, where it spoke to students on the University's collaborative programmes and to members of staff of the partner institution.

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 award. It is about making sure that appropriate teaching, support, assessment and learning opportunities are provided for them.

The term 'collaborative provision' is taken to mean 'educational provision leading to an award, or to specific credit toward an award, of an awarding institution delivered and/or supported and/or assessed through an arrangement with a partner organisation' (*Code of practice for the assurance of academic quality and standards in higher education, Section 2: Collaborative provision and flexible and distributed learning (including e-learning), 2004, paragraph 13, published by QAA*).

In an audit of collaborative provision both academic standards and academic quality are reviewed.

Outcome of the collaborative provision audit

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

- broad confidence can reasonably be placed in the soundness of the University's present and likely future management of the academic standards of its awards made through collaborative arrangements
- broad confidence can reasonably be placed in the present and likely future capacity of the University to satisfy itself that the learning opportunities offered to students through its collaborative arrangements are managed effectively and meet requirements.

Features of good practice

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

- the established, strong, central strategic system for managing collaborative provision that is also sensitive to local needs
- the Annual Operating Statement and its target-setting for UK partnerships
- the role of Standing Panels, like the Overseas Standing Panel, together with their administrative instruments
- the cooperative arrangements functioning within the Associate College Network
- the staff development opportunities shared between the University and its partners
- the extension to the partners of University initiatives to enhance the student experience.

Recommendations for action

The audit team also recommends that the University should consider further action in a number of areas in order to ensure that the academic quality of programmes and the standards of the awards that it offers through

collaborative arrangements are maintained. The audit team considers it desirable that the University:

- identifies clearly in all external examiners' reports and annual monitoring reports the good practice and issues related to individual partners
- in every case considers and acts in a timely fashion on commentaries on provision made by student representatives
- establishes greater consistency of practice and information in order to promote enhancement more readily.

National reference points

To provide further evidence to support its findings the audit team also investigated the use made by the University of the Academic Infrastructure which 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 team found that the University was making effective use of the Academic Infrastructure in the context of its collaborative provision.

From 2004 audit processes have included a check on the reliability of the information sets published by institutions in the teaching quality information (TQI) format recommended in the Higher Education Funding Council for England's (HEFCE) document 03/51, *Information on quality and standards in higher education: Final guidance*. The University is meeting the requirements set out in HEFCE's document 03/51 with regard to the coverage, accuracy, reliability and frankness of information provided for its collaborative provision in this format.

Main report

Main report

1 An audit of the collaborative provision (CP) offered by the University of Wolverhampton (the University) was undertaken during the period 27 to 31 March 2006. The purpose of the audit was to provide public information on the quality of the programmes of study offered by the University through arrangements with collaborative partners, and on the discharge of the University's responsibility as an awarding body in assuring the academic standards of its awards made through collaborative arrangements.

2 CP audit supplements the institutional audit of the University's own provision. The process of collaborative provision audit has been developed by the Quality Assurance Agency for Higher Education (QAA) in partnership with higher education institutions (HEIs) in England. It provides a means for scrutinising the collaborative provision of an HEI with degree-awarding powers (awarding institution) where the collaborative provision was too large or complex to have been included in the institutional audit of the awarding institution. The term 'collaborative provision' is taken to mean 'educational provision leading to an award, or to specific credit toward an award, of an awarding institution delivered and/or supported and/or assessed through an arrangement with a partner organisation' (*Code of practice for the assurance of academic quality and standards in higher education (Code of practice), Section 2: Collaborative provision and flexible and distributed learning (including e-learning), 2004, paragraph 13, published by QAA*).

3 The CP audit checked the effectiveness of the University's procedures for establishing and maintaining the standards of academic awards through collaborative arrangements; for reviewing and enhancing the quality of the programmes of study offered through collaborative arrangements that lead to those awards; for publishing reliable information about its CP; and for the discharge of its responsibility as an awarding body. As part of

the collaborative audit process, the audit team visited three of the University's collaborative partners.

Section 1: Introduction: The institution and its mission as it relates to collaborative provision

4 The University's mission 'is to be a first class regional university dedicated to high quality provision. Our priority is to enable and encourage individuals to realise their full potential and to achieve academic excellence through a flexible, innovative and vocationally focused curriculum. The University is committed to making a major contribution to the social and economic prosperity of the West Midlands with its programmes of applied research, technology transfer and consultancy. We strongly support cultural diversity and equality of opportunity in all our activities at home and abroad'. The University regards its collaborative relationships as contributing 'to the fulfilment of the University's strategic commitment to widening participation in higher education', and its overseas relationships in particular as supporting 'the University's strategic goal of diversifying its income streams'.

5 The University traces its history to the foundation of the Working Men's College in 1835. With other institutions this grew into the Wolverhampton and Staffordshire Technical College which developed with the Wolverhampton College of Arts into Wolverhampton Polytechnic in 1969 and the University of Wolverhampton in 1992. The University has full degree awarding powers and operates modular schemes for its undergraduate and taught postgraduate provision. The University has a strong regional focus: 73 per cent of students are from the West Midlands.

6 The University offers a broad portfolio of degree programmes grouped into ten academic schools: Art and Design; Applied

Sciences; Computing and Information Technology; Education; Engineering and the Built Environment; Health; Humanities, Languages and Social Sciences; Legal Studies; Sport, Performing Arts and Leisure; and University of Wolverhampton Business School. In addition, there is a Graduate School. The University operates on three main campuses in Wolverhampton, Telford and Walsall, and on a small campus at Compton, two miles from Wolverhampton. Also, the School of Health has a nurse education centre at Burton-on-Trent.

7 In 2004-05 the University had almost 24,000 students, of whom almost 20,000 were enrolled on undergraduate programmes, and just over 10,000 studied part-time. Nearly 66 per cent of undergraduate entrants were aged over 21 years. The CP encompasses a broad range of disciplines and is delivered in conjunction with fourteen UK partners, thirteen of which are in the West Midlands, Shropshire and Staffordshire, and with six overseas partners. In 2005-06 there were 958 students studying in the UK and 391 abroad. Collaborative programmes range in level from higher national programmes to master's degrees. The collaborative provision self-evaluation document (CPSED) prepared for the audit by the University stated that the University 'remains committed to working with a relatively small group of partners in the UK and internationally ... driven by the principle of mutual benefit to the University and its partners and, above all, students'.

8 In broad terms the type of programme being pursued by CP students is as follows:

UK undergraduate	954
UK postgraduate	4
Overseas undergraduate	321
Overseas postgraduate	70
Total	1,349

9 Disaggregated by type of programme for the UK the figures are:

UK Higher National	248
UK Wolverhampton International	

Student Foundation Programme	15
UK Foundation degree	140
UK honours degree	551
UK postgraduate	4
Overseas honours degree	321
Overseas postgraduate	70

10 In its CPSED the University explained that it categorises its CP leading to an award of the University in accordance with the framework set out in its Typology of Collaborative Academic Provision (the Typology) as follows: articulation agreement; external validation; franchised programme; funding recognition agreement; joint programme; off-site delivery.

Background information

11 The published information available for this audit included the following recent documents:

- the report of the institutional audit conducted by QAA, dated March 2004
- the major review of healthcare programmes conducted by QAA, dated June 2005
- reports of QAA reviews at the subject level of programmes offered at other institutions and leading to awards of the University.

12 The University provided QAA with a series of documents and information including:

- an institutional CPSED of November 2005
- the Typology of collaborative provision
- a register of CP programmes and their student numbers
- undergraduate and postgraduate prospectuses
- access to the University intranet
- documentation relating to the partner institutions (PIs) visited by the audit team.

13 During the briefing and audit visits, the audit team was given ready access to a range of the University's internal documents. The team identified partnership arrangements that

illustrated further aspects of the University's provision, and additional documentation on these was provided for the team during the audit visit. The team was grateful for the prompt and helpful responses to its requests for information.

The collaborative provision audit process

14 Following a preliminary meeting at the University in July 2005 between a QAA officer and representatives of the University, QAA confirmed in January 2006 that three partner visits would be conducted between the briefing and audit visits. The University provided its CPSED in November 2005. The University provided QAA with briefing documentation in January 2006 for each of the selected partner institutions.

15 The students of the University were invited, through the Students' Union, to contribute to the CP audit process in a way that reflected the capacity of the Students' Union to reflect the views of students studying for the University's awards through collaborative partners. Officers of the University's Students' Union contributed to the development of the CPSED and the audit team was able to meet an officer of the Student Union, along with other students, at the briefing visit. The team is grateful to the officers and other students for their engagement with the process.

16 The audit team visited the University from 20 to 22 February 2006 for the purposes of exploring with senior members of staff of the University, senior representatives from PIs, and student representatives from the University and PIs, matters relating to the management of quality and academic standards in CP raised by the University's CPSED and other documentation, and of ensuring that the team had a clear understanding of the University's approach to collaborative arrangements. At the close of the briefing visit, a programme of meetings for the audit was agreed with the University. Additionally, it was also agreed that certain document audit trails would be followed relating to four PIs representing different types and stages of relationship.

