The University of Bolton

NOVEMBER 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 The University of Bolton (the University) from 20 to 24 November 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 United Kingdom (UK) where it met with staff and students.

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 responsiveness and support demonstrated by the University at all levels to its collaborative partners and students; from the initial proposal of new collaborative partnerships through to their implementation and operation

- the innovative use of the website to enable active participation by the collaborative partners in the annual monitoring process for the Postgraduate Certificate in Education/Certificate in Education.

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:

- to ensure that it has effective mechanisms in place for maintaining a complete and accurate record of each relationship within its collaborative provision portfolio so that appropriate institutional oversight can be applied

- to develop further its institutional strategy and policies regarding the use of languages other than English in the teaching, assessment and support of its collaborative programmes overseas

- to review the extent to which the interpretation and the implementation of its policies and procedures is appropriately consistent within departments and across all collaborative partnerships

- to ensure that any serious issues with respect to collaborative provision, and the University's response to these, are clearly recorded within the University's deliberative structures

- to put in place legally binding partnership memoranda that better protect the interests of the University and its students.

Recommendations for action that is desirable:

- to maximise the potential for enhancement by the appropriate coordination of systems and procedures for UK and overseas collaborative provision

- to review the Validation Handbook guidance to ensure an appropriate and consistent approach to external membership on approval and review panels

- to continue to enhance the provision and analysis of collaborative data sets to ensure their appropriate use at local and institutional levels

- to formalise a core definition for the link tutor role and ensure that appropriate staff development for the role is in place

- to strengthen its control over partners' use of publicity materials in both UK and overseas partnerships.

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 (TQi) 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 TQi for its collaborative provision.

Main report

Main report

1   A collaborative provision (CP) audit of the University of Bolton (the University) was undertaken from 20 to 24 November 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   CP audit is supplementary to 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 CP of an HEI with degree awarding powers (awarding institution) where such CP 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 CP; 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 United Kingdom (UK) where it met staff and students.

Section 1: Introduction: The University of Bolton

The institution and its mission as it relates to collaborative provision

4   The University traces its origins to the establishment of a Mechanics Institute in Bolton in 1824. Bolton Institute of Higher Education was formed in 1982 from the merger of Bolton College of Education (Technical), Bolton Institute of Technology and Bolton College of Arts. The Institute gained taught degree awarding powers in 1992, research degree awarding powers in 1995, and was granted University title in 2005.

5   The CP self-evaluation document (CPSED) emphasised the University's commitment to widening participation, progression and inclusion as well as to providing advanced continuing professional development. It has a strong regional focus and is engaged with the regional Aimhigher and the Greater Manchester Lifelong Learning Network. Part-time and work-based learning provision form a substantial part of the University's portfolio.

6   In 2005-06 the University had 113 postgraduate research students, 1,848 postgraduate taught students and 7,839 undergraduates. The University also has a small number of further education students. Of its higher education students, 51 per cent were part-time, 57 per cent were from the North-West of England, and 76 per cent were over the age of 21.

7   The University sees its CP, which has grown considerably in recent years, as an extension of its core activities and values, in particular its commitment to professional and work-related higher education. At the time of the audit, there were 857 students on programmes across 18 UK partners (mostly indirectly funded) and 1,262 students on programmes with nine overseas partners. Overseas collaborative activity is seen as an opportunity to transfer the expertise developed in the UK to the international arena by offering programmes that predominantly provide professional development for those in employment. In addition, it is seen as an

opportunity to raise the international profile of the University as an aid to recruitment. Of the UK-based collaborative students, 80 per cent study part-time, while 94 per cent of students studying with overseas collaborative partners are part-time.

8   UK-based CP comprises a range of awards and includes certificates, higher national certificates and diplomas, Foundation Degrees (FDs) and Postgraduate Certificate in Education/Certificate in Education (PGCE/CertEd). Most UK CP is based in Greater Manchester and the North-West, although the University is not averse to working across the UK. The overseas CP includes diploma, honours and master's degree awards. The University also has articulation agreements with three overseas partners.

9   Academically, the University is organised into 10 departments: Art and Design; Bolton Business School; Built Environment; Computing and Electronic Technology; Cultural and Creative Studies; Education; Engineering and Design; Health and Social Studies; Psychology and Life Sciences; and Sport, Leisure and Tourism Management. Each head of department is responsible for strategic planning and overseeing academic matters, largely through a board of studies.

10   At the time of the audit, a new strategic plan for the University had been developed. Although partnership was not mentioned explicitly in the narrative of the plan, the audit team was told that partnership is fundamental to realising the plan's vision of the University as a university of professionals committed to developing other professionals. Collaborative partnerships, UK and overseas, feature in the targets associated with the strategic goals.

Background information

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

- the draft report of the University and Shanghai University Institute of Higher Technology SongJiang Branch (SHUIHTSB), overseas partnership audit conducted by QAA, May 2006

- the report of the institutional audit, conducted by QAA, November 2005

- the report of a review of an FD in Health and Social Care, May 2005, conducted by QAA, offered by the University and in partnership with Greater Manchester Strategic Health Authority (SHA) and 13 health and social care providers throughout Greater Manchester

- the report of a Major Review of healthcare programmes conducted by QAA, in Nursing and Midwifery, March 2005, offered by the University in partnership with Cheshire and Merseyside SHA and Greater Manchester SHA.

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

- an institutional CPSED with appendices, dated 11 July 2006

- access to the University intranet

- documentation relating to the partner institutions visited by the audit team.

13   During the briefing and audit visits, the audit team was given convenient access to a range of the University's internal documents. The team identified a number of partnership arrangements that illustrated further aspects of the University's provision, and additional documentation was provided for the team during the audit visit. The team was grateful for the prompt and helpful responses to its requests for information.

The collaborative provision audit process

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

15   The students of the University were invited, through the University of Bolton Students' Union (UBSU) to contribute to the CP audit process in a way that reflected the current capacity of UBSU to reflect the views of students studying for the University's awards through collaborative partners. Officers from UBSU contributed to the development of the CPSED and also prepared a student written submission (SWS). The audit team was able to meet the President of UBSU and the Student Representation Coordinator at the briefing visit. The team is grateful to UBSU officers for their engagement with the process.

