

Nottingham Trent University

MARCH 2006

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.

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Summary

Introduction

A team of auditors from the Quality Assurance Agency for Higher Education (QAA) visited Nottingham Trent University (the University) from 6 to 10 March 2006 to carry out a collaborative provision audit. The purpose of the audit was to provide public information on the quality of the programmes offered by the University through collaborative arrangements with partner organisations, 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 the University manages the academic aspects of its collaborative provision. As part of the process, the team visited three of the University's partner organisations in the UK, where it met with staff and students, and conducted by video-conference equivalent meetings with staff and students from a further two partner organisations overseas.

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 resources 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) - September 2004, paragraph 13, published by QAA).

In a collaborative provision audit 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 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 its requirements.

Features of good practice

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

- the effectiveness of the verifier system in seeing that the University's quality assurance requirements are met by its partners, while also incorporating a role to advise partners on how best to meet these requirements and enhance the quality of provision
- the work of the Centre for Academic Standards and Quality in providing comprehensive guidance notes and training for partners to supplement the clearly specified procedures for approval, monitoring and review of collaborative provision within the Academic Standards and Quality Handbook
- based on the case of a particular collaborative arrangement in which programmes are not taught or assessed in English, the effective use of UK-based bilingual moderators in the assessment process

- the active encouragement given to achieve effective student representation in partner organisations, particularly through student membership of programme committees
- the organisation of regular conferences for partners which promote communication, discussion of common interests and relationship building.

Recommendations for action

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

Recommendations for action that is advisable:

- given the importance placed on there being a smooth and successful transfer of primary responsibility for the quality management and monitoring of collaborative provision to schools, to produce a clear schedule with allocated responsibilities for this process against which the transition can be monitored
- to take the necessary steps to ensure that collaborative agreements are signed before students are enrolled on the associated programmes
- to implement measures for exercising appropriate oversight of transcripts issued by partners on behalf of the University.

Recommendations for action that is desirable:

- to review the reporting arrangements for 'delegated centre' collaborative provision to enable the chain of reports contributing to annual monitoring to be completed within a timescale appropriate to providing management information and to exploiting the potential for enhancement gained from the earlier availability of overview reports
- in relation to programmes where the language of assessment is not English, to make it explicit that arrangements for

external examining and moderation must involve examiners with appropriate experience of standards in UK higher education, in addition to fluency in the relevant languages

- to apply through its approval and review processes the recently issued flexible and distance learning guidelines to all relevant programmes at the first opportunity
- to formalise the arrangements whereby partner-produced publicity and promotional material relating to the University is regularly checked by verifiers in the interval between approval and review.

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 findings of the audit suggest that the University was making effective use of the Academic Infrastructure in the context of its collaborative provision.

In due course, the audit process will include a check on the reliability of the teaching quality information, published by institutions in the format recommended by the Higher Education Funding Council for England (HEFCE) in the document *Information on quality and standards in higher education: Final guidance (HEFCE 03/51)*. The audit team was satisfied that the information the University and its partner organisations are currently publishing about the quality of collaborative programmes and the standards of the University's awards was reliable and that the University was making adequate progress towards providing requisite Teaching Quality Information for its collaborative provision.

Main report

Main report

1 A collaborative provision audit of Nottingham Trent University (the University) was undertaken from 6 to 10 March 2006. The purpose of the audit was to provide public information on the quality of the programmes offered by the University through collaborative arrangements with partner organisations, 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 Collaborative provision audit is supplementary to the institutional audit of the University's own provision. It is carried out by a process developed by the Quality Assurance Agency for Higher Education (QAA) in partnership with higher education institutions (HEIs) in England. It provides a separate scrutiny of the collaborative provision of an HEI with degree-awarding powers (awarding institution) where such collaborative provision was too large or complex to have been included in its institutional audit. 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)* - September 2004, paragraph 13, published by QAA).

3 In relation to collaborative arrangements, the audit checked the effectiveness of the University's procedures for establishing and maintaining the standards of its academic awards; for reviewing and enhancing the quality of the programmes leading to those awards; for publishing reliable information about its collaborative provision; and for the discharge of its responsibilities as an awarding institution. As part of the process, the audit team visited three of the University's partner organisations in the UK, where it met with staff

and students, and conducted by video-conference equivalent meetings with staff and students from a further two partner organisations overseas.

Section 1: Introduction: Nottingham Trent University

The institution and its mission as it relates to collaborative provision

4 Trent Polytechnic, founded in 1970, was formed from the Nottingham Regional College of Technology, the Nottingham College of Art & Design and the Nottingham College of Education. It was renamed Nottingham Polytechnic in 1989 and acquired university status under the *Further and Higher Education Act 1992*, as Nottingham Trent University. It describes itself as one of the UK's leading universities for graduate employment, having close links with over 6,000 employers across the world. It aims to provide a full range of educational programmes to meet the needs both of young people keen to enter their chosen career and of practising professionals wishing either to change career direction or accelerate their promotion prospects. The University also aims to be the institution of choice for corporate clients wanting a professional approach and concrete results from research, training and consultancy.

5 The University has a significant level of collaborative provision, with more than 25 per cent of its 25,000 students studying for the University's awards under collaborative arrangements. Even so, it should be noted that there has been a substantial reduction in the number of such students since the 2004 institutional audit resulting from the University's largest partner having been designated a university in its own right.

6 At the time of the audit, there were over 80 collaborative partners divided into 'school-based' and 'delegated centre' categories. School-based refers to an arrangement under which the University's approved programmes are delivered through a collaborative

partnership, whereas delegated centre refers to an arrangement under which a partner's programmes are approved by the University to lead to one of its awards. The two categories are of roughly equal size, encompassing between them almost 7,000 students. The majority of collaborative partners deliver school-based collaborative provision, while 16 institutions have delegated centre status, permitting considerable autonomy in quality management; two of the delegated centres also offer school-based collaborative provision. Collaborative arrangements cover both programmes offered by the University itself, and also programmes not offered by the University. Overseas collaborative provision is significant, accounting for around 4,000 students with approximately 70 per cent of these studying at the 11 overseas institutions designated as delegated centres. In the UK, the University's collaborative activity is largely focused on working with corporate clients and sectors to provide professional development. However, increasing priority is being given to aligning collaborative development with the University's regional agenda (see paragraph 8 below).

7 From 2004-05, the University has adopted a new structure of 10 schools set within four colleges having financial responsibility for their component schools. School-based collaborative provision is spread across all four colleges, although it is strongly concentrated in the College of Business, Law and Social Sciences. Delegated centre collaborative provision is also generally closely aligned with subject disciplines within schools, the majority within the College of Business, Law and Social Sciences, and much of the remainder within the College of Art and Design and Built Environment. Arrangements for school-based collaborative provision are mapped to the new structure. At the time of the audit there were transitional arrangements in place for delegated centre collaborative provision (see paragraph 29 below).

8 In March 2004, a new Strategic Plan for the period 2004 to 2010 was approved, which redefined the University's mission as being

'to deliver education and research that shapes lives and society'. One of the Plan's six 'strategic platforms' is 'strengthening organic growth by collaboration, partnerships and acquisitions'. In implementing its collaboration strategy, the University argues that it is well placed to lead the development of a programme of provision across the region, in collaboration with other HEIs and further education colleges (FECs), the core of which would be a strong range of Foundation Degrees contributing substantially to developing the education and skills base of a broader range of students.

Background information

9 The published information available for this audit included:

- the institutional audit report, May 2004
- the Foundation Degree review of Sports Horse Management and Training, July 2005
- Nottingham Trent University and Griffith College Dublin (Ireland) overseas collaborative audit report, April 2000
- Nottingham Trent University and the Workers Institute of Technology, Malaysia overseas collaborative audit report, September 1999.

10 The University provided QAA with the following documents:

- the self-evaluation document for collaborative provision (CPSED)
- documentation linked to the CPSED, as listed in an appendix to the CPSED
- documentation relating to the partner organisations visited by the audit team and to those with whom it conducted meetings by video-conference.

11 In addition, the audit team had access to a range of the University's internal documents in hardcopy or on the University's website, including the intranet. The team is grateful to the University for the access it was given to this information.

The collaborative provision audit process

12 Following the preliminary meeting at the University in April 2005, QAA confirmed that between the briefing and audit visits there would be five visits to partner organisations - these to include two 'virtual' visits involving meetings conducted by video-conference. QAA received the CPSED in October 2005 and documentation relating to the five partner organisations in January 2006.

13 The University's students were invited, through their Students' Union, to contribute to the audit process in a way that reflected the Union's capacity to represent the views of students in partner organisations offering the University's awards through collaborative arrangements. At the briefing visit, the audit team was able to meet an officer of Nottingham Trent Students' Union (NTSU) as part of a wider student group and the team is grateful to NTSU for its engagement with the audit process.

14 The audit team undertook a briefing visit to the University from 23 to 25 January 2006 with the purpose of exploring with senior members of University staff, senior staff from partner organisations, and student representatives matters relating to the management of quality and standards raised by the CPSED and the linked documentation. At the end of the briefing visit a programme of meetings for the audit visit was agreed with the University. It was also agreed that certain audit trails would be pursued through specific case-studies prepared by the University.

15 During its visits to the partner organisations (including the 'virtual' visits) the audit team held meetings with senior staff, teaching staff and student representatives of the partner organisations. The team is grateful to the partner organisations for their help in furthering its understanding of the University's processes for managing its collaborative arrangements.

16 The audit visit took place from 6 to 10

March 2006 and involved further meetings with University staff. The audit team is grateful to all those who participated in meetings.

17 The audit team comprised Dr R Griffith-Jones, Mr P Lloyd, Mrs J Lyttle, Mrs C Stoney, Dr P Steer, auditors, and Mrs K Sherlock, audit secretary. The audit was coordinated for QAA by Ms J Holt, Assistant Director, Reviews Group.

Developments since the institutional audit of the awarding institution

18 The institutional audit highlighted good practice, in particular the University's student-centred approach to academic support and support for graduate employment. The audit also identified issues which, in as much as they relate to aspects of mainstream quality assurance procedures, have a bearing on collaborative provision.

19 'Advisable' recommendations were:

- to refine the detailed regulations of the internal subject review process so that Academic Board can be assured that the full range of University programmes align with the appropriate external reference points
- to develop specific guidance for the quality assurance, including approval, monitoring and periodic review, of programmes delivered through flexible learning.

20 'Desirable' recommendations were:

- to continue to develop centrally-held data used for the monitoring of quality and standards which is robust and accurate and has the confidence of all staff
- to assure itself through Academic Board monitoring that the revised quality assurance framework continues to be fit for purpose and supports enhancement.

21 The CPSED explained that the University had addressed the advisable recommendations through revision of, or addition to, procedural guidelines. With regard to subject review (the University's periodic review process), changes were approved in November 2004

to tighten up procedures for the sampling of programmes, such that all programmes would be covered either comprehensively or in more limited detail at least once every six years. With regard to flexible and distance learning (FDL), new guidelines were issued in January 2006.

22 Progress with the desirable recommendations was also reported in the CPSED. The University was developing its new software platform as the source of basic programme information to be drawn upon by a variety of users. The University's confidence 'that the new school quality assurance procedures were bedded in and working well' had been an important factor in the decision to transfer responsibility for delegated centre provision to schools, following a period of transitional arrangements. This organisational change, together with the revision of the relevant section of the *Code of practice*, published by QAA, has necessitated a redrafting of the section of the Academic Standards and Quality Handbook (ASQH) dealing with collaborative provision (see paragraph 30 below). The redrafting process was proceeding throughout the audit process with successive versions made available to the audit team.

23 Also having an indirect impact on collaborative provision is the comprehensive review and restructuring of the course portfolio within schools, according to 'subject-specific changes' set out in the Strategic Plan (2004-10). The exercise, known as respecification, is accompanied by the adoption of approved programme specifications, produced according to a standard template (see paragraph 86 below), and it is expected to be achieved for all schools by the end of the current academic year. Respecification of school-based collaborative provision is being undertaken alongside the relevant 'home' programmes, and the CPSED gave one example of where the University was withdrawing from a collaborative arrangement because the associated provision no longer aligned with its planned strategic direction. The audit team was informed that, from September 2006, respecification would be extended to delegated centre collaborative provision for completion within the academic year.