17 During the visits to three partners, members of the audit team met senior staff, teaching staff and student representatives of the PIs. The team is grateful to the staff of the partners for their help in gaining an understanding of the University's arrangements for managing its collaborative arrangements.

18 The audit visit took place from 27 to 31 March 2006, and included further meetings with staff and students of the University. The audit team is grateful to all those staff and students, both of the University and its partners, who participated in meetings.

19 The audit team comprised Professor M Davies, Dr M Lyne, Professor D Ross and Dr C Vielba. The audit secretary was Ms C Gough. The audit was coordinated for QAA by Mr A Bradshaw, Assistant Director, Reviews Group.

Developments since the institutional audit of the awarding institution

20 The report of the 2004 institutional audit noted as features of good practice the commitment to the University's regional mission, the consistency of practice and its link to enhancement, the measures taken to improve retention, the approach to the use of technology-supported learning, and the wide range of support provided for the different communities of students. The report also identified recommendations for action. These included clarifying the procedures for validating and revalidating programmes, giving due attention to timeliness; giving consideration to the consistency and use of programme specifications; improving communication with students on standards and quality management issues; and reviewing the extent of student representation on institutional and school-level committees.

21 In response to the 2004 institutional audit, the University indicated that it was in the process of revising its programme specifications and that modified validation and revalidation procedures had been introduced. However, the University explained in its CP self-evaluation document that it did not include its

collaborative programmes in this modification because of 'the greater level of risk attached to this type of work'. The University was of the view that a streamlining of procedures might have exacerbated this risk. The audit team viewed the University's response as prudent.

22 By the beginning of the CP audit period, since 2002 there had been six completed reviews by QAA of the University's provision at partner colleges. In each case the judgement on academic standards was that of 'confidence' and the judgement on the quality of learning opportunities was at least 'approved'. The audit coincided with the final stages of lengthy deliberations on a separate external scrutiny of provision at some partners where the assessors had found confidence in the academic standards but where the judgement on the quality of learning opportunities was negative. The judgements had been delivered prior to the 2005-06 academic year and until March 2006, the month of the audit visit, the judgement on the quality of learning opportunities was contested by the University. Since the outcome of the deliberations on the contested judgement was still unknown as the audit team began its audit, the team did not read the draft report of the contested external scrutiny.

23 At the time of the collaborative audit the University was in the process of replacing the Typology which had been in place since the early 1990s. In its CPSED the University explained that the Typology 'had become unduly constricting and complex'. The University plans to implement a new and less restrictive model in 2006-07, based on the balance of delivery and the characteristics of the partner. The new model will not require programmes to be categorised as in the Typology. It is intended to be more responsive while being no less rigorous.

24 In 2004 the University established the Associate College Network (ACN) 'to allow key regional colleges to work strategically to enhance regional prosperity and to promote lifelong learning, widening participation and regeneration'. In its CPSED the University described the ACN as representing 'a mutual

commitment to partnership activity involving the development of collaborative provision, staff development, research and consultancy, and supporting the progression of learners in the region through appropriate pathways in and through further and higher education'. The ways in which the University had developed its collaborative provision since the institutional audit were viewed by the audit team as appropriate.

Section 2: The collaborative audit investigations: the awarding institution's processes for quality management in collaborative provision

The awarding institution's strategic approach to collaborative provision

25 The CPSED stated that, 'The University manages its collaborative provision in accordance with the framework and processes that it applies to assuring the academic standards of awards, the quality of programmes and learner support of University-based awards'.

26 The approach adopted by the University to managing quality and standards is one of 'strong central direction and managed devolution of powers and responsibilities to operational units'. The central direction is committee-led and supported by a strong central quality unit and a clearly defined hierarchy of roles and procedures for the management of quality and standards. Devolution allows processes and procedures to be adapted to school-level requirements reflecting local organisation and the demands of different subject areas.

27 Systems for managing quality and standards are also adapted to reflect the requirements of different types of partnership arrangements. For example, the validation of UK and overseas collaborative provision is handled by different bodies, reflecting the different levels of risk involved. The University also gives partners involved in recognition

agreements greater freedom over annual monitoring processes in order to reduce the burden on the PI.

28 The variation of procedure contingent upon this approach adds complexity, particularly where partnerships involve different schools. The audit team noted that such complexity is managed effectively and that steps were being taken to reduce unnecessary variation, for example by working with schools and partners to create a common annual monitoring form.

29 The precise nature of the processes and procedures for quality management adopted for collaborative awards was previously determined by the Typology. The Typology recognised six types of collaborative programme: articulation agreements; external validation of programmes developed and taught by other institutions; franchised programmes; funding recognition agreements; joint programmes and off-site delivery. Off-site provision is all located overseas. The largest numbers of students and collaborative programmes fall under the category of joint provision. Only two programmes, one of which is dormant, are externally validated.

30 The Typology lays down for each type of collaboration the ownership of the programme; student and staff status; the division of responsibility for admissions, enrolment, assessment, certification, monitoring, management, appeals and complaints, and student support. For example, in externally validated and funding recognition provision, student feedback is collected using the partner's procedures as approved by the University. Off-site provision collects feedback using University processes. A mixture of University and partner processes applies in franchised and joint programmes. The University does not make any stipulation on student feedback for articulation agreements beyond forming a general view of the programme's appropriateness at validation. Expectations and responsibilities are incorporated in the Memoranda of Co-operation (MOC) signed between the University and its collaborative partners.

31 As the new flexible framework for CP is implemented, the above distinctions will disappear and be replaced by procedures determined by relative contributions of the University and the partner.

The awarding institution's framework for managing the quality of the students' experience and academic standards in collaborative provision

32 In its CPSED the University identified the key elements of its institutional management frameworks that also provide a framework for the management of CP. These include the framework for academic standards, quality assurance procedures, quality enhancement processes, mechanisms for student learning support and guidance, and systems of governance and management. The University complements these frameworks with other bodies and procedures designed specifically to support collaborative and distance-learning provision.

33 Each collaborative programme is the subject of an MOC which specifies the respective roles of the University and its partners. The MOCs currently reflect the Typology, but in future will express the new framework for CP. In addition, Annual Operating Statements (AOS) are agreed which, among other matters, cover student numbers and fees. The AOS operates effectively to frame and guide the collaborative relationship for that year. The format of the overseas MOC is currently being revised. A revised MOC for UK provision is already in use.

34 The policies and procedures relevant to the management of CP are documented in handbooks and guidelines which are published both as hardcopy and on the Quality Assurance and Standards Department (QASD) web pages. The key regulations and guidance for CP are brought together in the Collaborative Provision Handbook. The Validation Handbook has a dedicated section on validation in CP. All documents are freely available to PIs.

35 The executive and committee structures responsible for the management of quality and standards of the University's central provision are also central to the management of CP. At the highest level is the Executive which plays a key role in collaborative strategy and the choice of new partners. The Executive interacts regularly with the Head of Schools and Colleges Liaison (HSCL) and the Head of the International Office (HIO) who have, respectively, responsibilities for UK and overseas CP. At school level, deans are responsible for both the university-based and the collaborative provision within their subject areas.

36 The University Quality Committee (UQC) has responsibility for quality and standards in both university-based and collaborative provision, the latter being a standing item on all agendas. Standing panels which have the status of subcommittees reporting to UQC are responsible for the validation and re-validation of CP. For UK CP scrutiny is exercised by the relevant school-focused standing panel; for overseas CP there is a dedicated overseas collaborative standing panel. At school level the School Quality Committee (SQC) is responsible for quality and standards pertaining to the provision, both university-based and collaborative, within its subject areas.

37 Named individuals within schools and PIs play a key role in ensuring that CP is managed effectively and efficiently. These individuals have the generic title of University School Collaborative Programme Managers (USCPM). Collaborative partners are required to make a similar appointment known generically as a Partner Collaborative Programme Manager (PCPM). The University School Collaborative Coordinators Group (USCCG) brings together school staff with responsibilities for CP in order to exchange ideas, receive central policies and guidance, and to channel local issues to higher levels. In addition, the University appoints link managers for overseas provision and some UK provision that involves more than one school.

38 PIs are involved in the management of quality and standards through representation on the University's committees and through dedicated bodies. The key dedicated structure

is the ACN which currently has seven partner members. It aims to promote regional educational, social and economic prosperity through collaborative provision, staff development, research and consultancy. The ACN board meets at the level of heads of institutions and has developed an action plan to guide activities including capital investment by the University in partner colleges. ACN members sit on the University's Academic Board and key University committees, and senior University staff sit on partners' Boards of Governors and committees. The ACN's Curriculum and Staff Development Sub-Group (CSDSG) plays an important role in the dissemination of good practice.

39 Most SQCs have representatives from PIs; those without direct representation involve partners in discussions or have set up sub-groups such as the Foundation Degree Steering Group (FDSG) in the School of Humanities, Language and Social Sciences (SHLSS).