16   The audit team visited the University from 10 October to 12 October 2006 for the purposes of exploring with senior members of staff of the University, senior representatives from partner institutions, and student representatives from partner institutions, matters relating to the management of quality and academic standards in CP raised by the University's CPSED and other documentation, and of ensuring that the team had a clear understanding of the University's approach to collaborative arrangements. At the close of the briefing visit, a programme of meetings for the audit was agreed with the University. Additionally, it was also agreed that certain document audit trails would be followed relating to three overseas partnerships and six UK partnerships.

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

18   The audit visit took place from 20 to 24 November 2006, and included further meetings with staff of the University. The audit team is grateful to all those staff and students, both of the University and its partners, who participated in meetings.

19   The audit team comprised Ms P Boulton, Professor C Clare, Professor A Dugdale, Professor P Luker (auditors), and Mr I Pearson (audit secretary). The audit was coordinated for QAA by Mr M J Cott, Assistant Director, Reviews Group.

Developments since the institutional audit of the awarding institution

20   Prior to the institutional audit, QAA conducted two reviews of programmes that the University offers in collaboration with partners. More recently, QAA conducted an overseas partnership audit of the University's link with a Chinese partner. The outcomes from each review and audit were largely positive and the reports, together with the University's response, are considered in more detail below in paragraphs 99 to 100.

21   The institutional audit took place 12 months prior to the present CP audit. The report identified a number of areas of good practice and recommended advisable action in two areas and desirable action in two further areas. Many of these areas are relevant to the University's CP. All four recommendations have been considered by Academic Board's subcommittee, the Academic Quality and Development Committee (AQDC), and a number of initial actions in response were agreed.

22   The audit report advised the University to review the consistency with which policies and procedures are implemented by departments, particularly module evaluation and personal tutoring, and to reflect on the mechanisms for student representation. In response, AQDC agreed that departments should provide information on current practice in these areas, and that the Dean of Students should discuss arrangements for student representation with UBSU.

23   The audit report also recommended that it would be desirable for the University to achieve greater consistency of employer liaison in vocational programmes and develop an editorial policy for publishing material on the University website. In response, AQDC agreed that each department should provide a strategy statement regarding employer liaison, and that an editorial policy for the University website

should be produced. The audit team was informed that a new post was planned to oversee employer engagement and noted that the recently published Strategic Plan states that advisory boards of professionals to guide programme development will be created for every department by 2009.

24   While there has been limited time for the University to implement change, the audit team viewed evidence of these initial actions being followed up at a subsequent AQDC meeting. The team formed the view that the University was making an appropriate response to the recommendations of the institutional audit.

25   Since the institutional audit there have been some significant changes in both the executive and deliberative structures of the University. A new Vice-Chancellor has been in post since January 2006. The academic departments of Business Studies, Management, and Business Logistics and Information Systems were merged recently to form the Bolton Business School. The former associate deans have been redesignated as academic directors with a range of responsibilities, one of which is a new senior post of Director of Academic Partnerships and Widening Participation, reporting to the Pro Vice-Chancellor (Academic) (PVC (Academic)). The Director's role is to 'enhance the effectiveness of operational procedures underpinning CP in the UK, especially through the development and monitoring of academic, administrative and financial service-level agreements with partners'. The Executive Board of the University has been extended to include the new posts. Another recent appointment, to an existing post, is that of Director of International Relations who reports to the PVC (Strategic Planning and Communications) and whose role is to identify opportunities overseas and to support academic departments to initiate, develop and maintain international collaborative projects.

26   In terms of deliberative structures, the Collaborative Partnerships Working Group has recently been established and includes representation from UK partner organisations.

Its role is to enhance the effectiveness of operational procedures underpinning CP. There is also a recently established Partner Forum which brings together UK partner and University staff 'representing the spectrum of responsibilities to discuss any general or particular issues relevant to CP, share good practice, air concerns, and resolve problems'.

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

27   The University's CPSED stated that the key principle underpinning its arrangements for CP is that the University takes responsibility for the academic standards and quality of its awards, credits and programmes, no matter how or where delivery takes place, and whether or not some responsibilities are delegated to partners. CP is expected to adhere to the same standard framework and to follow the same procedures as University-based provision. These are supplemented where necessary by additional elements (see below paragraph 41) that are specific to the management of CP.

28   In Annex C to Development, Approval, Operation and Quality Assurance of Collaborative Provision, hereafter referred to as the 'CP Procedures Manual', the University identifies several categories or models of CP. These models describe the University's main collaborative arrangements. The models cited in the University's collaborative register and used for CP in the UK at the time of the audit were:

● Franchise: an arrangement where a partner delivers a University programme. ('Part franchise' describes an arrangement where a partner only delivers part of a University programme)

- Assisted Delivery: an arrangement where a partner is involved in the delivery of a University programme under franchise and where the programme is substantially delivered by University staff

- Validation: an arrangement where the University validates a programme delivered by a partner that leads to an award of the University. The programme may be designed by the partner, or by the University, or designed jointly.

29   The University's collaborative register categorises most overseas CP as 'off campus/distance learning'. This nomenclature is not used in Annex C, but the audit team was told that this is equivalent to franchise and assisted delivery. Also used in overseas CP is: credit recognition/articulation; an arrangement where the University attributes academic credits to programmes designed and delivered by a partner, for the purpose of facilitating entry for students with advanced standing to a University of Bolton programme.

30   Through meetings at the University and partner institutions and through scrutiny of documentation, the audit team found that the collaborative models used were appropriate for the intended purpose of providing professionally focused higher education. However, the team did find a collaborative partnership that was not reflected in the University's collaborative register of partnership arrangements. Also, there was lack of clarity among senior staff regarding the exact status of this franchise. The team formed the view that this loss of institutional oversight has the potential to put quality and academic standards at risk. The team therefore recommends that it is advisable that the University ensures that it has effective mechanisms in place for maintaining a complete and accurate record of each relationship within its CP portfolio so that appropriate institutional oversight can be applied.