24 The present audit team considered that the University had generally taken effective action in response to issues arising from the institutional audit report relevant to collaborative provision, although certain areas continued, in the team's view, to require further attention. These related to the transitional process for integrating collaborative provision into the University's revised quality assurance framework (see paragraph 34 below); the timely implementation of the FDL guidelines (see paragraph 116 below) and closer alignment of the University's procedures with certain precepts of the section of the *Code of practice* on collaborative provision (see paragraphs 48, 74, 80, and 127 below). The team also noted the University's student centred-approach which set the tenor for good practice in relation to student representation in partner organisations (see paragraph 97 below).

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

The awarding institution's strategic approach to collaborative provision

25 According to the CPSED, 'the scale of collaborative provision at [the University] evolved over a long period of time, largely in response to opportunities to forge links with partner institutions in the UK and overseas'. Links were either school-based, that is aligned to provision within schools, or delegated centre, that is developed outside schools with the University providing a validation service. The Strategic Plan (2004-10) provided the impetus for reappraising this approach in the light of the national agenda for widening participation and the University's own regional agenda. The resultant collaboration strategy is encapsulated in the following guidelines, which define the operational framework for collaborative developments:

- the separation of function between the academic and business aspects of collaborative provision
- in respect of delegated centre collaborative provision, the development of fewer but more substantial partnerships which have a closer strategic fit with University provision
- alignment of the focus of collaborative provision with the University's regional agenda
- ensuring the business case fully reflects the direct and indirect costs of collaborative provision, alongside the risk involved.

26 Within these guidelines the University, as stated in the CPSED, 'strives to ensure an equivalence of learning experience for students across its total provision'. Its quality assurance procedures for awards offered through collaborative arrangements are designed to fulfil the following purposes:

- to meet the standards of the University and, more broadly, those of UK higher education
- to align the University procedures with the relevant section of the *Code of practice* and with other elements of the UK Academic Infrastructure
- to ensure the University is fully cognisant of all its collaborative relationships, including those that only involve credit contributing to awards.

27 The University is committed to adopting a unified approach to the management of collaborative provision, based in schools and covering both the current categories of provision. However, pending transfer of complete responsibility for new approvals, monitoring and review to schools, using their developing quality assurance systems, transitional arrangements are in place under which the management and monitoring of delegated centre collaborative provision has been retained centrally.

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

28 The implementation of revised arrangements for the management of collaborative provision began in October 2005. These give responsibility for the business aspects of collaborative provision to heads of college, essentially operating through executive structures. Ultimate responsibility for quality assurance remains with the Pro Vice-Chancellor (PVC) Academic Development and Research and is conducted through the academic committee structure with reporting lines from programme, through school, to central committees.

29 Under the intended unified approach, arrangements take the following form. Each approved programme has a programme committee with primary responsibility for the quality of the programme. School Academic Standards and Quality Committees (SASQCs) have responsibility for the management and monitoring of all collaborative programmes in their respective subject areas (in the same way as they do for in-house programmes). They submit overview reports on their respective schools for consideration by the Academic Standards and Quality Committee (ASQC), a subcommittee of Academic Board, which has overall responsibility for quality and standards. Responsibility for approval and review lies with ASQC. Outcomes of approval events are reported to its subcommittee for Standards and Quality Management (SQM), acting under delegated authority, while outcomes of periodic review are reported through SQM to ASQC. These arrangements are already in place for school-based collaborative provision, but under transitional arrangements, the subcommittee of ASQC for Delegated Collaborative Provision (DCP) is continuing to operate in respect of approval, monitoring and review of extant provision. At the end of the transitional period, it is envisaged that delegated centre collaborative provision will follow the same approval, monitoring and review processes as school-based collaborative provision.

30 Supporting the work of ASQC is the Centre for Academic Standards and Quality (CASQ) and one of its main responsibilities is to maintain the ASQH as a comprehensive codification of the University's quality management procedures. The section of the ASQH on collaborative provision has recently been updated to reflect the transfer of responsibilities to SASQCs and to incorporate the transitional arrangements. Under the latter, administrative support for delegated centres remains with CASQ until the transfer of quality management to schools has been completed.

31 In addition to its routine approval, monitoring and review processes, the University exerts an influence over the quality of the students' learning experience in partner organisations by two principal means. First, all partnerships have a formal collaborative agreement, drawn up by the Office of the Corporate Solicitor, covering the roles and responsibilities of both parties and inter alia quality assurance arrangements and the rights of students to University services (see paragraph 43 below). Secondly, all approved programmes are assigned a verifier who, in the role of 'critical friend', ensures that the requirements of the collaborative agreement are being met, while advising the partner on how best to meet these requirements, suggesting areas for improvement and explaining any changes in University processes (see paragraphs 52 and 58 below).

32 Central to the University's role in assessment is the application of its Assessment Policies and Principles to collaborative provision, albeit within the context of local policies and regulations in the case of delegated centres. Exceptions are policies for anonymous marking and for moderation of assessment required at local level, which may be developed by the delegated centre. Common Assessment Regulations govern the University's awards according to level and, while delegated centres are encouraged to develop local regulations, they are directed to the relevant University regulations for guidance on broad principles. Assessment practice is

scrutinised in the approval process for both categories of collaborative provision. Regulations on the composition of Boards of Examiners are expanded upon in the section of the ASQH on collaborative provision; for school-based collaborative programmes, the University is represented by the Chair, the verifier and programme teaching staff, while for delegated centre collaborative programmes the verifier has observer status on the Board.

33 The CPSED indicated that the transitional arrangements would be required only for 2005-06, but by the time of the audit, it was apparent that they were expected to continue into 2006-07. From its meetings with staff, the audit team learned that operational issues had yet to be fully addressed, relating to absorption of the workload of DCP by SASQCs and assimilation of the CASQ support function for delegated centres into school administrative structures. There were also reporting issues to be resolved, in particular how school overview reports would incorporate relevant reports from delegated centres, and how these overview reports would relate to institutional overviews of delegated centre collaborative provision, which the team was informed were to be retained (see paragraph 51 below).

34 It appeared to the audit team that the intended arrangements had been the subject of limited prior consultation and were insufficiently well developed before being formalised through incorporation in the ASQH. There was still considerable preparation required in schools for managing a mixture of school-based collaborative programmes and cognate programmes provided through delegated centres. Potentially this would entail dealing with a range of assessment regulations, separate external examiners and different arrangements for boards of examiners. In addition, there were two specific issues which did not sit well with the concept of a unified approach based on schools. One was the small number of delegated centres with collaborative provision linked to more than one school and the other was the development of Foundation Degrees under the University's regional agenda;

the team learned that both could mean the continuation of some form of central management. Given the importance placed on there being a smooth and successful transfer of primary responsibility for the quality management and monitoring of collaborative provision to schools, the team considers it advisable for the University to produce a clear schedule with allocated responsibilities for this process against which the transition can be monitored. Notwithstanding this recommendation, the team concluded from documentation and meetings that the University had in place an effective framework for managing quality and standards, which, through transitional arrangements, it was adapting to its revised organisational structure.

35 The audit team acknowledged the University's assurances that the transitional arrangements would be retained for as long as necessary and also recognised there were factors which would ease the move to a unified approach. These included the existence of clear and comprehensive procedures and guidance for the approval, monitoring and review of collaborative provision, which would continue to apply within the modified reporting structures, and the well-established communication links with partners, through CASQ, the verifier system and the conference for delegated centres, which would enable the University to explain more fully the rationale and arrangements for the respecification of collaborative programmes and the transfer of responsibility to schools.

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

36 The CPSED indicated that the University was pursuing its objectives for enhancement of the student learning experience within collaborative arrangements through respecification of the portfolio of programmes on offer and through its processes for the selection and development of partners. The intention was to have fewer but more substantial partnerships that aligned with the University's strategic direction, and the audit

team learned that this process of rationalisation was nearing completion. In terms of quality management, the CPSED referred to the potential for enhancement to be derived from the full adoption by all partners of the 'more rigorous' processes, introduced in 2003, when the University 'revamped its quality assurance framework for approval, monitoring and review'.

37 The CPSED also pointed to measures for building on initiatives which the University saw as successful. Examples cited were the development of the training for verifiers, and the intended shift to enhancement themes for conferences organised for partners once the new arrangements for quality management were better established. There were also developments at the University which were expected to flow through to collaborative provision, such as expanding the pool of trained reviewers for approval and review events and facilitating improvements in the student dataset for monitoring and review purposes through the Programme Database project.

38 The audit team concurred with the view, expressed in the CPSED, that the University had 'a clear understanding of the ongoing measures needed to improve the management of its collaborative provision'. The concept of continuing improvement, derived from supporting partners to become more effective in their management of quality assurance processes, was evident in the University's approach, as was the importance it accorded to ensuring, as far as possible, equivalence between in-house and collaborative provision.

Internal approval, monitoring and review processes

Partner and programme approval

39 The University's processes distinguish between partner and programme approval. Partner approval is concerned with the capability of the partner organisation to deliver or support the delivery of programmes leading to the University's awards. Programme approval is concerned with ensuring these awards are of an appropriate standard. Proposals for programme approval are considered on an individual basis.

40 The first stage of partner approval involves a process of due diligence in respect of strategic fit, risk assessment and financial appraisal. Responsibility for this resides with the colleges, which since October 2005 have a remit for the business aspects of both categories of collaborative provision, including developing the business case and managing the contractual arrangements. Proposals successful at this stage are formally signed off by college management, giving schools the necessary authorisation to develop the detail. This is done through an iterative process between the relevant SASQC and CASQ, until the proposal is deemed ready to go forward to an approval event. For delegated centre collaborative provision, the involvement of SASQCs in new proposals became effective in October 2005.

41 CASQ also advises on the type of approval event and supporting documentation required. Whether an event is conducted through a panel visit or a paper-based exercise is determined by such factors as the number of credits the partner is responsible for, who has responsibility for the design and delivery of the programmes, and the mode of delivery. In some circumstances, a paper-based exercise may be supplemented by a visit from a member of University staff independent of the school who completes a specifically-designed checklist.

42 The focus of approval events depends on the category of collaborative provision. For school-based collaborative provision, the interest is in the proposed relationship between the partner organisation and the relevant school, whereas for delegated centre collaborative provision, the main priority is the ability of the centre to manage its academic policy development and quality assurance processes, in liaison with the University. In both cases, consistency with the University's assessment policies, principles and regulations is an important criterion. Approval may be unconditional, conditional or denied, with approval decisions ratified by SQM. Reports on approval events are considered in the normal way by SQM and ASQC. Under the transitional arrangements, any approvals in respect of

delegated centre collaborative provision already in the system continue to be dealt with by DCP.

43 Collaborations approved through these arrangements are formalised by means of a collaborative agreement between the parties. Approval is always for a fixed period (typically five years) with re-approval normally being preceded by periodic review (see paragraphs 59 to 62 below). Where partners have multiple locations, each location is subject to separate approval.

44 The programme approval process for school-based collaborative provision is directly equivalent to that used for the University's in-house programmes. As noted in the institutional audit report, the process is properly informed by the *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ), subject benchmark statements and the *Code of practice*. Programme specifications following a standard template are progressively being introduced, as a result of changes to the University's approval and specification policy (see paragraphs 85 to 86 below). Modifications to programmes are subject to the University's normal procedures. For delegated centre collaborative provision, the partner approval process will already have examined the use made by delegated centres of appropriate reference points and mechanisms for incorporating an external critical perspective in programme development; therefore, programme approval takes place within the context of the collaborative agreement.

45 The CPSED explained that the separation of the business from the academic aspects of collaborative provision had enabled the University to 'identify the risks as well as the rewards' and to recognise the indirect as well as the direct costs. It had also influenced the decision to see future collaborative arrangements in terms of strategic fit, while placing greater emphasis on developing school-based collaborative provision.

46 On the basis of a case-study illustrating procedures for establishing the business case for new collaborative proposals, the audit team

was able to verify that the process of due diligence covering legal, financial and strategic issues was detailed and thorough, with guidance notes having been developed in the light of experience over a number of years. The context was school-based collaborative provision, since to date there has been no college involvement with delegated centre collaborative provision. As a more general point, from meetings with staff from partner organisations, the team encountered some apprehension and uncertainty about the implications for delegated centres of the greater direct involvement of schools and colleges. This reinforced for the team the need for the University to communicate its message clearly to delegated centre partners.