40 Forums have been established to bring together those involved in CP from within the University and PIs. The Collaborative Quality Forum (CQF) brings together those responsible for quality and standards in order to increase understanding of each others' environment and working practices. Minutes are sent to overseas partners who cannot attend. A Foundation Degree Network (FDN) has been established to facilitate the dissemination of good practice within colleges delivering Foundation degrees validated by the University. Recently, an administrators' network has been established.

41 The University maintains oversight of assessment within PIs through the use of university regulations, processes and roles such as assessment boards and external examiners for CP. University staff are involved in the internal moderation of assessment in CP. Recognition agreements involving Edexcel follow a variation on this system.

42 The institutional audit found that the University had a system for managing quality and standards that was comprehensive and

generally effective. The institutional audit report noted that, 'in developing its framework it was clear that the University had reflected extensively on the introduction of the academic infrastructure'. It found that the UQC was 'amply discharging its delegated responsibilities and Academic Board was afforded a secure overview of the quality and standards of the University's academic programmes'. The CP audit team endorsed these views in relation to the management of the University's CP.

The awarding institution's intentions for enhancing the management of its collaborative provision

43 In its CPSED the University explained that it was currently re-assessing its policies and systems for its CP owing, in part, to the publication by QAA of the revised *Code of practice Section 2: Collaborative provision and flexible and distributed learning (including e-learning)* and to 'the increasing application of the notion of risk management to partnerships'. The University intends to implement a two-phase system, initially building on current practices but without the Typology. Phase one will involve, for example, the strengthening of central university support for CP by more frequent meetings of the University's School Collaborative Coordinators Group, producing a clearly defined and uniform role for school CP coordinators, involving staff at partner colleges in peer review through representation on University validation and review bodies, and exploring ways outside those of formal committees in which the views of students in CP can be used to enhance quality. Changes in phase two will be recommended following evaluation by a CP task group. During their visit the audit team found evidence that the University was engaged, to a greater or lesser extent, in all the areas that it had identified in the CPSED for enhancement of its CP. The team considered that the procedural improvements were enhancing the capacity of the University for effective management of its CP.

44 The audit team acknowledged the ACN as a new driver for quality enhancement at PIs. The team viewed the ACN as acting already to enhance the relationship between member institutions and, ultimately, the student experience by opening dialogues on a number of issues including staff development and careers advice.

45 The University provides a variety of formal and informal enhancement opportunities for its partners. Enhancement through the development of staff and through access to the University's staff development programmes is embedded at partner colleges, particularly in those that have membership of the ACN. However, although the University identified other means of enhancement through its Learning and Teaching Strategy 2002-05 and its extension to 2006, there was some lack of knowledge among staff of these other means at the University and at partner colleges. Further, the variability of quality practices adopted by schools was not conducive to an embedding of enhancement practices. For example, in annual monitoring report guidelines some schools specifically asked authors for innovations related to practice, while others did not. In brief, some schools missed opportunities for recording potentially important changes. The audit team viewed this as limiting enhancement that might arise through the identification and dissemination of good practice.

46 In general, a coordination of activities to meet the goals identified in the University's Learning and Teaching Strategy was not evident from meetings between the audit team and University staff or partner college staff. The audit team concluded that the University's intentions for the enhancement of quality in its CP are generally appropriate within its mission. The University will, however, want to ensure that information promoting enhancement is shared by its staff among partner colleges.

The awarding institution's internal approval, monitoring and review arrangements for collaborative provision leading to its awards

47 In recognition of the greater risks attached to CP, additional safeguards have been added to the standard processes of validation and review. Collaborative approval and periodic review are retained at university level and cannot be delegated to school level. Validation of CP involves the completion of additional documentation and checks. Site visits are part of both the approval and periodic review of CP.

Approval

48 New partners are agreed by the Executive on the advice of the Regional Strategy Group (RSG) or the International Strategy Planning group (ISPG) after appropriate enquiries and due diligence. The University has a checklist against which prospective partners are evaluated. Disengagement from a PI is also decided by the Executive. Once disengagement has been agreed deletion plans are required to be prepared and agreed by ADP. The detailed management of disengagement varies according to the collaborative arrangements but is normally the responsibility of the relevant school and CP manager. The audit team observed that in the past formal disengagement strategies and plans had not always been developed in a timely way, but that steps had been taken to remedy this in more recent disengagements.

49 Planning approval is required before new programmes can be validated, and is granted by the University's Academic Development Panel (ADP). This stage involves the submission of an academic development proposal which sets out the rationale and delivery arrangements for the proposed programme. Once planning approval is given, schools, together with relevant partners, prepare validation proposals for approval by the School Quality Committee (SQC) using the standard university template. In addition, documentation is required which covers the partner's capacity in staffing, physical resources and systems to

deliver the proposed programme. Together with an MOC, this documentation is sent to the appropriate Standing Committee which organises a validation event involving external advisors and a site visit.

50 The validation of CP involves judgements on a prospective PI's resources as well as the academic and educational merits of the proposed programme. In order to facilitate such judgements, members of the University's learning resources and student support departments are members of validation panels.

51 Once approval has been obtained an Academic Approval Record (AAR) is created. This record includes minutes of the validation process and is sent to the University Quality Committee (UQC). The MOC is signed by the heads of the relevant institutions.

52 Where the collaborative arrangements involve progression rather than CP, different arrangements apply. Partner approval is similar; the relationship is then formalised through a Memorandum of Understanding developed at school level in the case of UK partners, or through the Overseas Standing Panel in the case of provision abroad. Overseas provision approved in this way is subject to a MOC rather than a Memorandum of Understanding.

Monitoring

53 Annual monitoring reports are the cornerstone of the system of regular review of quality and standards in university-based and collaborative provision. The review method employed in both types of provision is the same. Reports are prepared by programme managers from PIs using the template adopted by the parent school within the University. The reports include, as appendices, documents such as external examiners' reports. The only exception is for recognition agreements where annual reports are written using the partner's own style.

54 The annual monitoring process is a dynamic one which takes much of the following year to complete. Throughout the process actions are being taken in response to issues that have been identified. Feedback on

the process is provided to partners by schools. However, the audit team noted that not all staff in PIs were fully aware of the outcomes of the monitoring process.

55 The audit team noted that the reporting patterns in some areas made it difficult to identify the comments on specific units of CP. Some external examiners' reports and annual monitoring reports cover multiple programmes and both University and partner-based provision, and provide little comment on specific programmes or collaborative arrangements. The team concluded that the degree of aggregation of comment that was employed in some areas made it difficult to monitor effectively the quality and standards of CP.

56 Annual monitoring reports from CP are monitored by the relevant SQC, and commented on through a section of the school's Annual Monitoring Report which is presented to the UQC. In addition, all collaborative annual monitoring reports are read by either the HSCL or the HIO. The UQC has audited the system twice over recent years and found it to be effective.

57 However, the CPSED noted that the quality of some partners' reports has been poor: some lack analysis or use of an evidence base. The CPSED also provided details of initiatives taken by schools to improve the quality of reports. As a result of an initiative by the Collaborative Quality Forum (CQF), work is being undertaken to develop a common annual monitoring template to alleviate the problems encountered by partners which work with more than one school within the University.

Review

58 In line with university-based provision, collaborative arrangements are reviewed on a six-year cycle. A new three-year mid-term review is currently being introduced for overseas CP; the format that this would take had not been finalised at the time of the audit. Revalidation involves processes similar to those employed in validation, although the basis of the documentation is a self-evaluation rather than a proposal.

59 The institutional audit noted that the processes for validation and revalidation were at times unduly lengthy and burdensome. Changes have since been made in the processes used for university-based provision in order to make them less onerous. These changes do not apply to CP. However, in the area of CP, the University has instituted other changes for instance the Framework for Collaborative Provision to replace the Typology.

60 The audit team concluded that, overall, the University operated thorough and robust validation, monitoring and programme review procedures while looking for ways in which to improve its processes.

External participation in internal review processes for collaborative provision

61 The CPSED stated that, with respect to external input, programme approval and review for CP followed the same procedures as for university-based provision.

62 One or more external advisors are appointed to standing panels for significant reviews and validations. Standing panels request nominations from schools and partners for the appointment of an external advisor. The appointment is confirmed by the chair of the standing panel. The criteria for appointment include subject expertise and an understanding of CP. The profile of the external appointee also depends on the nature and scale of the provision. External advisors may have either an academic or a professional background, and often provide a depth of specialist subject expertise not otherwise available.

63 External advisors are involved in panel meetings held at the University and in PIs. They also provide a written report as part of the validation and review process. The CPSED referred to the 'helpful contributions' and 'supportive and constructive observations' of external advisors. The audit team saw evidence of examples of the role played by external advisors in the evaluation of proposed and continuing provision.

64 The audit team was able to confirm that the University makes regular and effective use of external advisors in the validation and review of its provision through external partnerships.

External examiners and their reports in collaborative provision

65 For CP which is not covered by specific recognition agreements (i.e. those with Edexcel) similar procedures exist for the external examiner process as those used for other provision of the University. The same external examiner is used for both collaborative and non-collaborative provision.