31   The University told the audit team that only one programme was currently being delivered without English as the sole language of delivery. This programme, which is taught

and assessed in a combination of English and Chinese, was the subject of a QAA overseas partnership audit in 2006, and is considered below in paragraph 100. Two other programmes had been approved for delivery in a language other than English: one of these, a programme delivered in Spanish was, at the time of the audit, no longer running and the other, a programme to be delivered in Chinese, was awaiting final approval from the Chinese Government before it could commence.

32   From its documentary audit trails of overseas partnerships, the audit team identified a programme in which the partner would appoint assistant teachers 'who will do the translations for the lectures, course materials, assignments, dissertation, as well as giving consultation and instruction'. The report from the validation event for this programme contained a condition that handbooks should be available in English as well as the native language, and that the Chair of the validation panel was to ensure that verification of translation had taken place. From its meetings with University staff, the team found a lack of clarity about the status of the use of the native language in this programme. The team also found that the University's policies did not cover all aspects of the use of languages other than English. For example, the policies would benefit from greater clarity in areas such as the quality assurance of translation, and more precision regarding the documentation that would require translation in order for the University to exercise its responsibilities for academic standards and the quality of learning opportunities. The team therefore considers it advisable that the University develop further its institutional strategy and policies regarding the use of languages other than English in the teaching, assessment and support of its collaborative programmes overseas.

33   The University sees its collaborative partners as equals in the delivery of programmes leading to its awards and, consequently, seeks to be supportive to all its partners. The audit team heard through meetings with partners how they value greatly

the University's openness and responsiveness to their needs. The team found the responsiveness and support demonstrated by the University at all levels to its collaborative partners and students, from the initial proposal of new collaborative partnerships through to their implementation and operation, to be a feature of good practice.

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

34   Academic Board has ultimate responsibility for maintaining the University's oversight of academic standards and quality. In so doing, Academic Board approves all major academic policies, procedures, codes of practice and regulations brought to it by its subcommittees. It approves the outcomes of all validation and review exercises; advises the Vice-Chancellor prior to the signing of collaborative agreements between the University and overseas organisations; and approves all new external examiner appointments. A number of committees report to Academic Board; these include AQDC, the Learner Experience Committee (LEC), and the 10 departmental boards of studies.

35   AQDC considers major items relating to academic quality and standards prior to their receipt by Academic Board, dealing with detailed issues of policy, procedures, regulations and monitoring in response to internal and external demands. It scrutinises the year's validation and review schedule and outcomes at each meeting and considers individual reports of all validation and review events. The Committee also considers an analysis of external examiners' reports. The Committee has three standing panels which deal with much of the minutiae of the quality assurance process, such as the scrutiny of the outputs of annual monitoring and minor modifications to programmes, thereby allowing the Committee to spend more time on broader quality and academic standards matters. The standing panels are each chaired by an academic

director and comprise members drawn from the Committee and relevant departments.

36   In 2004, AQDC established the Academic Collaboration Sub-Committee (ACS), which meets at least three times a year, to help strengthen the assurance of quality and academic standards in CP. The membership of ACS includes a member of staff from a local partner and a student representative from a collaborative partner.

37   In October 2005, the Collaborative Provision Working Group (CPWG), chaired by the Director of Academic Partnerships and Widening Participation, was established to enhance the oversight of the University's CP in the UK. Although CPWG is not a part of the formal committee structure, the minutes from its meetings are received by ACS and LEC.

38   Every collaborative programme has a home department which is central to supporting the development, approval, operation, monitoring and review of the programme. Responsibilities are variously allocated in the department between the head of department, principal lecturer (with responsibilities for quality), and the programme leader and/or the link tutor who has day-to-day responsibility for the collaboration. Each programme has a programme committee which reports to the departmental board of study.

39   The assessment of students is governed by the University's Academic Regulatory Framework and its assessment regulations. The University's code of practice on external examining applies to CP and, wherever possible, the same external examiner will be appointed both to CP and any equivalent on-campus provision.

40   All of the University's policies, procedures and codes of practice, together with guidance on their use are easily accessed, internally and externally, via a comprehensive website maintained by the Academic Support Unit (ASU). The website, referred to by the University as the Quality Assurance Manual, or 'Red Book' is a virtual volume that includes sections on new programme development,

annual monitoring, assessment, quality assurance for collaborative and distance and e-learning programmes, the appointment of external examiners and periodic review. The audit team considered the Quality Assurance Manual to be comprehensive and a helpful source of guidance for staff of the University and its partners, although a few elements did not reflect the latest version of policy or contained inconsistencies.

41   The CP Procedures Manual, which was revised in 2005 to reflect the 2004 revision of the *Code of practice, Section 2*, sets out all the procedures for CP that are additional to the procedures for campus-based programmes. The main additions address:

- extension of the academic development approvals process

- requirements for institutional appraisal

- requirements with respect to the different models of CP

- responsibilities of the University, the partner and external examiners in CP

- requirements for memoranda of cooperation

- information to be provided to students in CP.

42   Through meetings and from its analysis of documentation, the audit team found that the University's framework for managing quality and academic standards in CP was largely well conceived and appropriate. The team did, however, find a number of inconsistencies in the interpretation and application of published policy referred to at various points above and elsewhere in this report. The team therefore recommends that it would be advisable for the University to review the extent to which the interpretation and the implementation of its policies and procedures is appropriately consistent within departments and across all collaborative partnerships.

43   During meetings at the University and partner institutions, the audit team learned of a number of issues in CP where the University had needed to take significant action quickly in

order to avert a serious problem. While in each case the team found the University's response to be prompt and appropriate, it could find no formal record of the issues and subsequent corrective action within the University's deliberative structures. The team therefore advises the University to ensure that any serious issues with respect to CP, and the University's response to these, are clearly recorded within the University's deliberative structures.

44   The University's framework for managing its CP includes a division of responsibility for UK and overseas partnerships. The audit team noted the potential benefits of this separate focus and heard, for example, from its meetings with staff, both from the University and from its UK partners, that the creation of a new academic director post has made a significant difference to the smooth development and operation of UK-based CP. However, the team noted occasions where this separation also encouraged divergence of practice. For example, the team found that CPWG has been a useful forum for the development of policy and dissemination of good practice for UK-based CP but could not see how good practice in the UK might systematically inform overseas CP and vice versa.