47 From a study of reports of approval events, it was evident to the audit team that the University had developed robust processes for both partner and programme approval. While the older validations did not always have external involvement, recent approval events included at least one panel member external to the University, sometimes supplemented by a representative from one of the University's partner organisations (see paragraph 66 below). Through partner visits, the team was able to confirm that staff were acquainted with the procedures for making modifications to programmes.

48 Minutes indicated that committees were thorough in their scrutiny of reports of approval events, although they also revealed cases where conditions of approval were not fulfilled before programmes commenced. Specifically, collaborative agreements were not always signed by both parties, despite this being a condition of approval, and on a few occasions they remained unsigned for a considerable period after the programme had started. The audit team considers it advisable for the University to take the necessary steps to ensure that collaborative agreements are signed before students are enrolled on the associated programmes. There were also examples of recent agreements based on templates which had not been updated to take account of

changes in the University's terminology, although in general the team found collaborative agreements to be comprehensive in their coverage and consistent with the relevant precept of the *Code of practice*.

Annual monitoring

49 Annual monitoring of all the University's programmes, both in-house and collaborative, is based on the Programme Standards and Quality Report (PSQR), prepared by the programme team. Produced according to a template, PSQRs comment under the headings of academic standards, the quality of learning, and overall subject health, with the latter section drawing on external examiner reports, student evaluation and internal and external programme reviews.

50 For school-based collaborative provision, the partner prepares a PSQR, which, in cases where there is an equivalent in-house programme or delivery is shared between the University and the partner, is subsequently incorporated into the PSQR produced by the programme team. PSQRs are considered first by the relevant programme committee and then by SASQC. In turn, each SASQC produces a Standards and Quality Report (SSQR), summarising all the PSQRs for the school. An overview of SSQRs is prepared by SQM for consideration by ASQC. The reporting process operates to an annual timetable, published in the ASQH.

51 For delegated centre collaborative provision, annual monitoring is carried out by the centre itself, which is additionally required to produce an overview report where more than one programme is offered. Both the PSQR(s) and the overview report (where applicable) are first considered by the delegated centre's Academic Board (or equivalent body) before being submitted, along with a record of the related discussion, to the University - currently to DCP, but after the transitional arrangements to the relevant SASQC and then to SQM. DCP also receives external examiner report(s) and an annual report from the verifier. It produces an annual overview report on delegated centre collaborative provision, along with a summary

and analysis of the reports from external examiners and verifiers, for consideration by ASQC.

52 The CPSED explained that partner organisations have been required to implement the University's recently revised quality assurance requirements, including those for annual monitoring, and acknowledged that there were differences among them 'in the pace of adoption of the new processes'. The CPSED also clarified that delegated centres had not been required to use the PSQR format until 2004-05. Variability in the quality of reporting on data had been evident in this first round and some centres had been advised that more detail would be required in future. In addition, the CPSED drew attention to the role of the verifier, which for school-based collaborative provision is often the responsibility of the programme leader, in supporting local monitoring of collaborative provision, and also to the role of CASQ in guiding delegated centres through changes in the University's procedures.

53 The view of the audit team was that the requirements for annual monitoring were clearly set down in the relevant sections of the ASQH. There were detailed templates prescribing content and style of reports, a series of guidance notes, including an exemplar PSQR, as well as a range of coversheets and pro formas to facilitate the passage of reports through the various stages and levels of the committee system.

54 With regard to school-based collaborative provision, the audit team (in line with the findings of the institutional audit) considered PSQRs to be reflective documents. Staff from partner organisations who met the team indicated that they received feedback on their PSQRs, giving examples of how schools had responded to particular issues. They also stated that action points were followed up from one year to the next, with improvements occurring as a result, and the team was able to verify this from the relevant PSQRs.

55 While acknowledging that PSQRs were considered thoroughly by SASQCs, the audit team noted that the resultant SSQRs varied in

their coverage of collaborative provision. This was not simply a function of scale, as both the Business School, with many collaborative programmes, and the School of Computing and Informatics, with very few, included an appropriate level of detail in their respective SSQRs, whereas some other schools were less expansive. The team also found the SQM overview to be an accurate summary of SSQRs.

56 With regard to delegated centre collaborative provision, in general, the audit team found PSQRs to be evaluative, although it also noted the shortcomings in data reporting (see paragraph 106 below). From DCP minutes, it was clear to the team that PSQRs were given thorough consideration, assisted by an analysis of individual reports provided by CASQ. This was followed by feedback to delegated centres, which included requests for action. However, the team noted that centres were not necessarily responsive to such requests and there were examples of issues, often concerning resources, which proved difficult to progress.

57 The audit team understood that delegated centres were not required to submit their PSQRs according to any specific timetable and it saw instances where reports were considered by DCP some time after the period to which they related; for example, two PSQRs in respect of 2003-04 did not reach DCP until September 2005. The team understood that there was some variability in the end dates for programmes during the academic year. It also appreciated that DCP was meticulous in its tracking of PSQRs and that, in connection with producing the overview report, DCP had requested more prompt submission of PSQRs. Even so, the overview report relating to 2003-04 was not available to DCP until December 2005. The team considers it desirable for the University to review the reporting arrangements for delegated centre collaborative provision to enable the chain of reports contributing to annual monitoring to be completed within a timescale appropriate to providing management information and to exploiting the potential for enhancement gained from the earlier availability of overview reports.

58 With regard to reports from verifiers, the audit team found these, in general, to be informative, constructive and thorough. It also noted the recent move to standardise their format, for ease of analysis, through the introduction of a report template, recognising that this was likely to be more efficient where overview reports were concerned. From discussions with staff and students during partner visits, the team was able to corroborate the utility of the verifier role, which it also considered would be invaluable in assisting delegated centres to embrace the new arrangements for quality management and monitoring, based in schools. Therefore, the team identifies as a feature of good practice, the effectiveness of the verifier system in seeing that the University's quality assurance requirements are met by its partners, while also incorporating a role to advise partners on how best to meet these requirements and enhance the quality of provision.

Periodic review

59 The pending expiry of a collaborative agreement triggers a periodic review which, subject to a successful outcome, decides the basis for renewal of the agreement for a further fixed period. As with approval, the University's processes for periodic review distinguish between the collaborative arrangement and the individual programmes that it covers. The first stage is authorisation by the relevant college management team that the partnership continues to meet strategic and business requirements.

60 In the case of school-based collaborative provision, the review of the collaborative arrangement encompasses both the local operation of the programmes and the support given by the school. The review process essentially mirrors the approval process and the type of review event and supporting documentation is determined by the same factors, with CASQ providing advice. The review of the programmes themselves is covered by the separate in-house arrangements for subject review, whereby programmes within

each school are reviewed every six years. The institutional audit confirmed that this process was sound and incorporated an appropriate degree of externality through input from external advisers and use of external reference points. However, there had been a recommendation relating to the practice adopted by some schools of sampling programmes for inclusion in the review, which the University had addressed by stipulating a minimum sample size, specifying a limited documentation set for any programme omitted from the sample and requiring any such omitted programme to be selected next time round. Separately, through re-specification, the detailed documentation of programmes and their component modules has been reviewed in the context of the exercise to standardise the production of programme specifications (see paragraph 86 below).

61 In the case of delegated centre collaborative provision, periodic review has two discrete focuses, the centre and the programme. The review of the centre, which concentrates on the learning environment, organisational structure and quality management systems, is followed by consideration of all component programmes and locations of delivery. Periodic review normally involves a panel visit to the delegated centre, although again CASQ provides advice on the type of event and the documentation required. The scale of programme review takes account of how long programmes have been running and also brings their approval cycle into line with that of the centre.

62 Periodic review reports culminate in a recommendation concerning re-approval - unconditional, conditional or denied - and may commend good practice and make recommendations for action. Reports on school-based collaborative provision are considered by both SQM and ASQC, whereas under the transitional arrangements for approving review outcomes and tracking subsequent action, reports on delegated centre collaborative provision are currently considered by DCP and ASQC, with the intention that DCP's role is eventually replaced by SQM.

63 According to the CPSED, the same basic principles apply to the periodic review of both categories of collaborative provision and the essential purpose is the same - namely, to satisfy the University that 'the collaborative arrangement is in good health, that the academic standards of awards are appropriate and that there is an equivalent student learning experience to home-based students'. Periodic review considers evidence from all stakeholders - the University, the partner, students and employers. While stating that most collaborative provision is successfully reviewed and approved, the CPSED gave examples where reviews had not resulted in the intended outcome, such as that of a delegated centre which, despite a positive review of its delivery of the first two years of a degree programme, was not given approval to operate the third year, since the centre's programme team was considered to be insufficiently experienced.

64 The audit team drew similar conclusions from periodic review reports as it had from reports on approval events. The thoroughness of processes was evident and aptly illustrated through a case-study of a recent periodic review of a delegated centre and its constituent programmes. There was detailed and timely scrutiny of review reports by SQM or DCP, as applicable, and systematic follow-up of recommendations by means of tracking documents. In respect of the practice of sampling, the team would suggest that the higher risk associated with collaborative programmes might justify their inclusion in every cycle of subject review - a point that it later makes in relation to collaborative programmes delivered by flexible and distributed methods (see paragraph 116 below).

Conclusion

65 In the CPSED, the University made numerous references to the value of the 'iterative support' provided by CASQ in the effective operation of key quality assurance processes. The audit team would agree with this general view and identifies as a feature of good practice the work of CASQ in providing comprehensive guidance notes and training for

partners to supplement the clearly specified procedures for approval, monitoring and review of collaborative provision within the ASQH.

External participation in internal review processes for collaborative provision

66 According to the CPSED, the University tries to include two external participants in the membership of approval and review panels. These are chosen for various reasons, including subject or professional expertise, knowledge of UK higher education or specifically collaborative provision, or familiarity with the education sector or country relevant to the particular arrangement. The CPSED gave several illustrations of how the attributes of external panel members were matched to the requirements of the event. There were also occasions where staff from other partner organisations filled the role of an external panel member, bringing firsthand experience of the University's approach to collaborative provision.

67 In the CPSED, the University expressed the view that it would be 'impractical' to provide training for external panel members prior to their participation in an event, because of their other commitments and diverse locations. However, external panel members are briefed on their roles and responsibilities by CASQ, which has produced guidance notes for this purpose, in addition to the general guidance on approval and review processes. In the case of delegated centre collaborative provision, one of the areas for exploration by panels is the degree of externality in the centre's own quality management processes. In-house approval and review processes for programmes which form part of school-based collaborative provision were found in the institutional audit to include an appropriate level of input from external academic specialists and representatives from industry or the professions. In the CPSED, the University stated that it was 'satisfied with the contribution of externals to the review process, believing their impartiality and expertise adds another element to the robustness of the process'.

68 The audit team considered that the composition of panels included members from a suitably broad range of backgrounds so as to provide a perspective from outside the immediate subject area, as well as one that was independent of the University. From its discussions with staff, it was clear to the team that the practice of extending membership of approval and review panels to staff from other partner organisations was seen as valuable by the University and partners alike, and the team would endorse this as an effective mechanism for both staff development and the dissemination of good practice. Reports on approval and review were indicative of focused but detailed discussion taking place at panel events; they also aptly illustrated how partners had utilised inputs from external sources, such as external examiners, professional and statutory review bodies (PSRBs) and employers in their own processes. In addition, the team noted that all but minor modifications to collaborative programmes involved approval by committees other than the programme committee and drew on advice from relevant external examiners where appropriate. Overall, the audit team found that the University used external advice constructively and that externality in approval and review processes was strong and scrupulous.

External examiners and their reports in collaborative provision

69 The University requires that all award-bearing programmes have at least one external examiner, whose principal functions are to monitor academic standards and the moderation of assessment tasks and processes. External examiners are obliged to attend meetings of the board of examiners, particularly where final awards are being agreed, and to submit an annual report, produced according to a template. The first part deals with the appropriateness of standards set, the comparability of student performance with that on similar programmes in other HEIs and the soundness of assessment and examination processes. This forms the basis of the requisite summary published by the University on the

Teaching Quality Information (TQI) website (see paragraph 130 below). Reports are due for receipt by CASQ within four weeks after the board of examiners' meeting and the majority are now submitted electronically. They are circulated to the Vice Chancellor and named contacts within the school or delegated centre, as appropriate, to enable any issues requiring immediate attention to be dealt with. As part of annual monitoring, programme teams address the points in external examiner reports through PSQRs and resultant action is reported back to external examiners, who receive a copy of the PSQR, or appropriate extracts from it. These arrangements are fully documented in the ASQH, with further guidance issued by CASQ.