66 Responsibility for overseeing the University's external examiner system is vested in the University Quality Committee External Examining Subcommittee (EESC), which is supported by the University Quality and Academic Standards Division (QASD) in this task. Details of the University's policies and procedures for external examining, the operation of assessment boards and the regulatory framework are contained in the External Examiner Handbook (EEH) which is updated annually by QASD.

67 The duties of external examiners, contained in the EEH, include confirming the appropriateness of the assessment and examination tasks, making suggestions for minor modifications to programmes, and providing advice at the time of review and revalidation.

68 The handbook contains clear criteria for the appointment of external examiners and is informed by the *Code of practice*, published by QAA. The PIs have a consistent understanding of the role of external examiners and are involved in their nomination and appointment. Partner involvement at an early stage of recruitment and selection allows any specific requirements for the nominee to be discussed and the partner's expertise to inform the nomination.

69 The audit team noted the very careful scrutiny of external examiner nominations by both SQCs and EESC. In some cases, this

scrutiny resulted in requests for more information and on at least one occasion rejection of nominations. However, some evidence was found of external examiner appointments being made very late during the first session of their involvement. The team was satisfied that such cases were isolated, arose due to unforeseen problems and were dealt with adequately through chair's action by the relevant EESC meeting.

70 Minimum requirements for external examiners involved in CP are clearly discussed with both external examiners and PI staff. The University SQC regularly discusses the engagement of external examiners with PIs.

71 The EESC organises biannual induction events for new external examiners. The events include inputs from both central university and school-level staff. External examiners associated with overseas CP are included as an integral part of the central induction process. Take-up of external examiner induction is satisfactory and there is supplementary induction available more informally according to individual programme needs.

72 At the central induction the external examiners' attention is drawn to the expectation that they will visit PIs. The audit team was informed that all external examiners visit all the PIs at least once during their tenure. Monitoring of visits to partners by external examiners rests with SQC, with further monitoring by UQC.

73 A checklist for external examiners' comments on visits to partners has been developed by the EESC on behalf of UQC and distributed to schools for discussion at programme level with PI staff. There is evidence that this checklist is disseminated to school staff through the SQC, and is in operation.

74 External examiner interaction with the University's and PI staff is effective and, where problems arise, there is good monitoring by SQC. Meetings between university staff and external examiners with students in PIs inform curriculum, delivery and management changes.

75 At subject level, moderation samples include student work from collaborative programmes as part of the normal student work sampling arrangements. Sampling follows the guidelines published in the EEH. Subject external examiners confirm module grades through their membership of the Subject Assessment Board, though it is not always clear that students in PIs are clearly delineated as such in this process. Award Board external examiners review profiles of progressing and completing CP students. The sampling procedure for student work scrutiny by external examiners works effectively for CP.

76 The audit team noted that some students whom they met were not aware of any contact with an external examiner at their college. Staff affirmed to the team that this is because some students are not always aware of the institutional role of persons visiting them.

77 Existing systems for evaluating and responding to external examiners' reports are extended to collaborative programmes. The audit team saw evidence that this process is effective. For CP other than recognition agreements or where the collaborative link is confined to one programme, external examiners' reports integrate both non-collaborative and collaborative provision in a single report. Where the collaborative link is confined to one programme, external examiners' reports integrate both non-collaborative and collaborative provision together in a well-balanced way. However, there is evidence that where PI involvement is part of a large and complex programme, there are occasions when specific external examiner comments regarding the PI links are limited, even within the specific section provided on the template. In such situations, in responses to reports and in SQC minutes there is evidence of further comment being requested by the University. Despite this, there is a university policy whereby, when external examiners do not comment on CP, further information is requested. It would be desirable for the University to pursue its policy more consistently.

78 The audit team saw evidence that curriculum and assessment design is influenced by external examiners' comments. The template for such reports also invites external examiners to comment on aspects of the assessment process. Examples of good practice and school-specific issues are regularly identified in summaries of external examiners' reports and discussed at SQC and UQC.

79 External examiners' reports are received initially by QASD and scrutinised by an early reading group of UQC members to ensure prompt identification of and response to issues of concern raised by external examiners. Consideration of external examiners' reports is incorporated into schools' annual monitoring procedures.

80 The reports are discussed and disseminated within PIs, and the process of responding to these is a joint one, with ultimate responsibility residing with the University. Link tutors within the University have responsibility for analysing and preparing initial responses to external examiners' reports in conjunction with PI staff. Where programmes (e.g. Edexcel) are mainly managed by the PI, collaborating partner staff effectively enjoy delegated responsibility in analysing and responding to external examiners' reports and in using these in writing parts of the Award Monitoring Report (AMR). The audit team found evidence that PI staff are informed and involved in responses to external examiners' reports.

81 Summaries of external examiners' reports appear as regular items on agendas of SQC and UQC meetings, and comments from PIs are included in these. Feedback from the University to PIs on external examiners' comments in annual reports is variable in its level of detail, but is generally effective.

82 The audit team concluded that practice within CP with respect to external examiner matters is effective and appropriate. The use of external examiners in summative assessment is strong and scrupulous. The overall process of external examining in CP is sufficient to assure standards and quality.

The use made of external reference points in collaborative provision

83 The University's stated purpose in utilising the Academic Infrastructure is to make use of external reference points at all levels and in a variety of ways in order to evaluate programmes and to identify opportunities for improvement in content, delivery and institutional practice.

84 The University's overall approach to ensuring that the Academic Infrastructure is an integral part of its processes is to embody the infrastructure in those procedures. All relevant aspects of the Infrastructure including the *Code of practice (Code of practice)*, *The framework for higher education qualifications in England, Wales and Northern Ireland (FHEQ)*, Subject benchmark statements and programme specifications are covered in this process.

85 The audit team found that the University had approached its consideration of the Code in a systematic way by establishing a Code of Practice Evaluation Sub-group through the University Quality Committee (UQC) which worked with staff in order to evaluate the extent to which the University's policies and procedures met the expectations set out in the Code's precepts and in order to identify responsibilities and timescales for taking action to improve practice.

86 Evaluation reports for each section of the Code were then considered by UQC and reported to the Academic Board. Following these actions within the University, dissemination within PIs was initiated by SQC. The audit team noted that specific sections of the Code had been effectively incorporated into the University's policies, for example Section 4 on External Examining and Section 2 on Collaborative Provision.

87 There is evidence of good cooperation between the University and PIs in responding to issues emerging from use of the Academic Infrastructure. The overall process of staff development for PIs in the general area of raising awareness of the Academic Infrastructure, is effective and monitored by the SQC.

88 A variety of activities is utilised for this raising of awareness. Activities include 'roadshows', the 'Pathways' programme, discussions at the Collaborative Quality Forum (CQF) and within the CAN, and events organised by the Centre of Excellence in Learning and Teaching (CELT). Partner staff are invited to these events and regularly take part within the constraints of heavy teaching loads. Sections of the Code are also regularly used by University staff, with the support of CELT, to develop good practice in curriculum design and assessment policies in PIs. Partner staff are directed by University staff to sections of the Academic Infrastructure such as the *Code of practice* as they appear on the internet.

89 Additionally, raising awareness of the Academic Infrastructure amongst PIs is demonstrated in the University's use of the extended programme validation and revalidation process. During validation, the Pathway and Module Specification Templates require proposing teams to identify the subject benchmark statements, sections of the Code, aspects of the FHEQ, and any other external reference points that have been used in the preparation of the proposal.

90 An important feature of initiative in interaction with PIs is the way in which the University, through CELT and programme managers, visits the PIs rather than waiting for partner staff to attend University events.

91 The audit team found a further example of effective collaborative use of the Academic Infrastructure in discussions of University quality policy statements held between University and collaborating partner college staff. In this case, the outcome of discussions was a set of action steps which were disseminated to PIs directly and through the SQC system.

92 There is also evidence of the University's receipt from its PIs of advice on other external frameworks such as the requirements of Professional, Statutory and Regulatory Bodies (PSRBs). Such advice is taken into account in curriculum development. The University makes use of a range of additional external reference

points in its management of quality and standards for its CP programmes. For example, the University's Key Skills and Progress Files initiatives have drawn on the Qualification and Curriculum Authority's key skills specification and the *Guidelines for Higher Education Progress Files* published by QAA. Such use of external reference points has been especially important in the development of Foundation Degree (FD) programmes with PIs.

93 The audit team concluded that there is good engagement between the University and PIs with respect to responding to issues in the Academic Infrastructure, and that the University uses a variety of activities to raise awareness of the Academic Infrastructure amongst its PIs. In addition, the University makes good use of external reference points in its management and enhancement of quality and standards, and makes effective use of these in its dealings with PIs.

Review and accreditation by external agencies of programmes leading to the awarding institution's awards offered through collaborative provision

94 The University uses external reports and advice to inform and calibrate its programmes and processes. These reference points include institutional audit and subject-level reports of QAA, reports from PSRB, Ofsted and the Lifelong Learning Sector Skills Council (LLSSC).