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

45   A report of an internal audit of the University's CP was published in June 2005. One of the recommendations from the audit, which was largely confined to UK-based provision, led to the establishment of CPWG which, as noted above, has led to the enhancement of the management of UK-based CP.

46   The University identified in its CPSED a number of enhancements that it plans to introduce. These fall into the broad categories of:

- improved management arrangements

- enhanced validation, monitoring and review procedures

- enhanced support for partner staff

- enhanced support for learners in CP.

47   The key component of improving management arrangements is the introduction of service-level agreements (SLAs) as an adjunct to the memoranda of cooperation. SLAs will make the responsibilities of each partner and the University explicit in a way that the memoranda do not. A significant part of CPWG's work has been to take forward SLAs. The audit team learned from its meetings that the introduction of SLAs is seen by staff from the University and its partners alike as a welcome development that will lead to more effective management of partnerships. The team saw a paper-based prototype of what will be a web-based tool which, through a simple dialogue, will produce a detailed assignment of responsibilities for each collaborative programme. In a meeting, the team learned that there were no immediate plans to use SLAs in overseas CP.

48   For 2006-07, the University has strengthened its annual monitoring procedures for CP (see below paragraph 66). An agreed data set for UK CP is being developed to facilitate evaluation at the local level. Also for 2006-07, the University has introduced a new framework for the periodic review of its CP (see below paragraph 70). It was clear to the audit team, from its meetings and documentary audit trails, that the provision of core data sets for CP would help partners, departments and the University to analyse and monitor its CP more effectively. The team encourages the University to introduce this as quickly as possible.

49   The Academic Practice and Staff Development Coordinator is reviewing the needs for partner staff supporting CP and arranging appropriate development activities as a result. The audit team heard, during the audit visit, that the implementation of an easily accessible contacts list for key personnel involved in a partnership was seen by the University as being important. Among the measures planned for enhancing support for learners is to improve student representation on collaborative programmes.

50   Overall, the audit team found that the University is aware of its enhancement needs and is taking deliberate and appropriate steps to meet them. This was clearly demonstrated through its CPSED. From its meetings and scrutiny of the documentation, the team did find a continual reinforcement of a separation between the management of UK partnerships and those overseas. For example, on the issue of monitoring publicity material produced by partners, both academic directors had produced a paper. While the team appreciated that there are some inevitable differences between UK and overseas' contexts, this approach risks codifying any inconsistent practice, rather than adopting shared good practice. The team therefore recommends that it would be desirable for the University to maximise the potential for enhancement by the appropriate coordination of systems and procedures for UK and overseas CP.

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

51   New programmes for CP are normally proposed through the annual departmental development plan, but, exceptionally, proposals can be brought forward outside of the annual planning cycle. The initial proposal is scrutinised as part of the overall planning activities by a subgroup of the University Executive where the resource implications are evaluated.

52   The Director of Academic Partnerships and Widening Participation is involved if a UK partnership is being proposed, and the Director of International Relations is consulted if overseas provision is part of the proposal. These Directors play a part in various stages of the planning process for CP as do a variety of other University officers and the process is overseen by the PVC (Academic).

53   The initial proposal is described on a pro forma and must be supported by a rigorous business case. All proposals are benchmarked against a number of criteria, including the:

- fit with the overall University Strategic Plan

- academic quality of the proposal

- extent to which the business case has been argued

- viability of the prospective programme

- fit between the University and partner strategic aims

- arrangements for the management and quality assurance.

54   For proposals that are approved the next stage involves scrutiny of both the suitability of the partner and the collaborative arrangements, and of the programme itself if it is a new programme.

Partner appraisal

55   The procedures for partner appraisal are clearly set out in the Quality Assurance Manual and cover the partner's mission, management, academic status, resources and stability. If the partnership is new, an appraisal of the institution takes place to determine whether the proposed partner organisation 'provides an appropriate environment for the conduct of programmes of higher education leading to awards or credit from the University'. The extent and conduct of the appraisal is determined by the PVC (Academic) in consultation with the Head of Academic Quality and Standards.

56   For UK partners, the appraisal normally takes the form of a visit by a member of the University management team and a member of Learning Support Services (LSS). For overseas partnerships the appraisal is normally undertaken by the Director of International Relations, accompanied by a subject specialist from the proposing department. The appraisal involves meetings with partner staff and consideration of documentary evidence. The audit team was informed that the appraisal of a new overseas partner always involves a visit, although this does not usually include a member of LSS.

Programme approval

57   Validation events are conducted by panels, chaired by a senior academic. Panel membership includes nominees from the appropriate academic departments and up to two members external to the University. One of the external members is required to have the appropriate academic seniority and subject expertise. This may be supplemented by relevant professional, industrial or other employment related perspective from any additional external panel member. Through its documentary audit trails, the audit team found that external members were in attendance on the majority of validation panels, but noted some inconsistency in the application of policy (see below paragraph 76 to 77).

58   In addition to the matters considered in all University validations, those for CP also consider the allocation of responsibilities between the University and the partner; management of quality and academic standards across the partnership; and a draft memoranda of agreement specifying the academic, administrative and financial arrangements between the parties. This is specified through the approval documentation, a variety of annexes and a pro forma. Any conditions set have to be responded to by the programme team and signed off by the chair of the validation panel. Academic Board, through AQDC receives regular reports of validations and their status in terms of outstanding conditions.

59   Following validation, a memorandum of agreement is finalised which describes the respective responsibilities of the University and the partner. Through its documentary audit trails, the audit team noted some variability in the layout and content of these memoranda. The team read in the minutes of ACS and heard through meetings with staff that the University does not regard its memoranda of agreement to be legally binding documents, at least not in their entirety. This does not align with *Precept A10* of the *Code of practice, Section 2.* The team formed the view that this exposes the University and its students to considerable risk. The team therefore recommends that, in order to better

protect the interests of the University and its students, it is advisable for the University to put in place legally binding partnership memoranda.

60 The audit team broadly concur with the view expressed in the University's CPSED of a 'testing, peer-assessment based' approval process. The team found some inconsistency in the interpretation of University regulations on the external participation in the process (see below paragraphs 76 to 77).