70 External examiners must be independent of the University, the partner and the programme. They are appointed by the University's Academic Board, although in the case of delegated centre collaborative provision, this is done on the basis of nominations from the centre. Where a programme is delivered overseas in a language other than English, the normal requirement is for the external examiner to have the necessary language skills, but where this is not the case, there must be sufficiently robust translation arrangements. Where a programme is offered in-house and through a school-based collaboration, the same external examiner is normally appointed to cover both. The administration of the appointments process is the responsibility of CASQ, which also organises (jointly with schools) induction for external examiners, except for those appointed to delegated centre collaborative programmes, where induction is primarily the responsibility of the centre, although the verifier may provide assistance.

71 At institutional level, ASQC maintains an overview of external examiner reports. It receives SSQRs, which contain an analysis of external examiners' comments across each school, covering both in-house and school-based collaborative provision; it also receives a report produced by CASQ specifically dealing with external examiners' comments across all schools. For delegated centre collaborative

provision, there is a parallel process whereby external examiner reports are considered together with the relevant PSQR, first by DCP and then by ASQC. An overview of external examiner reports by delegated centre is subsequently produced by CASQ and this is considered through the same committee route. At the end of the period of transitional arrangements, DCP's role will pass to SQM.

72 Feedback from external examiners on the information, preparation and guidance they received indicated that appointment and induction arrangements were generally working well for both categories of collaborative provision. However, the audit team understood from partner visits and reading documentation that delegated centres sometimes experienced difficulties in finding appropriately qualified persons to nominate for the role, resulting in instances of delay to appointments, leaving little time for preparation for the role. In one delegated centre, this was explained by there being rather limited networks with staff in other UK HEIs, while in another, it was attributed by the University to the absence of an established external examining system in the relevant countries. There was also a recent case of a nominee who seemed to the team not to have the degree of independence from the delegated centre stipulated in the ASQH (although the team acknowledges the efforts made by DCP to clarify the precise nature of the candidate's involvement with the centre).

73 A related issue, which the audit team considered would be thrown into sharper relief once schools took on responsibilities for delegated centre collaborative provision, was that some awards offered through these arrangements had titles identical to awards offered through in-house or school-based collaborative programmes, yet used different external examiners. In the team's view the potential for disparity in the external scrutiny of same-named awards was not balanced by the existence of any clear mechanisms for monitoring comparability or sharing good practice.

74 With regard to the small number of programmes not assessed in English, the audit

team noted that in one delegated centre there was evidence that some external examiners were using the local education system as the frame of reference rather than that of the UK. While in practice this was overcome by having a chief external examiner with substantial experience of UK higher education, who was effectively acting as a moderator to bring results into line with UK standards, the tenure of the chief external examiner was coming to the end and the team was aware that the role might not be replaced. Therefore, in relation to programmes where the language of assessment is not English, the team considers it desirable for the University to make it explicit that the arrangements for external examining and moderation must involve examiner(s) with appropriate experience of standards in UK higher education, in addition to fluency in the relevant languages. This would reinforce the University's expectation, stated in the ASQH, 'that the external examiner team will include at least one examiner with experience of UK higher education'.

75 Notwithstanding the above recommendation, the audit team saw evidence through a case-study of a school-based collaborative arrangement of extremely thorough processes in operation. These involved the use of both moderators and an external examiner who were all bilingual and currently working in UK HEIs. The team was also informed that the appointment of bilingual moderators to second mark scripts would be formalised as a condition of approval for any further school-based collaborative delivery in a language other than English. The team identifies as a feature of good practice the effective use of UK-based bilingual moderators in the assessment process.

76 With regard to the submission of external examiner reports, the audit team was of the view that there was an issue of timeliness in the case of reports for delegated centre collaborative provision. For example, several reports on 2003-04 activity from a small number of delegated centres were still listed as outstanding as at June 2005. However, the

team recognised that the full implementation of electronic submission of external examiner reports, in connection with uploading summaries onto the TQI website, would now provide a useful mechanism for tracking receipt of reports, including those relating to delegated centre collaborative provision.

The use made of external reference points in collaborative provision

77 As stated in the CPSED, 'broadly speaking [the University] aims to ensure that its collaborative provision demonstrates use of the Academic Infrastructure by its embodiment in the ASQH'. The potential of the ASQH for achieving 'more consistent implementation at local level' of quality assurance procedures was recognised in the institutional audit. In direct response to the audit, subject review procedures have since been refined with the aim of ensuring that all programmes are compared and aligned with appropriate external reference points with sufficient regularity and frequency. The resultant changes to procedures were confirmed in the CPSED as having 'equal currency for collaborative provision'.

Code of practice

78 As a result of the mapping of the University's policies and procedures against the *Code of practice*, most of its sections are now reflected in the ASQH with explicit referencing to the *Code*, where appropriate. Policies and procedures relating to students with disabilities and to careers education, information and guidance, which are not included in the ASQH, reside instead within the website areas of the relevant University services. The CPSED clarified that the publication of the revised section of the *Code* on collaborative provision, which now incorporates FDL, had led to a redrafting of the section of the ASQH on collaborative provision and the addition of FDL guidelines (see paragraph 113 below). The audit team noted the assiduous attention that had been paid to aligning the policies and procedures in the ASQH with relevant sections of the *Code of practice*. Nevertheless, it considered that certain

areas in relation to collaborative provision were not adequately covered.

79 First, the policy on collaborative provision, while including an objective of ensuring 'the University is fully cognisant of all its collaborative relationships', makes no statement on the University's position with regard to having an authoritative record of these relationships as part of its publicly available information. Staff who met the audit team explained that, after further development of the University's website, information on its partnerships would be published, although those deemed 'commercially sensitive' would be excluded. The team would encourage the University, as it moves to making information on partnerships publicly available, to give due consideration to the explanation put forward in the *Code of practice* for conducting activities openly when establishing the criteria for non-disclosure.

80 Second, with respect to certificates and transcripts, while there is a clear statement in the ASQH of the University's responsibility for producing award certificates, there is no such statement about transcripts. Senior staff clarified that the University produced transcripts for students on school-based collaborative programmes, but that delegated centres produced transcripts independently for their own students (see paragraph 102 below), without University involvement or checking. Given the importance of these documents, the team considers it advisable for the University to implement measures for exercising appropriate oversight of transcripts issued by partners on its behalf.

81 In addition, there were several procedural issues where the team considered improvements could be made in the context of the section of the *Code of practice* on collaborative provision. These are dealt with fully elsewhere in the report, but relate to the signing of collaborative agreements, external examining arrangements for programmes assessed in languages other than English, and the checking of promotional material produced by partners.

FHEQ

82 The CPSED explained that the University's Undergraduate and Postgraduate frameworks had been reviewed in the light of the FHEQ, when the opportunity was taken to modify some aspects of these frameworks to ensure that all awards were defined in terms of outcomes and level descriptors congruent with those of the FHEQ. The University's policies with respect to both undergraduate and postgraduate awards are set out clearly in the ASQH and references are made to the FHEQ in the context of assessment, including that for collaborative provision, and placement learning. Through partner visits, the audit team was able to verify that staff were aware of the Academic Infrastructure and made use of its various elements, including the FHEQ. This was also true of a number of partner organisations overseas.

Subject benchmark statements

83 The CPSED stated that for those parts of the University's provision covered by subject benchmark statements, these were used as reference points in programme approval, monitoring and review, and were consequently 'an integral part of school-based collaborative provision'. The CPSED also pointed out that a large number of programmes were subject to other forms of externality, for example, where no subject benchmark statement existed, or where differences in culture or discipline might make them less relevant, as in the case of delegated centre collaborative provision in overseas countries.

84 The audit team noted the references throughout the ASQH to the requirement for staff to make use of subject benchmark statements in quality assurance processes and that external examiners were directed by the report template to comment on standards in relation to the Academic Infrastructure, including subject benchmarks. The team also saw evidence of other forms of external benchmarking, such as accreditation or recognition by PSRBs or national governments (see paragraph 91 below).

Programme specifications

85 The CPSED pointed to the substantial progress that had been made in the development of programme specifications for publication; these had been developed in a common format enabling consistency of presentation and ease of access by means of the TQI website (see paragraph 130 below). The ASQH contains detailed guidance on the content of programme specifications which, according to the CPSED, were developed 'with the needs of the student user in mind'. The programme specification is included among the documentation required for programme approval.

86 The audit team shared the University's view that considerable momentum had been generated by the re-specification exercise since the institutional audit. The audit report commented that subject areas had not 'produced programme specifications according to any format or timescale', whereas the University now has in place a standard template which is consistent with QAA guidelines for preparing programme specifications. Also, the re-specification of both in-house and school-based collaborative programmes, which has occupied a considerable proportion of committee time, is on target for completion in the current academic year. It was explained to the team that re-specification was on the agenda for the Delegated Centre conference in September 2006, with a view to supporting partners through the process during the coming academic year. This approach is consistent with the University's usual practice of implementing changes internally and then introducing them to partner organisations, for example through this biennial conference.

Summary

87 Having considered a range of documentation, and after discussions with staff and students, the audit team concluded that the University was engaging with relevant external reference points through its internal quality management procedures, and that partner organisations were apprised of its approach to the Academic Infrastructure. The team was assured that arrangements were in

place, notably through CASQ, to identify and respond to changes in the various elements of the Academic Infrastructure as they arose.

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

88 At the time of the audit, there had not been any recent QAA review reports on the University's collaborative programmes. Therefore the CPSED focused on accreditation by PSRBs and overseas external agencies, giving examples from both school-based and delegated centre collaborative provision. It also pointed to a probable increase in accreditation by external agencies, arising from the development of masters programmes with its European partners, in the context of the 'Bologna agreement'.

89 The CPSED acknowledged that accreditation of a programme was beneficial to student recruitment and that the viability of some collaborative programmes depended upon their obtaining accreditation, which then became a condition of approval. However, it also made clear that the University's approval and review processes were 'entirely separate to those of any of the relevant accrediting bodies'. It further clarified that, even where approval or review events were carried out jointly with external accreditation agencies, the panel ensured the focus remained on compliance with the University's policies and procedures.

90 Using a central database, CASQ maintains a register of PSRB accreditation arrangements across schools, which it intends to use to produce an overview report. The register includes programmes offered through school-based collaborative arrangements, although the partner organisation is not identified. Reports on PSRB accreditation reviews are dealt with at school level through programme committees and SASQCs. Delegated centre collaborative programmes are not included in the register and the reporting route for information on their accreditation or on local recognition arrangements is currently through DCP.

PSRB reports, where available, form an input to annual monitoring for both categories of collaborative provision.

91 The audit team saw several examples in committee minutes of detailed reporting on approval and review events which included references to accreditation. These illustrated both the use made of accreditation requirements as reference points for programme specifications and the careful separation of the University's priorities from those of the PSRB in joint approval events. The team was also able to track the monitoring by institutional committees of responses made to PSRB requirements at local level. It therefore concluded that the University was maintaining appropriate oversight of the status of its collaborative programmes in respect of PSRB accreditation.

92 The audit team noted that for delegated centre collaborative provision, details of PSRB and local accreditation or approval arrangements were routinely collected by CASQ. Together with the data on school-based collaborative programmes, this gave the University a comprehensive record of the accreditation status of its collaborative programmes and therefore the means to make this clear to prospective students. The same information would also contribute to the planned overview report, which would, in the team's view, enable the University to gain maximum benefit from the recognition and feedback it obtains from accreditation and review by external agencies, particularly given the likely expansion of this activity.

Student representation in collaborative provision

93 A requirement for all the University's approved programmes is that there should be a programme committee, which should include students in its membership and have student feedback as a standard agenda item. For students on collaborative programmes, the programme committee provides the link, through their representatives, with the University's quality management processes.

Within annual monitoring, the PSQR is considered by the programme committee at an early stage of the process. It also contains a summary of student evaluations (see paragraph 98 below), which the CPSED explained would sometimes be in the form of information collected by student representatives. The programme committee also undertakes the preparations for periodic review, the formal agenda for which includes the nature of student representation. As part of the process, the panel meets a student group to investigate the effectiveness of student representation at programme level, and also at other levels, in the case of delegated centres.