95 At the time of the audit, since 2000, three subject areas involving a collaborative link had undergone QAA subject reviews. All of these reviews had satisfactory outcomes, and their reports were very positive throughout, with several areas of innovative or good practice being noted. Review teams concluded that the relationship with partner colleges was working effectively for the benefit of students and that the quality assurance processes and procedures were embedded in the school systems within the University. There were no obvious discernible trends in these reports, but areas attracting positive mention included student support and guidance, learning resources,

student progression and achievement, and quality management and enhancement.

96 The audit team found that the University's response to these reports had been consistently thorough. Schools, in conjunction with input from their collaborative partner, have been required to prepare a response through their School Quality Committee (SQC) and to submit this to the University Quality Committee (UQC).

97 These responses identify both positive and critical comments together with an action plan, the progress of which is checked through annual monitoring by SQC and UQC. The responses, along with QAA's report, are forwarded to the University's Academic Board, and a summary sent to the University's Board of Governors and the PIs. The audit team noted that dissemination and further discussion of the outcomes of these reviews take place regularly and have involved PIs.

98 The subject review reports also recognised the way in which the University integrates the process of QAA review with the accreditation processes of other professional bodies relevant to collaborative programmes such as the Chartered Institute of Building (CIOB) and the LLSSC has been recognised in these reports. There is evidence that the outcomes from QAA and PSRB reviews are used to inform developments in collaborative partner links across the University.

99 There is also evidence of close cooperation between the University, its partner colleges and external bodies when curricula are developed. Cognisance is taken of changes in professional regulations and procedures, for example.

100 The audit team found that consideration of reports from PSRBs is a school responsibility and that it regularly involves consultation and discussion with PIs. The team also found that the relevant SQC oversees the implementation of action plans originating from such reviews and reports to UQC as appropriate. The team found evidence that the University regularly consults records of Ofsted inspections of PIs with a view to using these records to inform the process of overall validation and revalidation of programmes.

101 The situation with respect to development of intermediate-level programmes with some PIs has resulted in some less positive outcomes. In the case of one such programme, external scrutineers had reported unfavourably on the quality of learning opportunities provided for students, with particular concerns in areas such as employer links, effective communication with students, and staff research and development. The audit team was assured by the University and the relevant PIs that they were all now working towards resolution of issues in these areas.

102 The audit team concluded that the University maintains a good overview of all external agency reviews and reports, and that it interacts appropriately with PIs on these. Mechanisms exist for considering and acting on the outcomes of external reviews and inspections of CP, and the University uses this evidence in the management and enhancement of quality and standards of such provision.

Student representation in collaborative provision

103 The University requires validation panels to confirm that the management structures of collaborative programmes include arrangements for student participation. Usually such arrangements take the form of student-staff liaison (SSL) meetings attended by student representatives. SSLs are normally managed by members of the PI, but, in some cases, staff of the University are prominent in managing them. In the case of overseas provision the direct involvement of university staff is routine and the establishment of an annual cycle of SSL meetings is a requirement of the Overseas Standing Panel. Frequently, the relatively small student groups taking a programme allow regular, daily communication between students and staff. The University expressed in its CPSED the view that informal feedback mechanisms were frequently the most effective in ensuring a response to student concerns in a timely and efficacious way.

104 In order to ensure the effectiveness of arrangements for student representation, the

Academic Approval Record (AAR) form has a section which refers to student feedback in 'curriculum development and quality enhancement'. In some examples of AARs scrutinised by the audit team this section contained some detail whilst in others no close description or analysis were present. Students, however, confirmed that they have formal opportunities for giving feedback, even in cases where this may have not been entirely apparent in the AAR documentation. Students also confirmed that the regular opportunities for informal communication were also an effective mechanism for having issues addressed. Students are represented at meetings which form part of the validation of progression courses and the periodic review of programmes.

105 The institutional audit report of March 2004 refers to the Student Voice Project (SVP) managed by the student union (SU). The SVP has led to the production of a Student Voice leaflet and a handbook for SVP representatives. The University has recognised the value of this project and is in discussion with partners in order to identify how partners and University might benefit from the initiative, for instance how a revision of the student representatives' handbook could incorporate the needs of CP students.

106 Additional opportunities for student representation occur when university staff and external examiners visit PIs and meet students. The audit team saw examples where the outcomes of these meetings had formed the basis for improvements to curriculum content or course management.

107 The audit team concluded that formal arrangements for student representation in CP were in place at course level and that students were aware of the mechanisms by which they could make their views known. The team also recognised the value of the regular opportunities for informal communication with students, and the consequent emphasis placed by the University upon the effectiveness of this.

Feedback from students, graduates and employers

108 Formal feedback from students is received at regular, scheduled meetings and through Module Evaluation Questionnaires (MEQs). The information gathered in these ways is analysed and incorporated into an AMR which identifies responses to key issues. In some schools the information gathered from the students in PIs forms part of an AMR dealing with one course alone, whilst in other cases student feedback is subsumed within a wider range of courses being monitored by that school. In the latter case some specificity of information is lost.

109 Formal feedback is supplemented in many cases by direct informal feedback from students. It is the University's view that this is frequently the most effective means of identifying students concerns and responding to them in a timely way. In some PIs, students find it more convenient to communicate with the University through their own college staff, whilst others students are able to feedback directly to the link tutor at the University. Students met by the audit team confirmed that they were satisfied with the variety of mechanisms by which they were able to provide feedback.

110 The audit team was able to see a range of examples recorded in AMRs where the University had responded to feedback from students in an appropriate manner regarding issues important to students. These issues included the provision of resources, curriculum content and student support. However, in one programme, in the minutes of staff-student liaison meetings, the team saw evidence of issues of communication and feedback which had been raised by students in a number of consecutive meetings but which had not been fully resolved. In the light of the incomplete resolution of difficulties over a series of meetings, the team concluded that it would be desirable for the University to consider and act in every case in a timely fashion on commentaries on provision made by student representatives.

111 In many cases validation activities benefit from the involvement of external panel members with industrial experience and from the input of former students. However, in its CPSED, the University acknowledged that it has not been systematic in its collection and evaluation of feedback from its CP graduates and employers. Graduate and employer feedback was an issue identified in the University's institutional audit of 2004. The University has now begun to explore ways of obtaining more systematic feedback from employers through the Collaborative Quality Forum (CQF). The work of the CQF places particular emphasis on the contribution that Lifelong Learning Networks (LLNs), Sector Skills Councils (SSCs) and Foundation Degree Forward (FDF) can make in this regard. In particular, the development of Foundation Degrees has already called for a greater level of employer engagement. Such engagement has built upon the existing experience of CP partners in their close cooperation with employers in vocationally focused courses.

112 The audit team was satisfied that the University has ensured that good formal mechanisms for receiving student feedback in CP are in place. The team noted that the activities of the CQF in identifying more systematic ways of gathering employer feedback were building effectively upon the experiences of the PIs. The team was also satisfied that, in response to the University's own analysis expressed in the CPSED, this activity was laying the foundation for using more structured employer feedback to enhance the quality of CP.

Student admission, progression, completion and assessment information for collaborative provision

113 Statistical data on areas such as admissions, progression, completion and assessment are produced by the University or the PI depending on the type of programme. The data are compiled by school administrators of the University, the University's Registry or equivalent staff in the PI.

114 The accuracy of such data is thoroughly checked by an iterative process involving both the University and the partner. Once the accuracy of such data has been established, duplicate records are maintained by both the University and the PI.

115 The audit team found that assessment data for all students on CP programmes were produced in the same way as for university-based students. All grades are entered on the central university student information system, usually by the University's staff. The University is currently working on pilot projects for PIs to input student data directly into the central university system, and intends to extend this practice to all partners.

116 The audit team found evidence that partner college staff attend the University's exam boards. There was also evidence that efficient internal moderation procedures are in place. These procedures involve staff from PIs, and this inclusion further promotes the accuracy of assessment data.

117 The statistical data produced are used by both the University and its PIs to evaluate quality and standards. The data are analysed and summarised by the programme team in conjunction with staff in the PIs, and are used to inform the annual monitoring of programmes within the University. Such data are also used in comparative analysis of university-based and CP student performance. Currently, this comparative analysis is accomplished manually and not through the central student data system. The data and the summaries are discussed at the School Quality Committee (SQC) and submitted to the University Quality Committee (UQC).

118 The audit team found that student records are maintained for programmes within any disengaging partner. Where problems in record keeping for such programmes have been encountered, the University has acted to correct problems and to put in place measures to prevent such problems recurring.

119 The audit team found that, through analysis of the data, the University is aware that

CP progression and completion rates are broadly similar to those of students on university-based programmes, though with variations between programmes. The audit team noted that the University takes an interest in the comparison of success rates, and that it is aware of the current position.

120 The audit team found that data on admissions are discussed at meetings of the ACN and are also used in discussions between the University and partners on student number target setting. The target setting takes place annually as part of University planning and forms the basis for updating of MOCs between the University and its partners.