Annual monitoring

61 The CPSED stated that the process of annual monitoring underpins 'the key values and principles of self-accountability, self-criticism…reviewing and comparing performance with benchmarks…leading to enhancement of the quality of provision and of the student experience'. All programmes are subject to annual monitoring, including programmes delivered as part of a collaborative partnership, whether or not they are linked to a University-based programme. The annual monitoring process involves a four-stage approach, the first two at programme level, the third at subject level and the fourth at departmental level, with components as follows:

- Programme Quality and Enhancement Plan (PQEP)

- Data Analysis Report (DAR)

- Subject Annual Self-Evaluation Report (SASER)

- Departmental Quality Enhancement Plan (DQEP).

62 PQEPs, which incorporate issues arising from CP, are produced in mid-October by programme teams. PQEPs propose action points arising from a number of sources including external examiner reports and are monitored for progress by departmental boards of studies. Collaborative partners have, along with informal opportunities, for example, liaison with the University link tutor, the formal opportunity to provide input into the process through course committee meetings, module evaluation exercises and, once the new external examiner report forms are operational, through

their reports. The audit team's scrutiny of the minutes of departmental boards of studies confirmed that this input from partners had taken place, although there was some variability in the extent. The team considered the facility of the Education Department's website to enable interactive participation by partners in the PGCE/CertEd PQEP to be particularly effective.

63 Annual monitoring statistics are produced centrally and these are incorporated into a DAR by University departments. The CPSED stated that the DAR includes five years' data, where appropriate, and is produced by programme leaders at the end of January. It is presented to the departmental board of studies. The audit team found variations in practice between departments in the extent to which they use the centrally produced data sets for monitoring provision at partner institutions. The data sets are produced on request from a department by a member of staff from Mathematics (see below paragraph 124) and some partners produce their own data for the annual monitoring process. The team concluded that a more consistent and systematic approach to the quantitative aspects of monitoring its CP would help the University to draw comparisons between the performance of students at the University and those studying equivalent programmes at partner institutions.

64 University subject groups produce SASERs which draw upon the relevant PQEPs and provide a subject-wide view. These are produced at the end of February and are considered by the departmental boards of studies and by the relevant standing panels of AQDC. DQEPs, providing an overview of the provision at departmental level, are produced in May. These are also scrutinised by departmental boards of studies and standing panels and feed into the planning cycle, signalling proposals for the introduction of new programmes.

65 The audit team found that the timing and level of detail of the consideration of the annual monitoring documents, as portrayed in the minutes of boards of studies, varied between departments. The University might wish to

consider the benefits of ensuring more consistent implementation of the annual monitoring procedures.

66   The CPSED indicated that the annual monitoring procedures were being revised for 2006-07 to better differentiate CP. This was through the addition of a separate column on CP on the PQEP pro forma, and the introduction of a new Annual Programme Review Report, to be produced by departments in conjunction with partners. Although an updated version of the PQEP pro forma appears in the annual monitoring guidelines, one of the sample forms provided on the ASU website had not, at the time of the audit, been updated. Guidance for the completion of the new report was available, but it was too early in the cycle for the audit team to see its implementation.

67   The audit team found the University processes for annual monitoring to be comprehensive, thorough and in line with the *Code of practice*. The team did find the existing four-stage process to be somewhat complex, as did the previous audit team, and considered that the University may wish to continue to monitor its effectiveness, especially with the introduction of a fifth component for CP.

Periodic review

68   The CPSED stated that the process of periodic review in the University follows a 'rolling programme' and all subject areas are scrutinised on a five to six-year cycle. The approach involves the production by the subject team of a reflective self-evaluation document that covers all programmes to which they contribute. There is a requirement to address a number of core areas including aims and intended learning outcomes, student progression and achievement, and the maintenance and enhancement of quality and academic standards.

69   Some CP is reviewed in an event-based format, especially if only one programme is offered by a partner. An alternative approach might be used if provision is extensive. Overseas CP is subject to a different approach, with the periodic review being country-based,

for practical reasons. Scrutiny of documentation by the audit team revealed the process to be rigorous, involving external panel members and incorporating on-site overseas visits.

70   The CPSED stated that a new form of periodic review was to be introduced in 2006-07. It is based around three forms of review, depending on the nature of the CP. The first form follows the current procedure where CP is part of a University-based subject area being reviewed under the rolling programme. The second method is applied where there is not a direct equivalence to a programme or subject offered at the University, and in this case, a separate review of programme and collaboration is undertaken. The third method is applied where provision is delivered by a number of partners, and such a review could be of some or all of the partners, in terms of the collaborative arrangements, allowing comparison between them.

71   This new periodic review process had yet to be used and the procedures were yet to be fully appreciated by staff who met with the audit team. Moreover, the guidance on periodic review available on the ASU website did not, at the time of the audit, reflect the new process. If the new process is to be implemented, the team encourages the University to ensure that this guidance is both accurate and current.

72   Overall, the audit team found that the University's internal approval, monitoring and review arrangements for CP leading to its awards are fit for purpose and carefully operated. The University is both responsive and supportive of partners in the operation of these processes. These findings contributed substantially to the team's judgement that broad confidence can be placed in the University's present and likely future management of the quality of its programmes and the academic standards of its awards.

External participation in internal review processes for collaborative provision

73   The CPSED stated that formal processes for validation and review of all provision, collaborative and on-campus, benefit from the direct or indirect input of external peers and that evidence is sought during the process that staff have engaged appropriately with employers and/or practitioners.

74   The CPSED helpfully cited examples of external participation in validation and periodic review for both overseas and UK CP. All four events had external members from other HEIs. The panels for other overseas validations and periodic reviews seen by the audit team had academic but not practitioner membership, although the majority of these reports detailed a meeting with employers/practitioners or referred to employers as part of an evidence base.

75   Evidence from the validations for UK-based programmes seen by the audit team showed a somewhat varied practice: some with both an academic and a practitioner external member; some with just an academic external but also a meeting with employers; and one with an external practitioner who had academic experience. Two approval events for extending a programme to new partners had no panel member external to the University of Bolton. This appeared to be contrary to the requirements of Annex B of the Validation Handbook, although the main text of the Handbook allowed for discretion on the matter. The team was told that there was variable practice when extending an existing programme to a new partner. Senior management acknowledged that the Validation Handbook should be reviewed for internal consistency and that current practice is more rigorous than that which had been applied to the two approvals noted.