94 The CPSED acknowledged that there was 'inevitably some variability' in the way students were represented across the University's collaborative programmes, particularly since delegated centres had discretion over their particular arrangements. However, the CPSED drew attention to the role of DCP in analysing the various annual monitoring reports on delegated centre collaborative provision against the University's requirements, and to the fact that any issues, including any relating to student representation, would be raised with centres, leading to recommendations for action.

95 Through partner visits, the audit team met several groups of students, who were generally positive about local mechanisms for obtaining their views and for responding to their concerns. The team noted that in many cases, student representatives, and sometimes whole student cohorts, met with verifiers during their routine visits and with other staff making occasional visits, thus giving students a direct line into the University. From documentation, the team was able to confirm that there were student members on programme committees and that these committees dealt effectively with student-related issues. PSQRs incorporated student evaluations, signifying that the main link with the University's quality management processes was operating as intended; there was also evidence of systematic student involvement in periodic review.

96 The audit team understood that the University, in conjunction with NTSU, was exploring the feasibility of establishing formal representation for students on collaborative programmes through NTSU. The possibility of appointing an officer with this brief was being investigated, although the level of student demand for this type of representation had yet to be established. The team learned that another initiative under discussion was to extend the NTSU in-house training for programme representatives to those from partner organisations, and it considered this to be a promising development.

97 The audit team recognised that collaborative provision presented particular challenges in seeking to ensure that the 'student voice' reached the awarding institution. It therefore identifies as a feature of good practice the active encouragement given to achieve effective student representation in partner organisations, particularly through student membership of programme committees.

Feedback from students, graduates and employers

98 According to the CPSED, all partner organisations are required to adhere to the University's general policy on student evaluation of programmes, as laid down in the ASQH. This specifies the type of evaluation to be conducted at various points throughout the academic year and the information to be gathered at module and programme level. The precise form the evaluation should take is normally left up to programme teams, although there are suitable warnings about survey fatigue and suggestions for other methods of evaluation. Further feedback is obtained through student representatives on programme committees. The analysis of all this feedback is incorporated into the annual PSQR. Students, through their participation in approval and review events, give their views on the feedback mechanisms employed and also on how effectively they are informed of resultant action.

99 In recent years, the University has relied on informal feedback from its graduates as it developed an alumni database. The register of alumni includes graduates from collaborative programmes, many of whom regularly attend events organised by the University worldwide. The CPSED indicated that graduates from collaborative programmes had participated in partner approval and review events as members of student groups. It also commented that many delegated centre partners were extremely active in eliciting the views of graduates.

100 The majority of the University's collaborative provision is vocationally oriented and, with approximately 60 per cent of students on collaborative programmes studying part-time while in employment, there is necessarily substantial engagement with employers. Apart from the feedback that is generated from such interaction, the views of employers (and PSRBs, where relevant) are sought in programme development and obtained in approval and review, through inclusion of their representatives on panels for these events. In addition, subject review, which includes school-based collaborative programmes, involves a meeting between the panel, employers and graduates, although the CPSED acknowledged that for 'economic and practical reasons', there had, as yet, been no participation by graduates of collaborative programmes.

101 The audit team considered that the University demonstrated a healthy regard for obtaining and building upon feedback on its programmes. Having read a wide range of PSQRs and review reports and having discussed the topic of feedback with student groups representing a variety of collaborative programmes, the team concluded that students' views were regularly sought, and listened to, in quality assurance processes. On a point of detail, the team noted that the section of the ASQH on collaborative provision did not explicitly refer to the section on student evaluation, which the University may wish to address. In addition, there was considerable evidence of employer involvement in collaborative provision, corroborating the

statement in the CPSED that 'the views of employers are taken seriously and firmly embedded in [the University's] procedures'.

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

102 For school-based collaborative provision, the University maintains detailed student records on its central record system. For delegated centre collaborative provision, student records are kept on local systems, with only a basic enrolment record being held by the University. Similarly, records of student assessment, including mark profiles, are maintained locally, although the University receives progression data as a means of updating its records. Delegated centres are responsible for producing transcripts of student results.

103 As specified in the ASQH, within annual monitoring, programme teams are required to comment in their PSQRs on student statistics relating to intake, progression, completion and achievement. These statistics and the use made of them in informing strategies and policies are also scrutinised through the respective periodic review processes for school-based and delegated centre collaborative provision on which the continuation of partner approval is based.

104 The CPSED indicated that since the institutional audit, and in line with one of its recommendations, progress had been made with improving both the quality and utility of centrally-held data through the ongoing Programme Database project. One illustration given was the introduction of an overview report on progression and completion data for consideration by ASQC, to supplement the overview of SSQRs. The CPSED admitted that the quality of statistical reporting from delegated centres varied widely, but it pointed to recent improvements since centres had adopted the standard PSQR format in 2004-05.

105 With regard to school-based collaborative provision, the audit team saw examples of appropriate treatment of statistics within

individual PSQRs. However, the team noted that subsequent summaries of these reports did not make comparisons between different locations of delivery. For instance, the SSQR for the School of Education, while thorough in its evaluation of progression across the School's collaborative activity, did not compare the data for different locations delivering the same programme. Also, the overview report to ASQC did not distinguish between in-house and school-based collaborative programmes. It appeared to the team that potentially useful detail was therefore being lost in the reporting of statistical information through the various levels of the annual monitoring process.

106 With regard to delegated centre collaborative provision, the audit team noted the variability in reporting on data (acknowledged in the CPSED), finding some reports extremely thorough, but others lacking in any meaningful analysis of the statistical information provided. However, the team also noted that DCP was addressing the issue with the particular centres concerned. The team appreciated that, given the variability in data, DCP did not produce a statistical overview report or attempt any comparison of data across centres.

107 The audit team recognised the achievements of the Programme Database project in realising significant and sustained improvements in the datasets available for monitoring purposes. Staff meeting the team confirmed that considerable progress had been made and they were confident that further improvements would be forthcoming. As a next stage, the team would encourage the University to develop the reporting potential of its student records system to allow comparisons to be made across the range of statistics between equivalent programmes delivered at different locations.

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

108 While the University is not involved in the appointment of staff to its partner organisations, it is instrumental in determining their suitability

to teach on its collaborative programmes. Staffing is a key area of investigation in partner and programme approval processes, from the perspective of both the quality of teaching and the adequacy of the resource base. Curriculum vitae (CVs) of relevant staff are required as part of the documentation for approval, normally in advance of the event, but otherwise as a condition of approval. Partner organisations must demonstrate that they have a culture and ethos in keeping with UK higher education. For school-based collaborative provision, an essential factor is the capacity of the partner to provide a learning experience for its students comparable to the experience of in-house students. For delegated centre collaborative provision, the focus is on the centre's own staffing policies and how these work in practice to assure the quality of its teaching staff.

109 After approval, partners with school-based arrangements are required to supply the curricula vitae of any new teaching staff appointed to the programme; this is not the case for delegated centres, which have more autonomy, although there is provision in the collaborative agreement for the University to review the suitability of staffing on request. Appraisal of teaching staff is conducted according to the policies and procedures of the partner organisation and it sometimes involves formal observation of teaching by senior managers. The CPSED indicated that partners were encouraged either to adopt the University's policy on peer observation of teaching or to develop a suitable local policy.

110 The CPSED gave several examples illustrating the University's influence on staff development in partner organisations. These ranged from constructive discussions with a partner whom it considered was giving insufficient priority to staff development, to assisting with the development of approved training programmes leading to recognised qualifications in partner organisations overseas. Case-studies illustrated for the team how the University had provided teaching support and targeted staff development to certain partners after it had identified problems with teaching.

Other relevant initiatives included the selection of staff from partner organisations to act as members of approval and review panels, and the regular opportunities afforded to staff from partner organisations for visiting the University to familiarise themselves with quality management procedures.

111 The audit team considered that verifier reports, PSQRs and associated minutes provided a wealth of evidence of the level of attention being paid to staff development in routine monitoring and this was corroborated by the staff whom the team met through partner visits. The team also learned how much these staff valued the regular conferences organised for partner organisations - currently the biennial conference for delegated centres and the annual conference run by the Business School for its school-based partners. These were used as a vehicle for disseminating information on developments at the University and in UK higher education, and also as a forum for the discussion of pedagogic and related issues and the exchange between partner organisations of experiences and practice. The team further learned of plans to develop a dedicated area on the CASQ website for the use of partner organisations to facilitate 'online' sharing of good practice.

112 In summary, it was clear to the audit team that the University maintains an active and ongoing interest in a range of staff development activities for partner organisations, including those located overseas. The team saw the development of courses leading to recognised teaching qualifications as a particularly positive and practical form of partnership in staff development. It also identifies as a feature of good practice the organisation of regular conferences for partners which promote communication, discussion of common interests and relationship-building.

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

113 The University has a number of collaborative programmes that employ FDL

methods. In January 2006, new FDL guidelines were approved covering approval, monitoring and review, which incorporate a mapping of the University's procedures against the corresponding section of the Code of practice. As the CPSED indicated, these guidelines give emphasis to the 'additional attention that needs to be paid to [this] mode of delivery and to the content and format of the educational materials', in the application of the University's normal quality assurance processes. Specifically, documentation for approval and review must include a sample of the learning materials, while a demonstration of any e-learn system may be requested by the panel; if either of these is not available, the panel is advised to consider giving conditional approval, pending subsequent scrutiny of the materials and their delivery system. Also, arrangements for assessment, student support, and learning resources must fit the context of FDL delivery. In addition, the guidelines relating to annual monitoring reinforce an extant requirement for both PSQRs and SSQRs to include (where applicable) a separate section on the delivery of programmes by FDL.

114 At the time of the audit, the FDL guidelines had only just been introduced, therefore the audit team was unable to assess the effectiveness of their implementation. However, it appeared to the team that the guidelines would give more focus to the special features of FDL than was evident from records of past approval events. For example, the team noted that the University had recently been willing to approve the delivery of an existing FDL programme at a new location entailing the use of local tutor support and learning resources, by means of a paper-based exercise and a visit from a member of staff from the College to complete the requisite checklist. The team also noted that SSQRs currently gave little specific consideration to FDL, even where there was substantial collaborative provision of this type.

115 In discussion with staff the team was informed that verifiers would include the strengthened FDL guidelines in their advice to partner organisations on meeting the University's

quality assurance requirements. The team also learned that the University intended to apply the guidelines on review to existing provision only when review at the programme level next became due. For school-based collaborative programmes within schools employing sampling in subject review, this might mean that programmes using FDL would not be reviewed in detail, nor their learning materials exposed to external scrutiny, for some considerable time.

116 Given the extent of FDL within its collaborative provision, the audit team considered that the University had given limited priority to devoting it 'additional attention'. For instance, the University had been relatively slow in addressing the relevant recommendation in the institutional audit report and, having done so, the implementation was to take effect over a long time horizon. The team considers it desirable for the University to apply through its approval and review processes the recently issued FDL guidelines to all relevant programmes at the first opportunity. The team would encourage the University to extend the use of the guidelines (currently applicable to the approval of new programmes) to the approval of existing programmes for delivery at new locations, and, even where sampling is utilised, to ensure complete coverage of FDL programmes with full documentation at the next periodic review.

Learning support resources for students in collaborative provision

117 The University's learning resources are the responsibility of the central academic support department of Library and Learning Resources (LLR). Access to resources for students on collaborative programmes varies according to whether the provision is school-based or delegated centre and is dealt with in the relevant collaborative agreement. Students on school-based collaborative programmes have access to the entirety of the University's electronic information resources, including module materials on the virtual learning environment, although LLR does not offer services which it expects to be available locally,

for example interlibrary loans. Support for students on delegated centre collaborative programmes is described in the CPSED as 'still evolving'. Working within licensing restrictions, LLR has recently made available a subset of its key publications databases. Staff in partner organisations do not routinely have access to the resources made available to the students they teach, but work is underway to provide the necessary permissions and access rights.

118 Learning resources provision at the partner organisation is assessed in both partner and programme approval processes and it is subsequently checked through annual monitoring and periodic review. The CPSED explained that, while it was the intention of LLR to deliver support 'appropriate to specific needs, taking into account existing local provision and the nature of the programme', a standard checklist approach was used to ensure that access to library services was fully addressed and that there was parity between partners in the approved arrangements.