121 The audit team concluded that the process of data management within the University and its PIs is effective, well managed, appropriately focused and that the data are used in the management of standards and quality. The accuracy of data is assured through effective internal moderation and good, intensive and regular iterative cross-checking between staff in the University and the PIs.

Assurance of the quality of teaching staff in collaborative provision; appointment, appraisal, support and development

122 The suitability of teaching staff in PIs for contributing to the University's awards is determined by scrutiny of their CVs by a Standing Panel of the School Quality Committee (SQC) as part of validation. The CVs for staff who might subsequently join the teaching team are received directly by the SQC for consideration. A specification is in place for the required content but not the format of these CVs. After some debate, and in order to take into account the varying needs of individual collaborative programmes, the University has chosen not to publish criteria against which CVs are considered. The audit team noted the dialogue between experienced PIs and the advice offered by the University's link tutors on the staffing of programmes leading to the University's awards. From the evidence provided, the team was satisfied that

the scrutiny process was effective in ensuring the suitability of staff being proposed.

123 Staff appraisal is considered by the partners and the University to be the responsibility of the PI. Via its formal validation and review processes the University restricts itself to confirming that competent staff appraisal arrangements are in place. The audit team saw evidence that student concerns regarding staff are raised and responded to through the normal student feedback arrangements.

124 The University operates a staff development scheme (Pathways) that enables the staff from PIs to enrol on the University's courses at no charge. The Pathways scheme was accessed by over 200 staff in 2004-05, and approximately 150 staff in the first half of the 2005-06 academic year. ACN staff members are also offered the opportunity to apply for up to £2000 of bursary support to enable them to develop their scholarly and research skills by undertaking a research investigation into an area of pedagogic interest. CP staff met by the audit team were enthusiastic about their opportunities for study at both undergraduate and postgraduate level, and about the potential for developing research skills offered by the University's schemes.

125 The University's commitment to the sharing of good practice and development of staff is exemplified by the range of staff development events which it has provided for its partners, in particular through the ACN. These events include activities which have been initiated centrally and those which are generated by schools in response to the specific requirements of PIs or programmes. The audit team was made aware of a wide range of activities covering pedagogic and subject-specific topics, including examples from overseas partners. A series of university 'road shows' in PIs has also provided a valuable opportunity for updating partner academic and administrative staff, and an opportunity for these staff to raise issues of concern.

126 The University has established forums to provide opportunities for staff support and development across the PIs. The Collaborative Quality Forum (CQF), which meets three times each year, has also proved to be helpful in enabling university and partner staff to explore issues of quality and standards in higher education and within the University's collaborative programmes in particular. Although overseas colleagues have not been able to participate in this group, notes of the meetings are circulated to these partners. Recent themes covered by the CQF forum have included; The 'Higher Education Student'; Quality Assuring HE in FE; Support for Students with Disabilities and Annual Monitoring Reports. The Foundation Degree Network (FDN) is a smaller forum which has focused specifically on the dissemination of good practice in the delivery of Foundation Degree awards validated by the University. Successful liaison between CP administrators has also more recently led to a proposal for the establishment of a collaborative link administrators' group intended to bring similar networking benefits to those of the CQF.

127 The University's commitment to the support and development of staff within its PIs is amply demonstrated by the quality and quantity of shared opportunities it offers. These are effectively delivered through specific initiatives such as the Pathways scheme, through structured networking opportunities such as the CQF or as a response to specific PI requirements. The audit team concluded that these activities were making a considerable contribution to the success of the University's partnerships.

Assurance of the quality of distributed and distance methods delivered through an arrangement with a partner

128 The University considers distance learning within the wider context of its development of technology-supported learning (TSL). These developments are focused on the use of their virtual learning environment (VLE), the Wolverhampton On-line Learning Framework

(WOLF). A clear distinction is made between the use of WOLF as a supplementary resource for all learning as opposed to the development of materials which replace face-to-face teaching such as full on-line distance learning programmes. All students in CP have access to the materials on WOLF and those met by the audit team confirmed its accessibility and role in supporting their learning.

129 The institutional audit of 2004 identified that the only fully distance-learning programme offered by the University was one which was delivered by a partner. The institutional audit report noted that the introduction of the University's Policy for Distance Learning had resulted in an agreement in 2003 to discontinue this partnership. The provision is being phased out over a number of years, during which time the University's normal procedures for ensuring the quality and standards of its delivery will remain in operation. The audit team was satisfied that the University has sought to ensure that all registered students (active and inactive) are aware of the process for closure and any implications that it may have for the completion of their studies.

Learning support resources for students in collaborative provision

130 The programme validations and reviews carried out by the School Standing Panels and Overseas Standing Panels (SPs) are the key procedures by which the University ensures that the learning resources in PIs are good and sufficient for students within CP. The external members and the representatives from the University's Department of Learning Resources on these SPs play an important role in this respect. As well as book and journal stocks, SPs also routinely scrutinise information and communication technology resources, learning centre services and other specialist physical resources of the PIs. The audit team saw some AARs in which resources were commended by the Standing Panel and other examples which resulted in the upgrading of resources. The team concluded that the SPs were working as effective management devices.

131 Learning resources in PIs are continually monitored through the normal systems which contribute to the production of the AMR. The audit team saw examples where this process was effective in addressing issues raised by both staff and students. University staff visiting overseas partners are also required to report on the currency of the resource provision and on how it meets the needs of the programme.

132 The University Learning Centres located on each campus are a central resource for learning support and provide a range of technology-supported learning facilities. These facilities can be accessed electronically by all UK and overseas students on collaborative programmes. Provision includes full-text databases, on-line journals, the VLE, and access to the library information and transaction management system (TALIS). The University views these resources as complementary to, rather than as a substitute for, the partner's provision. A recent allocation of capital from HEFCE via the University has enabled members of the ACN each to establish a higher education social learning space with additional computer facilities. An additional benefit of the capital investment was the close liaison that occurred between partners in the development of the facilities.

133 The close working relationship which exists between University learning resources staff and many of their counterparts at PIs has been developed through exchange visits, the involvement of staff with SPs in validation and review, and the biennial Learning Resources Collaborative Links forum. These formal and informal links are of value in ensuring the enhancement of learning resources in partners.

134 The audit team concluded that the systems for ensuring that learning resource provision in PIs is appropriate and sufficient, are effective. Those central university resources accessed by collaborative students are also a valuable complement to those provided by each partner.

Academic guidance and personal support for students in collaborative provision

135 The University's validation and review procedures require PIs to identify the systems by which academic and pastoral support will be provided. The detailed arrangements for the provision of this support vary according to the model currently in operation within the partner. The University's view of the support provided is that the form of the model is less important than the effectiveness of the system. In addition to the personal tutors and academic counsellors typically allocated to students, module leaders are also an important source of academic support. This support is particularly valuable in cases where University staff visit overseas partners to deliver university modules.

136 The SPs responsible for validation and review focus on how well the support structures have worked in general for the partner, and how appropriate they are for the programme currently under scrutiny. From the sample of evidence scrutinised, the audit team found the processes in place to be effective. In one example student feedback had identified how support could be improved and the partner and University had been responsive to the students' comments.

137 Programme-level academic and personal support is complemented by the partner's central student services. In addition, all CP students may access all University Gateway services by visit, internet, e-mail or telephone. The Gateway facility is a joint venture between the University and the Student Union. It offers services in such areas as financial matters, personal counselling, careers development, special educational needs and chaplaincy. The Gateway services are well publicised and CP students met by the audit team were aware of the services, and some had made use of them.

138 The University has recently been involved in the development of an electronic portfolio tool which includes a personal development planning facility. This project, managed by the CELT, has recently been piloted in two partner colleges where staff and students have been

trained in its use. It is anticipated that, following evaluation, the electronic portfolio tool will be extended to all partners in the year 2006-07. Based upon the comments of both staff and students, the audit team considered projects of this nature, where the experience of the University has been shared and developed with partners, to be of particular value.

139 Another project of this kind which has been established by the University, and which has subsequently been piloted in two PIs, is the Start Right project which focuses on student enrolment and induction. This extended induction programme includes an introduction to the Student Union, learning facilities, student support services and social activities, and has been useful in making students at the partners more aware of their relationship with the University and of the opportunities on offer.

140 The Student Enabling Centre is a well-established university source of advice for students with disabilities. A paper clarifying the responsibilities of the University and its partners with regard to the support of disabled students has recently been approved by the UQC. The implementation of the actions arising from this report is intended to enable the University to determine more clearly which elements of support are to be addressed locally and which centrally.

141 The University has recognised the need to provide additional careers and progression support for students in CP. To this end it has established a new post, the main focus of which is to provide an advice and guidance service on employability and career-related issues to students in the ACN.

142 The audit team concluded that the University approaches its responsibilities for ensuring the provision of academic guidance and personal support for students in CP with due diligence, and that it is proactive in making its own services available to its partners. The team considered the willingness of the University to extend to its partners initiatives designed to enhance the student experience, to be of particular value.