76   The institutional audit report confirmed that the University generally involved external participants in its validation and review processes but considered that it should develop more consistency in the external practitioner membership of validation and review panels. The report also noted the varied practice in relation to practitioner membership of the panel, meetings with employers and reference to employers as part of the evidence base. The CPSED stated that the University had responded to the recommendation relating to external practitioner participation in internal review, by a more robust implementation of the existing written guidance as to the appropriate participation of practitioners during both event planning meetings and scrutiny of panels by AQDC. The audit team was told that, in practice, the enhanced scrutiny would be exercised by the Head of AQS and the PVC (Academic).

77   Overall, the audit team was satisfied that the University makes appropriate use of external persons in its internal review processes. In order to strengthen this further, the team recommends that it would be desirable for the University to review the Validation Handbook guidance to ensure an appropriate and consistent approach to external membership on approval and review panels.

External examiners and their reports in collaborative provision

78   The role and responsibilities of external examiners in relation to CP are comprehensively detailed in the CP Procedures Manual. This states that the appointment procedure for CP is the same as for University-based programmes and notes that the induction process should devote 'particular care' with the examiners' role in relation to CP. The 2005-06 minutes of Academic Board provided evidence of the implementation of this carefulness.

79   The CP Procedures Manual states that where an assessment in overseas CP is in a language other than English, the external examiner must have sufficient knowledge of the relevant language or translations must be available. The QAA overseas audit of the University's partnership with SHUIHTSB noted that the external examiner was bilingual but expressed concern about issues of translation in relation to ongoing moderation. Concerns about language and assessment issues have also

been raised in the validation documentation for two master's degree programmes to be offered in China. There did not appear to be an established policy for dealing with such issues.

80   External examiners attend either the first tier (module) assessment board and/or the second tier (departmental) board where decisions are made on progression and awards. The CPSED also stated that external examiner reports are submitted electronically to ASU and, following scrutiny and annotation by the Head of AQS, are distributed to the relevant post holders. Through meetings with partners the audit team confirmed that partners receive such reports.

81   The course committee for the relevant programme meets either at the partner institution or at the University, with partner representation, and approves an action plan in response to the external examiner's report. The audit team noted discussion of such reports in course committee minutes. The team also noted discussion of the reports and course committee responses at departmental board of studies' meetings. AQDC members' observation of department assessment boards is reported to and discussed at AQDC.

82   The audit team saw evidence of the plans prepared in response to external examiner reports and noted the action detailed: persons responsible; intended outcome; performance indicators and completion date. The team found the format of these action plans to be well designed. The external examiner report form asks whether they are satisfied that previous comments have been responded to. On the evidence of the reports seen, the responses to this question have been positive and often note the progress made. Where reservations have been expressed, it is clear that there is an effective dialogue with the course team.

83   The audit team saw evidence that external examiners confirm the effectiveness of moderation procedures and the consistency of interpretation of academic standards. An annual overview of external examiner reports is presented to Academic Board. The team viewed

the Overview Report for 2004-05 which recorded that there were no negative responses to the key academic standards questions. The team saw a number of external examiner reports for the last two years and confirmed the generally positive nature of these reports. There was one instance of the University failing to secure an external examiner report on a programme which was clearly experiencing difficulty. The external examiner's report for the following year alluded to the serious issues which had arisen. The University's responses, which included assessment revisions, changing the location of delivery and suspending recruitment, were appropriate but there was little formal record of the issues within the University's deliberative structures.

84   Chief external examiners provide an overview report on assessment and academic standards. Through meetings and scrutiny of documentation, the audit team found that, while in some areas the overview report reflects the leadership role of the chief examiner, in others the overview report was a summary of individual reports.

85   The audit team noted that the quality sections of external examiner's reports are completed in a helpful way to assist partners to improve the structure, marking schemes and spread of assessments. Previously departments were responsible for the distribution of external examiner reports to partners, now this is the responsibility of ASU. The team saw evidence of discussion of the reports by partner staff; they have an opportunity to comment and expect their response to the action sections to be monitored by both the link tutor and external examiner.

86   The CPSED cited as good practice the University's expectation that an external examiner will visit the relevant partner institution, and the external examiner's right to meet with students. The audit team was told that external examiners are encouraged to visit partners and, although this was more difficult in the case of overseas partners, visits had taken place.

87   The CPSED stated that where a programme is delivered both at the University and through a partner, the same external examiner(s) will be responsible for both. The CPSED also stated that in only a small minority of cases a CP external examiner is not also responsible for University-based provision.

88   However, the CPSED also stated that 'the overall outcome of external examiner reports for CP as a coherent whole have not been readily distinguishable from those for on-campus provision'. The audit team confirmed the lack of explicit comment in some reports. The CPSED stated that at University level two steps had been taken to meet this issue. First, the external examiner documentation had been amended to highlight areas where specific reference should be made to CP. Secondly, it was introducing an Annual Programme Review Report (APRR) (see above paragraph 66) to facilitate an overview of quality and academic standards in CP. The team noted discussion at ACS of both measures and saw the amended external examiner report forms and the APRR which specifically asks for comment on the effectiveness of liaison between partners.

89   The CPSED also suggested that the senior and chief external examiners would be used to secure further explicit reporting on the comparability of CP but the audit team was told that currently some chief examiners summarise reports in their area rather than producing an evaluation. The team was also told that one department already asked external examiners to make explicit statements comparing academic standards at Bolton based on overseas students on the same programme. The team considered that this practice should be encouraged.

90   The audit team considered that the University may wish to give further attention to some elements of its external examiner system, including the consistency of chief examiner reports and its policies related to programmes using languages other than English. However, the team found that, overall, the University makes effective use of external examiners and their reports in CP. This finding contributed

significantly to the team's judgement that broad confidence can be placed in the University's present and likely future management of the academic standards of its awards made through collaborative arrangements.