119 The audit team noted that, in general, collaborative agreements were not specific about the level of access to the University's resources, although they were explicit that the adequacy of the resource base would be a consideration in monitoring and review processes. Through PSQRs and related documentation, the team was able to track resources issues from the point they were raised to the point they were resolved, demonstrating the effectiveness of follow-up mechanisms. There were occasions when partner organisations were slow in implementing action and in this context the team noted the role of the verifier in facilitating two-way communication on resources issues. There were also instances of the exchange of learning materials or illustrative examples, to the benefit of curriculum development.

120 Students' views regarding LLR resources and their access to them, as expressed at partner visits, were variable. However, they confirmed that there were mechanisms for raising concerns through, for example, student representatives or questionnaire surveys, and that action was taken, even if issues were not

always fully resolved. The perceived need for improved access to the University's resources was highlighted by some students. Online access was a particular issue, but the audit team understood that this was often related to delays in the registration of students with the University, a point which the Programme Database project was looking into. Overall, the team concluded that the quality assurance of learning resources within collaborative provision was operating effectively.

Academic guidance and personal support for students in collaborative provision

121 Responsibility for academic guidance and personal (pastoral) support for students rests primarily with the partner organisation and is formalised in the collaborative agreement. This makes clear that the appropriateness of the partner's arrangements, as established at approval, will be subject to regular monitoring and review through the University's quality assurance processes. In keeping with the University's belief that there should be flexibility built into arrangements for student support, there is no requirement for students to have a designated personal tutor. This mirrors the position within the University itself, where the majority of academic guidance that students receive is channelled through module tutors and programme teams in the form of feedback on assessment and academic progress. Arrangements for pastoral support are assessed in terms of access to suitable facilities and referral mechanisms, and again there is a parallel with the University's arrangements for in-house students.

122 The CPSED stated that in addition to approval and review processes, alignment of support systems employed by partner organisations with in-house practice and procedures was reinforced by verifier visits and conferences. The CPSED also gave examples illustrating the University's influence on systems operating in overseas collaborations, including a mentoring scheme for work-based learning, targeted staff development on giving assessment feedback and making available to

students UK-based dissertation supervisors. It also cited instances of 'excellent practice' in the provision of pastoral support services among its collaborative partners.

123 The students who met the audit team through partner visits consistently spoke highly of the academic support and guidance they received, commenting on how arrangements were tailored to meet their specific needs; for example, students in local FECs particularly valued the small group teaching. Also, students who had progressed to the University from collaborative programmes attributed their successful transition to a more independent learning culture and style largely to the support they had received. Reports generated from annual monitoring and periodic review have consistently commended aspects of student support in partner organisations, while issues identified in PSQRs are carefully tracked until specified actions are recorded as complete. The team concluded that the University was exercising appropriate oversight of arrangements for student support and guidance within its collaborative provision.

Section 3: The collaborative provision audit investigations: published information

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

124 The main sources of information for students concerning the University's collaborative provision are the publicity materials aimed at prospective students and the programme and module handbooks provided once students join their programmes.

125 Partner organisations have responsibility for recruitment, although the University requires them to obtain its prior approval for the publicity of programmes leading to its awards, and this is stipulated in collaborative agreements. Since October 2005, responsibility for monitoring and approving the promotional

and marketing materials produced by partners has rested with colleges. There are currently plans to establish links from the University's website to partners' websites (subject to the information on the partnership being made publicly available), which would give greater transparency to the relationship between the University and its partners.

126 Student handbooks are also produced by partner organisations and, in addition, students on school-based collaborative programmes mostly have on-line access to the University Student Handbook, incorporating the Student Charter. Among the information contained in student handbooks are procedures for academic appeals and misconduct - the University's procedures apply to school-based collaborative provision, whereas delegated centres apply their own procedures, although students have a right of representation to the University. The provision of a student handbook, which is routinely kept up-to-date, is a standard condition of programme approval and according to the CPSED, the availability and quality of student handbooks is monitored by verifiers and by approval and review panels.

127 The audit team learned that there was no written policy on the monitoring of publicity materials produced by partners and some partners were unclear about the exact mechanism for checking being used by the University to meet the relevant stipulation in collaborative agreements. The team was informed that partner websites were scanned on a weekly basis, but from its own survey, it seemed that some quite obvious errors had been overlooked, particularly relating to the use of English on overseas sites. The team also noted that neither the guidance on the verifier role, nor the verifier report template, included specific reference to the monitoring of information. Past reports from verifiers did not necessarily deal with the issue either. The team therefore considers it desirable for the University to formalise the arrangements whereby partner-produced publicity and promotional material relating to the University is regularly checked by verifiers in the interval

between approval and review. Nevertheless, students were able to confirm from their experience of the programme that information they had accessed before enrolling had been accurate and reliable.

128 Through partner visits, the audit team had access to student handbooks for both categories of collaborative provision, and in all cases the essential elements were covered. The University was clearly identified as the awarding institution and there was comprehensive guidance on assessment requirements and criteria and on academic appeals. There was also information on students' entitlement to the University's learning resources. Students were positive about the handbooks, finding them both helpful and comprehensive.

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

129 The University has completed the mapping of its subject areas to the Joint Academic Coding System and has also nominated institutional contacts for the provision of teaching quality information. CASQ is responsible for the qualitative summaries, while Registry supplies the data to the Higher Education Statistical Agency upon which the quantitative summaries are based.

130 During the audit, staff gave a clear account of progress to date in relation to teaching quality information for collaborative provision. Summaries of external examiner reports have been published as they were received, while summaries of internal subject reviews, which include school-based collaborative provision, have been made available as the relevant reports were approved. The University views programme specifications as public documents and the audit team learned that, with the re-specification exercise nearing completion, the University intended to establish a link between the TQI site and its own website to allow these to be accessed. The University was also considering its position, in consultation with its partners, regarding making programme

specifications publicly available across the range of its collaborative provision involving private and overseas partner organisations.

131 From the documentation supporting partner visits, the audit team was able to compare the summaries of external examiner reports with the full reports on which they were based, finding the published information to be an accurate and reasonable representation of the main points. There were cases where critical comments were carried forward from the report into the summary, and, in general, the resultant action being proposed by the University to address external examiners' comments was pertinent to the issues raised. In relation to the summaries of subject reviews, the team appreciated that the integration of school-based collaborative provision with in-house provision meant that the former would not be given prominence, although it also recognised there was scope for specific comment on collaborative provision. Given the stage of development of the TQI website, summaries of periodic programme reviews for delegated centres were understandably not available.

132 Overall, the audit team considered that the University was alert to the requirements for publishing teaching quality information relating to its collaborative provision, as well to the issues still to be resolved, and was making good progress in fulfilling its responsibilities in this respect.

Findings

Findings

133 A collaborative provision audit of the University was undertaken by a team of auditors from QAA during the week 6 to 10 March 2006. The purpose of the audit was to provide public information on the quality of the programmes offered by the University through collaborative arrangements with partner organisations, 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. It concludes by identifying features of good practice that emerged from the audit, and by making recommendations to the University for improving on current practice.

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

134 The University currently categorises its collaborative provision as either school-based, that is aligned to provision within schools, or delegated centre, that is developed outside schools with the University providing a validation service. Its collaboration strategy (arising from the Strategic Plan, 2004-10) is encapsulated in the following guidelines within which the University strives to ensure an equivalence of learning experience for students across its total provision:

- the separation of function between the academic and business aspects of collaborative provision
- in respect of delegated centre collaborative provision, the development of fewer but more substantial partnerships which have a closer strategic fit with University provision
- alignment of the focus of collaborative provision with the University's regional agenda
- ensuring the business case fully reflects the direct and indirect costs of collaborative provision, alongside the risk involved.

135 The University is committed to adopting a unified approach to the management of collaborative provision, based in schools and covering both the current categories of provision; implementation of the revised arrangements began in October 2005. These give responsibility for the business aspects to heads of college, operating through executive structures, while quality assurance arrangements take the following form. Each approved programme has a programme committee with primary responsibility for the quality of the programme. SASQCs have responsibility for the management and monitoring of all collaborative programmes in their respective subject areas, submitting school overview reports to ASQC. Responsibility for approval and review lies with ASQC, operating through its sub-committee, SQM. These arrangements are already in place for school-based collaborative provision, but under transitional arrangements, the ASQC sub-committee, DCP, is continuing to operate in respect of extant delegated centre collaborative provision. At the end of the transitional period, it is envisaged that delegated centre collaborative provision will follow the same approval, monitoring and review processes as school-based collaborative provision.

136 The University's quality management procedures are contained in the ASQH (maintained by CASQ). This has recently been updated to reflect both the new and transitional arrangements for collaborative provision and to take account of revisions to the relevant section of the *Code of practice*, including its incorporation of FDL, which the University has addressed through the issue of specific guidelines. In relation to assessment, the University applies its Assessment Policies and Principles to collaborative provision, albeit within the context of local policies and regulations in the case of delegated centres. Common Assessment Regulations govern the University's awards according to level, and, while delegated centres are encouraged to develop local regulations, they are directed to the relevant University regulations for guidance on broad principles. For both categories of

collaborative provision, assessment practice is scrutinised in the approval process and the University has representation on boards of examiners.

137 Other mechanisms which the University employs for exercising an influence over its collaborative provision include the formal collaborative agreement, specifying the responsibilities of both parties, and the verifier, whose role is to ensure that the requirements of the collaborative agreement are met and to offer general advice and guidance about University processes. Administrative support for delegated centres remains with CASQ until the transfer of quality management to schools has been completed.

138 At the time of the audit, the transitional arrangements, which were originally envisaged to be needed only for 2005-06, were expected to continue into 2006-07. It appeared to the audit team that the new arrangements had been the subject of limited prior consultation and were insufficiently well developed before being formalised through incorporation in the ASQH. There was still considerable preparation required in schools for managing a mixture of school-based collaborative programmes and cognate programmes provided through delegated centres. Potentially this would entail dealing with a range of assessment regulations, separate external examiners and different arrangements for boards of examiners. In addition, there were operational issues to be fully addressed relating to absorption of the workload of DCP by SASQCs and assimilation of the CASQ support function for delegated centres into school administrative structures; there were also associated reporting issues to be resolved (see paragraph 189i below).

139 Notwithstanding the above comments, the audit team considered that the University had in place an effective framework for managing quality and standards, which, through transitional arrangements (to be retained as long as necessary), it was adapting to its revised organisational structure. This was significant in underpinning the team's conclusions with regard to the University's likely

future management of the quality and standards of its collaborative provision.

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

140 The University's quality assurance procedures for awards offered through collaborative arrangements, in addition to ensuring that it is fully cognisant of all its partnerships, are designed to fulfil the following purposes:

- to meet the standards of the University and, more broadly, those of UK higher education
- to align the University procedures with the relevant section of the Code of practice and with other elements of the UK Academic Infrastructure.

Approval, monitoring and review

141 Approval procedures distinguish between partner approval, concerned with the capability of the partner organisation to deliver or support the delivery of programmes leading to the University's awards, and programme approval, concerned with ensuring these awards are of an appropriate standard. The first stage of partner approval involves due diligence in respect of strategic fit, risk assessment and financial appraisal, for which responsibility resides with the colleges. Proposals successful at this stage are developed in detail by schools through an iterative process between the relevant SASQC and CASQ before going forward to a formal approval event, which may be either a panel visit or a paper-based exercise, as advised by CASQ. The involvement of SASQCs in new proposals for delegated centre collaborative provision became effective in October 2005.

142 For school-based collaborative provision, the focus of the approval event is on the proposed relationship between the partner organisation and the relevant school, whereas for delegated centre collaborative provision, the main priority is the ability of the centre to manage its academic policy development and

quality assurance processes, in liaison with the University. The suitability of teaching staff, the adequacy of the resources base and the appropriateness of arrangements for student support are all established at approval. Partner organisations must also demonstrate that they have a culture and ethos in keeping with UK higher education.

143 Reports on approval events are considered by SQM and ASQC, although under the transitional arrangements, any approvals in respect of delegated centre collaborative provision already in the system continue to be dealt with by DCP. Approval is always for a fixed period (typically five years) and collaborations are formalised by means of a collaborative agreement. This is not specific about requirements for staffing, learning resources and student support, but makes clear that these aspects will be subject to regular monitoring and review through the University's quality assurance processes. Where partners have multiple locations, each location is subject to separate approval.