Section 3: The collaborative provision audit investigations: published information

The experience of students in collaborative provision of the published information available to them

143 The methods used by the University to assure the quality of information provided to students are largely the same as for those programmes provided directly by the University. The 2004 institutional audit found these methods to be effective. In its CPSED the University explained that 'the Memorandum of Co-operation stipulates that the responsible School and the University must approve all promotional material'. The audit team heard that the approval procedures differ markedly between schools, though all material must be approved by Marketing and External Relations. The team examined a sample of publicity material and student handbooks and guides, both on paper and web-based from partner colleges. The material was found to be both accurate and complete. In its CPSED, the University indicated that partners have occasionally 'advertised a programme in a newspaper without making the relationship with the University explicit'. However, the University was alert to this practice and from a scrutiny of evidence the team formed the view that the University had good oversight of the publicity materials and learning materials issued to students.

144 The audit team discussed with students at partner colleges the accuracy and utility of published and internally issued information. Students were asked about publicity information, both on paper and on the intranet, information supplied before they joined the University, and that provided as part of their courses, including information on student regulations. Students commented favourably on the reliability and accuracy of the information made available to them, both directly from the University and through the partner colleges. The students particularly

praised the information available to them through WOLF, though not all modules have a presence on WOLF. In general, the students were aware of assessment requirements, procedures for complaints, and that their awards were those of the University.

145 From documentary evidence and meetings with staff and students, the audit team concluded that the CPSED provided an accurate account of the University's approach to published and internal information available to students. The team formed the view that the information provided to students about the University and programmes of study was, in general, accurate, clear, and accessible.

Reliability, accuracy and completeness of published information on collaborative provision leading to the awarding institution's awards

146 The CPSED gave a brief account of the University's progress in meeting the national Teaching Quality Information requirements (TQI). Responsibility for the collation and submission of material for inclusion on the TQI website rests with the Registry. The audit team found the University's currently published information on its CP to be reliable and accurate, there being a concordance between external examiners' reports sampled and their summaries on the TQI website. Digests of most external examiners' reports were present on the TQI website, and the team heard that the University had plans to publish review reports. At the time of the audit visit, the University was alert to the requirements of the Higher Education Funding Council for England's document 03/51, *Information on quality and standards in higher education: Final guidance*, and was continuing its activity to fulfil its responsibilities in this respect.

Findings

Findings

147 An audit of the collaborative provision (CP) offered by the University of Wolverhampton (the University) was undertaken during the period 27 to 31 March 2006. The purpose of the audit was to provide public information on the quality of the programmes of study offered by the University through arrangements with collaborative partners, and on the discharge of the University's responsibility as an awarding body in assuring the academic standards of its awards made through collaborative arrangements. As part of the CP audit, the audit team visited three of the University's partners. This section of the report summarises the findings of the audit. It concludes by identifying features of good practice that emerged during the audit, and by making recommendations to the University for action to enhance current practice in its collaborative arrangements.

The effectiveness of the implementation of the awarding institution's approach to managing its collaborative provision

148 The University has a strong central framework for the management of its CP which, in general, repeats the systems used to manage provision based in its own campuses. Variation in procedure is permitted to reflect the characteristics of different schools and partners, thus ensuring that account is taken of differing levels of risk and the requirements of different subject areas. The University's central framework, in its extension to the management of CP, is supplemented by additional structures and processes that are specific to the management of provision delivered through partner institutions (PIs) such as Memoranda of Co-operation (MOCs), the CP handbook, collaborative networks including the Associate College Network (ACN) link tutor appointments and arrangements for the moderation of assessment. The operation of these systems is monitored through the University's general quality assurance procedures, in particular the annual monitoring cycle and periodic review. The audit team observed that where problems

arose these were generally identified in a timely way and action taken to strengthen the systems in the longer term.

149 Aspects of the framework for the management of CP are being updated to reflect internal changes in the University, the changing nature of the University's CP, and external developments within QAA's Academic Infrastructure. MOCs are translated into effective operational plans through their associated Annual Operating Statements which are negotiated agreements on student numbers, admission processes, financial arrangements and updates on contact information. The system ensures both that the MOC is supplemented by up-to-date information and that the viability of programmes is addressed annually by senior management within the school, the University and the PI.

150 The ACN provides opportunities for increased dialogue between the University and its partners and for the dissemination of good practice. It also provides a framework for the development of strategy and policy related to CP as well as joint initiatives and investment. The ACN is highly valued by member partners.

151 The audit team considered that the University had a strong and established system for managing its CP, and that the system was determined centrally and was sensitive to local needs within schools and partners.

The effectiveness of the awarding institution's procedures for assuring the quality of educational provision in its collaborative provision

152 The programme validations and reviews carried out by the school Standing Panels and overseas Standing Panels (SPs) are the key procedures by which the University ensures that teaching and learning, student progression and the learning resources in PIs are good and sufficient for students within CP. New partners are agreed by the Executive on advice. The University has a checklist against which prospective partners are evaluated. Disengagement from a PI is also decided by

the Executive. Once disengagement has been agreed, deletion plans are required and must be agreed by ADP. The audit team observed that formal disengagement strategies and plans had not always been developed in a timely way, but that steps had been taken to remedy this in more recent disengagements.

153 Planning approval is required before new programmes can be validated and is granted by the University's Academic Development Panel (ADP). This stage involves the submission of an academic development proposal which sets out the rationale and delivery arrangements for the proposed programme. Once planning approval is given, the school, together with relevant partner(s), prepares a validation submission. Documentation is required which covers partner capacity in staffing, physical resources and systems to deliver the proposed programme. The School Quality Committee (SQC) approves the submission documentation. The SP has responsibility for considering validation of the proposed collaborative programme.

154 In order to inform judgements on a prospective PI's resources as well as the academic and educational merits of the proposed programme, members of the University's learning resources and student support departments are members of validation panels. The University provides access for CP students to a wide range of additional learning resources through the University Learning Centres. However, it regards these as complementary to, rather than as a substitute for, the partner's provision.

155 Annual monitoring reports are the cornerstone of the system of regular review of quality and standards in university-based and collaborative provision. The review method employed in both types of provision is the same. Reports are prepared by programme managers from PIs using the template adopted by the parent school within the University. The audit team noted that the reporting patterns in some areas made it difficult to identify the comments on specific units of CP.

156 In line with university-based provision, collaborative arrangements are reviewed on a six-year cycle. A new three-year mid-term review is currently being introduced for overseas CP; the format that this will take has not yet been finalised. Revalidation involves processes similar to those employed in validation, although the basis of the documentation is a self-evaluation rather than a proposal.

157 The University considers that taking account of the student voice is an important part of assuring the quality of higher education. In advance of the inception of a proposed programme, the University requires validation panels to confirm that the management structures of collaborative programmes include arrangements for student participation. The effectiveness of arrangements for student representation is considered as part of periodic review. The University is currently liaising with its partners to determine how its central Student Voice Project (SVP), led by the Student Union, can be used to enhance student representation in its PIs. The audit team concluded that appropriate arrangements for student representation were in place.

158 The formal feedback from students received at regular, scheduled meetings and through Module Evaluation Questionnaires is analysed and incorporated into an Annual Monitoring Report (AMR). Students met by the audit team confirmed that they were satisfied with the variety of mechanisms by which they were able to provide feedback. The team was satisfied that the University had ensured that appropriate mechanisms exist for receiving student feedback and that issues raised by students were usually addressed effectively. In order to obtain more systematic feedback from employers than has hitherto been available, the University is considering ways in which, in conjunction with its partners, it can make use of the opportunities offered by Life Long Learning Networks, Sector Skills Councils and the Foundation Degree Forward initiative.

159 The suitability of teaching staff in PIs for contributing to the University's awards is determined by scrutiny of their CVs by an SP of the SQC as part of validation. From the evidence provided, the audit team was satisfied that the scrutiny process was effective. The University operates a staff development scheme (Pathways) that enables staff from PIs to enrol on the University's courses at no charge. The team was also made aware of a wide range of staff development activities covering pedagogic and subject-specific topics. The University's commitment to the support and development of staff within its partners is demonstrated by the quality and quantity of shared opportunities that it offers.

160 The systems by which academic and pastoral support will be provided for students within partners are identified as part of the University's validation and review procedures. The SPs responsible for validation and review focus on how well the support structures have worked for the partner, and how appropriate they are for the programme currently under scrutiny. In addition to the support provided by their own institution, CP students can access all central University 'Gateway' services. The University has also begun to extend to its partners initiatives such as its electronic portfolio tool for personal development planning. The audit team considered this willingness of the University to extend to its partners initiatives designed to enhance the student experience to be of particular value.

161 The audit team concluded that, overall, the University operated thorough and robust validation, monitoring and programme review procedures while looking for ways in which to improve its processes. The University cooperates with partners in matters of the quality of learning resources in order to promote the student experience, and addresses problems competently. The team concluded that the University manages the quality of its CP well.

The effectiveness of the awarding institution's procedures for safeguarding the standards of its awards gained through collaborative provision

162 The University's systems of programme approval, monitoring and review for provision on its own campuses apply equally to provision delivered in PIs and facilitate the effective comparison of standards between the university-campus programmes and CP. The University's programme validation procedure explicitly incorporates a check on the partner's ability to deliver a programme of comparable standard to that delivered by the University. The audit team saw evidence that where partners were unable to meet the requirements of the University action was taken to terminate the partnership.