The use made of external reference points in collaborative provision

91   The CPSED stated that for CP the responsibility for ensuring that programmes and awards pay due attention to the Academic Infrastructure is discharged through sharing written information and in planning and development discussions with partner staff. It noted that some partner staff would appreciate a more structured approach to familiarisation with the Academic Infrastructure and indicated that this will probably be achieved by developing a short guide followed up with a discussion at the Partner Forum.

92   Through meetings, the audit team confirmed that the University provided guidance on the Academic Infrastructure to new partners and that it was the University's intention to enhance this preparation process. The team encourages the University to pursue its plans to further formalise and enhance the engagement of partners with appropriate external reference points.

93   The audit team also noted that at approval events for FDs offered through CP, validation panels routinely questioned partner representatives about the perceived differences between the FD and both higher and lower qualifications within *The framework for higher education qualifications in England, Wales and Northern Ireland*. This indicated that the University's processes ensure that partners make appropriate use of external reference points for this new qualification.

94   The CPSED stated that the curriculum is informed by subject benchmark statements through the approval and review process and that programme specifications based on a standard template are included in the programme handbook presented at validation and subsequently issued to students. The

institutional audit noted that 'consideration of subject benchmark statements has been incorporated into both validation and review processes along with the need to respond to any relevant professional, statutory and regulatory body (PSRB) requirements' and that SASERs require comment on any proposed changes to learning outcomes in relation to subject benchmarks and PSRB requirements.

95   CP approval events also routinely discuss assessment procedures and ongoing responsibility for quality assurance The audit team confirmed that programme handbooks include programme specifications and that approval events variously discuss subject benchmarks, programme specifications and the mapping of learning outcomes.

96   The CPSED stated that the University contributes to consultation exercises informing revisions to the *Code of practice*. The minutes of AQDC demonstrated clear evidence that the University actively engages with external quality assurance issues. For example, it responded to the QAA consultation exercise on the *Guidelines for Preparing Programme Specifications*, noting that the University's own requirements were similar to those proposed.

97   The institutional audit concluded that the 'University had used the Code as a set of guides to good practice in the sector with which to reflect upon and change its procedures where it felt the need'. The University's response to the recent revision of the *Code of practice, Section 2: Collaborative provision and flexible and distributed learning (including e-learning)* supported this conclusion. ACS established a separate subgroup to scrutinise each of the two parts, their reports were considered by ACS and the CPSED stated that amendments were made to the CP Procedures Manual. Following a mapping exercise against *Part B: Aspects specific to flexible and distributed learning*, revisions to quality assurance procedures for distance learning have been drafted and were due for approval. In relation to *Part A*, the team noted the level of uncertainty as to whether the University's memoranda of agreement aligned with one of the precepts of the *Code* (see above paragraph 59).

98   The CPSED stated that the University's documentation relating to the accreditation of prior learning (APL) was dated but fundamentally robust. The audit team was told that there is relatively little APL in respect of CP and in the case of Education where it is of some significance, the team saw the more detailed APL guidance used by the department. The CPSED stated that the University addressed the requirements of the Academic Infrastructure in a reflective rather than a compliant manner and the evidence seen by the team supports this view.

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

99   The Major review of healthcare programmes offered by the University in partnership with Cheshire and Merseyside SHA (2005) identified a considerable number of strengths and examples of good practice with relatively few and minor weaknesses. The close partnership between the University and the SHA and NHS Trusts was seen as an underpinning strength. The QAA review of the FD in Health and Social Care offered by the University in partnership with the Greater Manchester SHA and local health and social care providers, was similarly positive. The close collaboration between the University and employers and the good balance between academic achievement and work-based skills acquisition were among the 13 strengths noted by the review. Both reports were discussed by AQDC which justifiably considered them to be very positive. The Major review report contained a departmental action plan and AQDC asked for a similar plan in relation to the FD report. The reports and the University's response reflect well on its maintenance of academic standards. QAA has undertaken a number of subject reviews at partner colleges but none of these raised issues relevant to the University's CP.

100 As part of the audit of UK collaborative arrangements with institutions in China, QAA reported on the partnership between the University and SHUIHTSB involving the delivery of a Diploma of Higher Education in Mechatronics. The draft report, available to the present audit team, identified a number of positive features including the commitment of the Programme Coordinator overseeing the link. The draft report also included areas for further consideration by the University. AQDC subsequently discussed the report, a response was submitted to QAA and the team was told that a provisional action plan had been prepared.

101 The CPSED stated that a number of programmes offered through CP are accredited by PSRBs and gave six examples. It noted that ASU maintains a central record of such accreditations and that the implications for accreditation are incorporated into the planning meetings for validation and review. AQDC discusses the outcomes of such events and, where appropriate, requires a response from the department. The audit team noted that PSRB requirements are referred to in student handbooks. The team examined an Ofsted report on Initial Teacher Training programmes offered through CP and two PSRB reports on programmes offered in the UK and through overseas CP. Although these two reports did not comment specifically on the overseas CP provision, their overall conclusions were positive.

102 The audit team noted extensive departmental discussion of the accreditation process and effective responses to issues raised in the Ofsted and PSRB reports. The institutional audit concluded that there were appropriate mechanisms in place for ensuring adequate institutional oversight when responding to external body reports and that there were many examples of how such reports had resulted in enhancements. The present team confirmed that this is also the case for CP.

Student representation in collaborative provision

103 In the CPSED the University stated that it values the participation of student representatives in its processes, and recognised that securing effective student representation in CP presents a particular challenge. The University acknowledged that agreed arrangements can 'vary considerably' depending on the nature of the provision and the size and composition of the student body. Arrangements for student representation and an explanation of how the system operates are required in programme handbooks. The CPSED outlined a number of measures designed to enhance the effectiveness of student representation in CP, including the extension to CP of the Student Representation Project, first established in 2004 as a two-year project to address perceived weaknesses in the student representative system.

104 At a meeting with senior staff, the audit team heard the University express its confidence in the appointment and training of student representatives. It was stated that the Student Representative Coordinator from the UBSU sent out training packs. UBSU members subsequently acknowledged problems with training for representatives from CP and were addressing them: a shorter more appropriate pack had been designed and put on the website with further information, and UBSU, as part of the extension of the Student Representation Project, was planning to work closely with link tutors to ensure that student representatives were aware of the training materials, and had access to them.