144 For school-based collaborative provision, the procedures for programme approval and for modifications to programmes are directly equivalent to those used for the University's in-house programmes, which were found to be satisfactory by the institutional audit. For delegated centre collaborative provision, programme approval takes place within the context of the collaborative agreement, since partner approval has already confirmed the rigour of programme development procedures. In both cases, consistency with the University's assessment policies, principles and regulations is an important approval criterion. In January 2006, new FDL guidelines were approved. These specify that documentation for approval (and review) must include a sample of the learning materials, while a demonstration of any e-learn system may be requested by the panel. Also, arrangements for assessment, student support, and learning resources must fit the context of FDL delivery.

145 Annual monitoring of all the University's programmes, both in-house and collaborative,

is based upon the PSQR, prepared by the programme team under the headings of academic standards, the quality of learning, and overall subject health. The latter section draws on external examiner reports, student evaluation and internal and external programme reviews. For school-based collaborative provision, PSQRs are considered first by the relevant programme committee and then by SASQC. In turn, each SASQC produces an SSQR, summarising all the PSQRs for the school. An overview of SSQRs is prepared by SQM for consideration by ASQC. For delegated centre collaborative provision, annual monitoring is carried out by the centre itself. PSQR(s) are first considered by the delegated centre's Academic Board (or equivalent body) before being submitted, along with a record of the related discussion, to the University - currently to DCP, but after the transitional arrangements to the relevant SASQC and then to SQM. DCP also receives external examiner report(s) and an annual report from the verifier and produces an annual overview for consideration by ASQC.

146 The pending expiry of a collaborative agreement triggers a periodic review which, subject to a successful outcome, decides the basis for renewal of the agreement for a further fixed period. Periodic review considers evidence from all stakeholders - the University, the partner, students and employers. The first stage is authorisation by the relevant college management team that the partnership continues to meet strategic and business requirements. Thereafter different processes apply according to the category of collaborative provision, although the essential purpose is the same.

147 The review of school-based collaborative arrangements, which essentially mirrors the approval process, encompasses both the local operation of the programmes and the support given by the school. The review of the programmes themselves is covered by the separate in-house arrangements for subject review, whereby programmes within each school are reviewed every six years. This process was considered to be sound by the

institutional audit and to incorporate an appropriate degree of externality. The audit recommendation relating to sampling of programmes for inclusion in the review has since been addressed. Periodic review of delegated centres concentrates on the learning environment, organisational structure and quality management systems, and is followed by consideration of all component programmes and locations of delivery.

148 Periodic review reports culminate in a recommendation concerning re-approval - unconditional, conditional or denied - and may commend good practice and make recommendations for action. Reports on school-based collaborative provision are considered by both SQM and ASQC, whereas under the transitional arrangements for approving review outcomes and tracking subsequent action, reports on delegated centre collaborative provision are currently considered by DCP and ASQC, with the intention that DCP's role is eventually replaced by SQM.

149 The University tries to include two external participants in the membership of approval and review panels, chosen for their subject or professional expertise, knowledge of UK higher education or collaborative provision, or familiarity with the education sector or country relevant to the particular arrangement. External panel members are briefed on their roles and responsibilities by CASQ, which has produced guidance notes for this purpose, in addition to the general guidance on approval and review processes.

150 In the CPSED, the University explained that in respect of approval and review, the separation of the business from the academic aspects of collaborative provision had enabled it to 'identify the risks as well as the rewards' and to recognise the indirect as well as the direct costs. The University also stated that it was 'satisfied with the contribution of externals to the review process, believing their impartiality and expertise adds another element to the robustness of the process'. With particular reference to annual monitoring, the University explained that there were differences among

partner organisations in the pace of adoption of its recently revised quality assurance processes. However it drew attention to the role of the verifier in supporting local monitoring of collaborative provision, and to that of CASQ in guiding delegated centres through changes in University procedures. It also gave examples illustrating how it exerted influence on staff development, learning resources and student support in partner organisations.

151 It was evident that the University had developed robust processes for both partner and programme approval. The audit team was able to verify that due diligence was detailed and thorough, with guidance notes having been developed in the light of experience over a number of years. Recent approval events included at least one panel member external to the University, sometimes supplemented by a representative from one of the University's partner organisations. Minutes indicated that committees were thorough in their scrutiny of reports of approval events, although the team also found cases where conditions of approval were not fulfilled before programmes commenced. Specifically, collaborative agreements were not always signed by both parties, despite this being a condition of approval, and on a few occasions they remained unsigned for a considerable period after the programme had started (see paragraph 189ii below). However, in general the team found collaborative agreements to be comprehensive in their coverage and consistent with the relevant precept of the *Code of practice*.

152 The view of the audit team was that the requirements for annual monitoring were clearly set down in the relevant sections of the ASQH, which were supplemented by a series of guidance notes, including an exemplar PSQR. In general the team found PSQRs to be evaluative and the associated reports from verifiers to be informative, constructive and thorough. Through partner visits, the team was able to corroborate the utility of the verifier role, which it also considered would be invaluable in assisting delegated centres to

embrace the new arrangements for quality management and monitoring based in schools (see paragraph 188i below).

153 While it recognised the shortcomings in data reporting from delegated centres (see paragraph 167 below), the audit team also noted the level of attention being paid to staff development, learning resources and student support. There was evidence that PSQRs were given thorough consideration and that partner organisations were given feedback with requests for action. The team found that action points were followed up from one year to the next, with improvements occurring as a result, although there were examples, often concerning resources, which proved difficult to progress with some delegated centres. There were also instances where PSQRs from delegated centres were received by DCP some time after the period to which they related and the team also noted that the delegated centre overview report relating to 2003-04 was not available to DCP until December 2005 (see paragraph 190i below).

154 With respect to SSQRs, the audit team found these to be variable in their coverage of school-based collaborative provision and considered that this was not simply a function of the scale of such provision within a school. In addition, they currently gave little specific consideration to FDL, even where there was substantial collaborative provision of this type. Nevertheless, the SQM overview appeared to be an accurate summary of SSQRs.

155 As for partner and programme approval, the audit team found the process of periodic review to be thorough. The composition of panels included members from a suitably broad range of backgrounds so as to provide a perspective from outside the immediate subject area, as well as one that was independent of the University. There was detailed and timely scrutiny of review reports by SQM or DCP, as applicable, and systematic follow-up of recommendations by means of tracking documents.

Note: paragraph 155 relates to periodic review

156 The audit team understood that the University intended to apply the recently issued FDL guidelines to existing provision only when review at the programme level next became due. For school-based collaborative programmes within schools employing sampling in subject review, this might mean that programmes using FDL would not be reviewed in detail, nor their learning materials exposed to external scrutiny, for some considerable time. Given the extent of FDL within the University's collaborative provision, the team considered that there was the potential for implementation of the FDL guidelines to take effect over too long a time horizon (see paragraph 190iii below). More generally in relation to the practice of sampling, the team would suggest that the higher risk associated with collaborative programmes might justify their inclusion in every cycle of subject review.

157 Overall, the audit team concluded that the University's procedures for approval, monitoring and review were sound and clearly specified in the ASQH. The team would also endorse the University's view, expressed in the CPSED, concerning the value of the iterative support provided by CASQ in the effective operation of key quality assurance processes, particularly in relation to the provision of guidance to partners (see paragraph 188ii below). The regular conferences organised by the University for staff in partner organisations provide a further mechanism for the dissemination of information and the exchange of experience and practice; the team viewed these events within the broader context of the active and ongoing interest that the University displays in a range of staff development activities (see paragraph 188v below).

Feedback from students and other stakeholders

158 Partner organisations are required to adhere to the University's general policy on student evaluation of programmes, which specifies the type of evaluation to be conducted at various points throughout the academic year and the information to be gathered at module

and programme level. Further feedback is obtained through student representatives on programme committees, which are a requirement for the University's approved programmes. The analysis of all this feedback is incorporated into the annual PSQR.

159 For students on collaborative programmes, the programme committee provides the link, through their representatives, with the University's quality management processes. Within annual monitoring, the programme committee considers the PSQR at an early stage of the process, and it also undertakes the preparations for periodic review. Students, through their participation in approval and review events give their views on the feedback mechanisms employed and on how effectively they are informed of resultant action, as well as on the nature and usefulness of student representation. In recent years, the University has relied on informal feedback from its graduates as it developed an alumni database, although graduates have been involved as members of student groups in approval and review events.

160 The majority of the University's collaborative provision is vocationally oriented and there is necessarily substantial engagement with employers. Apart from the feedback that is generated from such interaction, the views of employers and PSRBs, where relevant, are sought in programme development and obtained in approval and review, through inclusion of their representatives on panels for these events. In addition, subject review involves a meeting between the panel, employers and graduates, although there has as yet been no participation from graduates of collaborative programmes. CASQ maintains a register of PSRB accreditation arrangements across schools, including programmes offered through school-based collaborative arrangements. Reports on external accreditation reviews form an input to annual monitoring for both categories of collaborative provision.

161 The University acknowledged that there was some variability in its systems for obtaining student feedback and organising student

representation, attributing much of this to the discretion given to programme teams or partner organisations over precise arrangements. However, it also pointed to the role of DCP in analysing the various annual monitoring reports relating to delegated centres and to the fact that issues would be raised as necessary, leading to recommendations for action.

162 The audit team considered that the University demonstrated a healthy regard for obtaining and building upon feedback on its programmes. Based on documentation and meetings, the team found that students' views were regularly sought, and listened to, in quality assurance processes. The team recognised that collaborative provision presented particular challenges in seeking to ensure that the 'student voice' reached the awarding institution, but concluded that student representation on programme committees was providing the intended link with the University's quality management processes (see paragraph 188iv below). In addition, there was considerable evidence of employer involvement in collaborative provision, corroborating the statement in the CPSED that 'the views of employers are taken seriously and firmly embedded in [the University's] procedures'.

Conclusion

163 The audit team found that the University used external advice constructively and that externality in its approval and review processes was strong and scrupulous. Reports on approval and review were indicative of focused but detailed discussion taking place at panel events; they also aptly illustrated how partners had utilised inputs from external sources in their own processes. These factors support the judgement of broad confidence in the capacity of the University to satisfy itself that the learning opportunities offered to students through its collaborative arrangements are managed effectively and meet its requirements.

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

164 The University's approach to securing the standards of its awards involves the monitoring of student achievement through analysis of statistical data and the utilisation of external examiners, whose principal functions are to monitor academic standards and the moderation of assessment tasks and processes.

Statistical data

165 The University maintains detailed student records for school-based collaborative provision on its central record system, but for delegated centre collaborative provision, student records are kept on local systems, with only a basic enrolment record being held by the University. Delegated centres also hold student assessment results and are responsible for producing relevant transcripts. Within annual monitoring, programme teams are required to comment in their PSQRs on statistics relating to student achievement and these are also scrutinised through periodic review.

166 The University indicated that progress had been made with improving both the quality and utility of centrally-held data through the ongoing Programme Database project. It admitted that the quality of statistical reporting from delegated centres varied widely, although it pointed to recent improvements since centres had adopted the standard PSQR format in 2004-05.

167 The audit team recognised the achievements of the Programme Database project in realising significant and sustained improvements in the datasets available for monitoring purposes and also noted the actions of DCP in tackling the variability of reporting by delegated centres. There were several examples of appropriate treatment of statistics within individual PSQRs. In relation to school-based collaborative provision, the team noted that subsequent summaries of these reports did not make comparisons between different locations

of delivery, and it appeared that potentially useful detail was being lost in reporting through the various levels of the annual monitoring process. The team would encourage the University to develop the reporting potential of its student records system to allow comparisons to be made across the range of statistics between equivalent programmes delivered at different locations.

The role of external examiners

168 All award-bearing programmes have at least one external examiner, who must be independent of the University, the partner and the programme. External examiners are appointed by the University's Academic Board, although in the case of delegated centre collaborative provision, this is done on the basis of nominations from the centre. Where a programme is delivered overseas in a language other than English, the normal requirement is for the external examiner to have the necessary language skills, but where this is not the case, there must be sufficiently robust translation arrangements.