163 University approval procedures have been calibrated against the Academic Infrastructure and in particular the section of the *Code of practice* relating to collaborative provision. The University has recognised the need to adjust annual monitoring processes in order to meet the needs of PIs, in particular through the production of a common template and the provision of guidance and training on completing reports to staff in PIs. However the degree of partner aggregation employed in external examiners' and annual monitoring reports makes it difficult, in some cases, to ensure that good practice and difficulties in specific programmes and PIs are identified.

164 The involvement of external advisors in the work of the SPs that are responsible for programme validation and review contributes to the effective management of standards in CP. This is achieved through careful choice of advisors, the provision of critical comment, and discussions with and visits to PIs.

165 The audit team considered the University's use of data and statistics. The team concluded that the University is making appropriate use of statistics in the management of standards and quality. There is evidence that such data influence the actions being taken for the

enhancement of the student learning experience. The accuracy of data is effectively assured through good communication with partners, and through an intensive and regular process of iterative cross-checking between staff in the University and the PIs. Additionally, efficient internal moderation procedures for student assessment marks are in place. Moderation involves staff from PIs, and this inclusion serves to promote the accuracy of assessment data. The Collaborative Provision Self Evaluation Document (CPSED) commentary on the collection, evaluation and recording of data is accurate, and contains analysis of such data. The team found that, overall, data management within the University and its PIs is effective.

166 The section of the QAA *Code of Practice* for external examining is followed and implemented for PIs. The audit team saw evidence that curriculum and assessment design is influenced by external examiners' comments. The template for such reports also invites external examiners to comment on aspects of the assessment process. Examples of good practice and school-specific issues are regularly identified in summaries of external examiners' reports and discussed within the University's committees. External examiners' reports are scrutinised to ensure prompt identification of and response to issues of concern raised by external examiners. Consideration of external examiners' reports is incorporated into schools' annual monitoring procedures. The reports are discussed and disseminated within PIs, and the process of responding to these is a joint one, with ultimate responsibility residing with the University. Link tutors within the University have responsibility for analysing and preparing initial responses to external examiner reports in conjunction with PI staff. The audit team found evidence that PI staff are informed and involved in responses to external examiners' reports. Feedback from the University to PIs on external examiners' comments in annual reports is variable in its level of detail but is generally effective.

167 The audit team considered that the analysis of the external examining function

contained in the CPSED is accurate. The team concluded that practice within CP with respect to external examiner matters is effective and appropriate. The use of external examiners in summative assessment is strong and scrupulous. The overall process of external examining in CP is sufficient to assure standards and quality. The team further concluded that the University has robust systems for the approval, monitoring and review of its PIs and the standards of its CP.

The awarding institution's use of the Academic Infrastructure in the context of its collaborative provision

168 The University's approach to incorporation of the Academic Infrastructure with its PIs is accurately described in the CPSED. There is good cooperation between the University and partners in responding to themes emerging from use of the Academic Infrastructure. The University acts to raise awareness of the Academic Infrastructure amongst its PIs. External examiners' reports, validation documents and periodic review reports indicate that the University employs the Academic Infrastructure to inform and maintain standards.

169 Overall, the audit team concluded that the University makes good use of external reference points in its management and enhancement of quality and standards and makes effective use of these in its dealings with PIs.

Commentary on the institution's intentions for the enhancement of its management of quality and academic standards in its collaborative provision

170 At the time of the audit the University was re-assessing its policies and systems for CP, with a particular view to the increasing application of the notion of risk management to partnerships. The University will implement a two-phase system, initially building on current practices but without the use of its existing Typology of types of CP. This document is seen no longer to express all the complexities of CP arrangements. Phase one of the changes will involve, for example, the strengthening of central university support for CP by more frequent meetings of the University's

School Collaborative Coordinators' Group, producing a clearly defined and uniform role for School CP Coordinators, involving staff at partner colleges in peer review through representation on the University's validation and review bodies, and exploring ways in which the views of students can be used to enhance quality. Changes in phase two will be recommended following evaluation by a CP task group. The audit team considered that the changes were moves towards enhancing the capacity of the University for effective management of its CP.

171 The audit team acknowledged the ACN as a significant driver for quality enhancement at PIs. The team viewed the ACN as enhancing the relationship between member institutions and, ultimately, the student experience. The University promotes the development of PI staff by offering them access to the University's staff development programmes. These opportunities are welcomed in the PIs but not universally known.

172 The audit team concluded that the University's intentions for the enhancement of quality in its CP are generally appropriate within its mission.

The utility of the CPSED as an illustration of the awarding institution's capacity to reflect upon its own strengths and limitations in collaborative provision, and to act on these to enhance quality and safeguard academic standards

173 The CPSED drafting was led by a planning group consisting of sixteen senior staff from across the University and two members from the PIs. All PIs were consulted electronically on the drafts, as were the University's staff involved in collaborative activity. Those staff from the PIs whom the audit team met considered the CPSED an accurate and comprehensive account. The team found the CPSED relatively descriptive, detailed on some aspects of the variety of practices maintained within PIs, and a good account of the way in which the University assures itself of the effectiveness of the partners' processes.

Reliability of information provided by the awarding institution on its collaborative provision

174 The methods used by the University to assure the quality of information provided to students are largely the same as for those programmes provided directly by the University. The audit team examined a sample of PI publicity material and student handbooks and guides, both on paper and web-based.

175 Students commented favourably on the accuracy and reliability of the information made available to them, both directly from the University and through the PIs. The students particularly praised the information available to them through the University's virtual learning environment. In general, the students were aware of assessment requirements, procedures for complaints, and that their awards were those of the University.

176 From documentary evidence and meetings with staff and students, the audit team concluded that the CPSED provided an accurate account of the University's approach to published and internal information for students. The team formed the view that the information provided to students about the University and their programmes of study was, in general, accurate, clear, and accessible.

177 At the audit visit, the University gave an account of its progress in meeting national Teaching Quality Information (TQI) requirements. The University reported that it had placed digests of most external examiners' reports on the TQI website and was preparing to publish review reports there. The audit team was able to confirm the accuracy of information concerning external examiners' reports, and concluded that the University was alert to the requirements of the Higher Education Funding Council for England's document 03/51, *Information on quality and standards in higher education: Final guidance*, and was continuing its activity to fulfil its responsibilities in this respect.

Features of good practice

178 Of the features of good practice noted in the course of the collaborative provision audit, the audit team noted in particular:

- i the established, strong, central strategic system for managing collaborative provision that is also sensitive to local needs (paragraphs 21, 27, 33 to 43, 52, 59 to 60, 148 to 151)
- ii the Annual Operating Statement and its target-setting for UK partnerships (paragraphs 33,149)
- iii the cooperative arrangements functioning within the Associate College Network (paragraphs 44, 124,125)
- iv the staff development opportunities shared between the University and its partners (paragraphs 45, 125 to 127)
- v the extension to the partners of University initiatives to enhance the student experience (paragraphs 137 to 142)
- vi the role of Standing Panels, like the Overseas Standing Panel, together with their administrative instruments (paragraphs 130, 152).

Recommendations for action

179 The audit team considers it desirable for the University to:

- i establish greater consistency of practice and information in order to promote enhancement more readily (paragraphs 45, 46)
- ii identify clearly in all external examiners' reports and annual monitoring reports the good practice and issues related to individual partners (paragraphs 77, 108)
- iii consider and act in every case in a timely fashion on commentaries on provision made by student representatives (paragraphs 110).

Appendix

The University of Wolverhampton's response to the collaborative provision audit report

The University welcomes the audit team's statement of 'broad confidence in the soundness of the University's present and likely future management of the academic standards of its collaborative awards' and in the management of the learning opportunities available to students on collaborative programmes. The University notes that the auditors reported that they had encountered many examples of good practice and that they drew particular attention to, among other features of the management of collaborative provision, an 'established, strong, central strategic system...that is also sensitive to local needs; the role of Standing Panels, like the Overseas Standing Panel, together with their administrative instruments; and the cooperative arrangements functioning within the Associate College Network; the staff development opportunities shared between the University and its partners'.

The University recognises the desirability of 'identifying clearly in all external examiners' reports and annual monitoring reports the good practice and issues related to individual partners'. To this end, the University reminded all external examiners in its written briefing of the need to comment specifically on individual partners. Similarly, annual report writers are being reminded of the need to distinguish clearly between University and collaborative provision and among individual partners. Although the auditors make a number of positive comments about how the University responds to student feedback, we also recognise that we should be resolving 'every case' raised by student representatives and will be asking School Quality Committees to make follow up to student commentaries a standing agenda item, in addition to the present standard item on annual monitoring. The University notes the auditors' several observations on the sharing of good practice with partners and will continue to explore ways of 'establishing greater consistency of practice and information', through, for example, the work of the Associate College Network and its various committees.