169 External examiners are obliged to attend meetings of the board of examiners, particularly where final awards are being agreed, and to report annually on the appropriateness of standards set, the comparability of student performance with that on similar programmes in other HEIs and the soundness of assessment and examination processes. Reports are due for receipt by CASQ within four weeks after the board of examiners' meeting and are circulated to the Vice Chancellor and named contacts within the school or delegated centre to enable any issues requiring immediate attention to be dealt with. As part of annual monitoring, programme teams address the points in external examiner reports through PSQRs and resultant action is reported back to external examiners. At institutional level, ASQC maintains an overview of external examiner reports based on SSQRs (which summarise PSQRs across the school) and special reports prepared by CASQ.

170 Feedback from external examiners indicated that appointment and induction arrangements were generally working well for both categories of collaborative provision, although delegated centres sometimes experienced difficulties in finding appropriately qualified persons to nominate for the role. With regard to the small number of programmes not assessed in English, the audit team noted that in one delegated centre there was evidence that some external examiners were using the local education system as the frame of reference rather than that of the UK. Moreover, the tenure of the chief external examiner, who had brought substantial experience of UK higher education, was coming to the end and the team was aware that the role might not be replaced (see paragraph 190ii below). However, the team also saw evidence of extremely thorough processes in operation in a school-based collaborative arrangement. These involved the use of both moderators and an external examiner who were all bilingual and currently working in UK HEIs (see paragraph 188iii below).

171 Another point noted by the audit team was that some awards offered through delegated centres had titles identical to awards offered through in-house or school-based collaborative programmes, yet used different external examiners. In the team's view the potential for disparity in the external scrutiny of same-named awards was not balanced by the existence of any clear mechanisms for monitoring comparability or sharing good practice.

172 With regard to the submission of external examiner reports, the audit team was of the view that there was an issue of timeliness in the case of reports for delegated centre collaborative provision. However, the team recognised that the full implementation of electronic submission of external examiner reports, in connection with uploading summaries onto the TQI website, would now provide a useful mechanism for tracking receipt of reports, including those relating to delegated centre collaborative provision. Overall, the team

found the external examiner system to be sufficiently robust to support the judgement of broad confidence in the University's management of standards in its collaborative provision.

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

Code of practice

173 As a result of the mapping of the University's policies and procedures against the Code of practice, most of its sections are now reflected in the ASQH with explicit referencing to the Code, where appropriate. The University clarified that the publication of the revised section of the Code on collaborative provision, which now incorporates FDL, had led to a redrafting of the section of the ASQH on collaborative provision and the addition of FDL guidelines.

174 The audit team noted the assiduous attention that had been paid to aligning the policies and procedures in the ASQH with relevant sections of the *Code of practice*. Nevertheless, it considered that certain areas in relation to collaborative provision were not adequately covered. First, the policy on collaborative provision, while including an objective of ensuring 'the University is fully cognisant of all its collaborative relationships', makes no statement as to what information should be publicly available. However, having learned that it was the University's intention to exclude 'commercially sensitive' collaborations from information on its website, the team would encourage the University to give due consideration to the explanation put forward in the *Code of practice* for conducting activities openly when establishing the criteria for non-disclosure. Second, with respect to certificates and transcripts, while there is a clear statement in the ASQH of the University's responsibility for producing award certificates, there is no such statement about transcripts. The team learned that delegated centres produced transcripts for students on collaborative programmes

independently, without University involvement or checking, and considered that this approach did not reflect the importance of these documents (see paragraph 189iii below).

175 Other areas where the audit team considered that procedural improvements could be made in the context of the *Code* include the signing of collaborative agreements (see paragraph 151 above) external examining arrangements for programmes assessed in languages other than English (see paragraph 170 above), and the checking of promotional material produced by partners (see paragraph 185 below).

FHEQ

176 The University explained that its Undergraduate and Postgraduate frameworks had been reviewed in the light of the FHEQ, when the opportunity was taken to modify some aspects of these frameworks to ensure that all awards were defined in terms of outcomes and level descriptors, congruent with those of the FHEQ. The audit team found that within the University's policies for undergraduate and postgraduate awards references were made to the FHEQ in the context of assessment, including that for collaborative provision, and placement learning. Also, it was clear from partner visits that staff evidently were aware of the Academic Infrastructure and made use of its various elements, including the FHEQ.

Subject benchmark statements

177 The University stated that for those parts of its provision covered by subject benchmark statements, these were used as reference points in programme approval, monitoring and review, and were consequently an integral part of school-based collaborative provision. The audit team found references throughout the ASQH to the requirement for staff to make use of subject benchmark statements in quality assurance processes and noted that external examiners were directed by the report template to comment on standards in relation to the Academic Infrastructure, including subject benchmarks.

Programme specifications

178 The University further explained that programme specifications were now being developed in a common format, enabling consistency of presentation and ease of access by means of the TQI website. The new format was being used in the current re-specification of the University's provision. The audit team shared the University's view that considerable momentum had been generated by the re-specification exercise to put in place a standard template, consistent with QAA guidelines for preparing programme specifications. The team noted that the re-specification of both in-house and school-based collaborative programmes was on target for completion in the current academic year and that re-specification was on the agenda for the Delegated Centre conference in September 2006, with a view to supporting partners through the process during the coming academic year.

Conclusion

179 The audit team concluded that partner organisations were apprised of the University's approach to the Academic Infrastructure and was assured that arrangements were in place, notably through CASQ, for the University to identify and respond to changes in the various elements of the Academic Infrastructure as they arose.

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

180 The audit team considered the CPSED to be generally clear in its description of procedures for collaborative provision and to provide helpful references to relevant University documents. It related the University's response to the 2004 institutional audit to collaborative provision and also provided some critical commentary on quality management processes. However, there was limited consideration given

to the practical implications of locating the management and monitoring of all collaborative provision within schools. While relevant reporting structures, including transitional arrangements, were described in detail, there was little information on the preparations underway within schools for taking on responsibilities for delegated centre collaborative provision. Neither was the possibility discussed of retaining certain aspects of collaborative provision under central management. In these areas, which relate to the likely future management of the University's collaborative provision, the team found the CPSED to be less useful.

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

181 The University is pursuing its objectives for enhancement of the student learning experience within collaborative arrangements through re-specification of the portfolio of programmes on offer and through its processes for the selection and development of partners. The intention is to have fewer but more substantial partnerships that align with the University's strategic direction. In terms of quality management, the University identified the potential for enhancement to be derived from the full adoption by all partners of the more rigorous processes for approval, monitoring and review, introduced in 2003.

182 The University also pointed to measures for building on initiatives which it saw as successful - examples cited were the development of the training for verifiers and a shift to enhancement themes for conferences organised for partners once the new arrangements for quality management were better established. There were, in addition, developments at the University which were expected to flow through to collaborative provision, notably improvements in the student dataset for monitoring and review purposes resulting from the Programme Database project.

183 The audit team concluded that the concept of continuing improvement, derived from supporting partners to become more effective in their management of quality assurance processes, was evident in the University's approach, as was the importance it accorded to ensuring, as far as possible, equivalence between in-house and collaborative provision.

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

184 Partner organisations have responsibility for recruitment, although the University requires them to obtain its prior approval for the publicity of programmes leading to its awards, and this is stipulated in collaborative agreements. Since October 2005, responsibility for monitoring and approving the promotional and marketing materials produced by partners has rested with colleges. Student handbooks are also produced by partner organisations and, in addition, students on school-based collaborative programmes mostly have online access to the University Student Handbook.

185 The audit team learned that there was no written policy on the monitoring of publicity materials produced by partners and some partners were unclear about the exact mechanism for checking being used by the University. The team also noted that neither the guidance on the verifier role, nor the verifier report template, included specific reference to the monitoring of information. Past reports from verifiers did not necessarily deal with the issue either (see paragraph 190iv below). Nevertheless, students confirmed that, based on their experience of the programme, the information they had accessed before enrolling had been accurate and reliable. From its review of student handbooks, the team found that in all cases the University was clearly identified as the awarding institution and there was guidance on academic appeals.

186 With regard to the provision of teaching quality information, CASQ is responsible for the qualitative summaries, while Registry supplies

the data upon which the quantitative summaries are based. Summaries of external examiner reports have been published as they were received, while summaries of internal subject reviews have been made available as the relevant reports were approved. The University views programme specifications as public documents and intends to establish a link between the TQI site and its own website to allow these to be accessed.

187 The audit team found the summaries of external examiner reports to be an accurate representation of the full report and there were cases where critical comments were carried forward from the report into the summary. In relation to the summaries of subject reviews, the team noted that there was scope for specific comment on collaborative provision. Overall, the team considered that the University was alert to the requirements for publishing teaching quality information relating to its collaborative provision, as well to the issues still to be resolved, and was making good progress in fulfilling its responsibilities in this respect.

Features of good practice

188 The following features of good practice were noted:

- i the effectiveness of the verifier system in seeing that the University's quality assurance requirements are met by its partners, while also incorporating a role to advise partners on how best to meet these requirements and enhance the quality of provision (paragraph 58)
- ii the work of the Centre for Academic Standards and Quality in providing comprehensive guidance notes and training for partners to supplement the clearly specified procedures for approval, monitoring and review of collaborative provision within the Academic Standards and Quality Handbook (paragraph 65)
- iii the work of the Centre for Academic Standards and Quality in providing comprehensive guidance notes and training for partners to supplement the clearly specified procedures for approval,

monitoring and review of collaborative provision within the Academic Standards and Quality Handbook (paragraph 65)

- iv based on the case of a particular collaborative arrangement in which programmes are not taught or assessed in English, the effective use of UK-based bilingual moderators in the assessment process (paragraph 75)
- v the active encouragement given to achieve effective student representation in partner organisations, particularly through student membership of programme committees (paragraph 97)
- vi the organisation of regular conferences for partners which promote communication, discussion of common interests and relationship-building (paragraph 112).

Recommendations for action by the awarding institution

189 Recommendations for action that is advisable:

- i given the importance placed on there being a smooth and successful transfer of primary responsibility for the quality management and monitoring of collaborative provision to schools, to produce a clear schedule with allocated responsibilities for this process against which the transition can be monitored (paragraph 34)
- ii to take the necessary steps to ensure that collaborative agreements are signed before students are enrolled on the associated programmes (paragraph 48)
- iii to implement measures for exercising appropriate oversight of transcripts issued by partners on behalf of the University (paragraph 80).

190 Recommendations for action that is desirable:

- i to review the reporting arrangements for 'delegated centre' collaborative provision to enable the chain of reports contributing to annual monitoring to be completed

within a timescale appropriate to providing management information and to exploiting the potential for enhancement gained from the earlier availability of overview reports (paragraph 57)

- ii in relation to programmes where the language of assessment is not English, to make it explicit that arrangements for external examining and moderation must involve examiners with appropriate experience of standards in UK higher education, in addition to fluency in the relevant languages (paragraph 74)
- iii to apply through its approval and review processes the recently issued FDL guidelines to all relevant programmes at the first opportunity (paragraph 116)
- iv to formalise the arrangements whereby partner-produced publicity and promotional material relating to the University is regularly checked by verifiers in the interval between approval and review (paragraph 127).

Appendix

Nottingham Trent University's response to the audit report

The University welcomes the Agency's judgement of broad confidence in the academic standards of its programmes made through collaborative arrangements and in the quality of the learning experience offered to its students. This confirms the University's own view of the strength of its collaborative partnerships in the UK and overseas and the effectiveness of its quality assurance processes.

The University is pleased with the commendations of the Agency in respect of the support provided for its collaborative partners. The University is committed to building collaborative partnerships which are compatible with the objectives of its Strategic Plan. It will continue to develop the range of staff development opportunities available to its partners including regular conferences themed to meet their needs. Changes to the arrangements for the management of collaborative provision will be clearly specified and monitored. The intention is to pilot the proposed changes in one College and assess the impact. Any such changes will only be fully implemented if the University and its partners are assured of the benefits for overall collaborative provision and the student learning experience. The University will alter its Academic Standards and Quality Handbook better to reflect the actuality of practice with its collaborative provision. In particular this will ensure that the FDL guidelines become operational immediately for all relevant collaborative programmes. The University is pleased that the Agency recognises the good work carried out by the Centre for Academic Standards and Quality in this respect.

The University appreciated the engagement with the Agency and the audit team. It allowed it to demonstrate the robustness of its quality assurance processes and the quality of the partners with whom the University works. This involvement is built on a true acceptance of partnership in collaborative provision where both sides bring strengths to this relationship enabling a widening of opportunity and enhancement of the student learning experience.