105 The audit team found that the website contained a brief four-page summary of the role of a representative, but this was not tailored for representatives from partner institutions. However, the site did contain an offer from the UBSU to visit partner representatives. Overseas representatives were asked to email the Student Representative Coordinator for information. In a meeting with students from partner colleges there was evidence that some representatives had

encountered problems when attempting to acquire training packs. In meetings with students at partner colleges, student representatives showed little awareness of training packs or training opportunities.

106 The audit team noted that the institutional audit report made some reference to the lack of training for student representatives. The team found that appropriate training packs and website information are available, but the University and UBSU may wish to advance measures for ensuring that student representatives in collaborative partnerships are aware and take advantage of them.

107 The audit team encountered a small number of examples of partnership programmes that did not have student representatives. In some cases a rationale for this was presented, for example, a distance mode of learning and/or very small numbers of students. In other cases it was less clear why no representatives had been elected. Most programme handbooks did give details of the student representation system and the role of course committees. Students who did not have representatives were satisfied that they had good access to tutors and were able to raise issues directly with them.

108 From an examination of the minutes of course committee meetings, the audit team found that the attendance of student representatives was good. For some overseas course committees attendance was very high. This represents an improvement from the situation identified in the institutional audit report which found 'significant variability in attendance'. All committees had given students the opportunity to give feedback and voice concerns. There was considerable evidence that staff of both the partner and the University were addressing concerns. Student representatives generally had opportunities to feed back to students the outcomes of course committees. The University's willingness to deal with issues was appreciated by students and partner staff. From the evidence of course committees, action plans and comments of

partner students and staff, the team concluded that the level of University responsiveness to issues raised by student representatives is very good.

Feedback from students, graduates and employers

109 In terms of formal student feedback mechanisms, the CPSED was explicit that the University was 'willing to work with existing systems already in place at a partner institution' and that this was seen as a strength. It was not clear from the CPSED whether the University had baseline expectations of partners concerning formal evaluation.

110 Student comment and feedback is considered at course committee meetings and action taken to address concerns. Formal monitoring of issues raised by students is part of the annual monitoring process, and the PQEP is expected to consider and cite evidence from student feedback.

111 Senior staff of the University confirmed to the audit team that module feedback is part of the University's expectations, alongside selected externally processed annual programme evaluation. A number of partner staff at subsequent meetings supported this assertion, and added that there was a further expectation that both module and programme evaluations were completed by students and forwarded to the University. A number of these staff used what they called 'Bolton' forms for both modules and programmes. However, at meetings in partner institutions less consistent levels of understanding and practice emerged. Within one institution the team learned that one programme offered only module evaluations, one did not operate anonymous evaluation at all, and one operated mid-module evaluation and offered an end of year summary of module evaluations. Students generally confirmed the use of module and annual evaluation, although on some programmes there was no module evaluation, and on another students said they were told that they could collect and submit evaluations if they wished.

112 In meetings with University staff, the audit team was told that decisions on the precise nature of module and programme evaluation are made by the programme leader. In a later meeting other staff were certain that all programmes were expected to use module evaluation and some staff were convinced (erroneously) that there was a University pro forma. Although the draft SLA does contain reference to a University module questionnaire for use by partners if they wish, this was not yet available. There was therefore some confusion among staff at the University about policy in this area and the University may wish to address this.

113 The audit team saw a few examples of programme handbooks that gave clear information on the collation and use of feedback. Some handbooks for overseas partnerships were particularly comprehensive. None of the handbooks relating to UK partnerships provided to the team contained details of mechanisms for gathering systematic module or programme feedback; for example, by questionnaires, although many mentioned feedback via course committees. It was therefore unclear to the team how students were formally made aware of the feedback opportunities available to them. The team concluded that it would be advisable for the University to ensure a greater level of consistency in the approach to securing student feedback within CP, and in the use of handbooks to inform students of feedback mechanisms.

114 Both partner staff and students who met the audit team were not entirely clear about what happens to evaluations after they are submitted to the University. University staff explained that evaluations are received by the link tutor and then forwarded to the programme leader who ensures that issues are reflected in the PQEP. Staff acknowledged that students may not be aware of these processes. Despite this, students were generally very pleased with the responsiveness of both the partner institution and University staff to issues raised. Many examples were cited by students of action taken to address problems that were raised informally or via formal evaluations.

University responsiveness and alertness to issues, resulting from close liaison with University department staff and the Director of Academic Partnerships and Widening Participation, was praised by UK partner staff in relation to minor as well as more substantial matters of concern.

115 The audit team found that PQEPs did cite student feedback as sources of evidence to inform action plans. The outcomes of module evaluations were also meant to be discussed in course committees, but the team found variable practice in this area. Module evaluation is a standing item on the agenda of these committees, but some of the minutes of course committees seen by the team gave significant attention to questionnaire outcomes, while others minuted little or nothing. The implication of this is that students will not be made aware of the outcomes of their module feedback. The team recommends to the University the advisability of achieving more consistency in this area of practice.

116 The audit team noted that the new Annual Programme Review Report to be used by collaborative partners in the future, asks specifically for a summary of issues raised by module and programme evaluations. The team considered this to be a welcome enhancement.

117 In preparation for the CP audit, UBSU, supported by the University, undertook a survey of the views of partnership students. The outcomes of this survey were collated by UBSU and formed a significant part of the SWS. Although disappointed with low returns from overseas CP students, UBSU was pleased with the outcomes of this survey, and the enhanced understanding this provided of the student experience in partner institutions. UBSU was confident that the University was giving careful consideration to the outcomes and were taking action. A number of partner students seen by the audit team were aware of the outcomes of the survey, and felt that it was a fair reflection of their views. Partner staff and University programme staff who met the team reported that they had not seen the outcomes. The team was interested in whether the survey would be

repeated in the future, but were informed that a decision had not yet been made. The team formed the view that there would be a clear benefit in repeating the exercise.

118 With regard to graduate feedback, the University acknowledged in the CPSED the need to develop alumni relations. A new Alumni Office has recently been established and a database of graduates is being compiled. The University anticipates that this will enhance their ability to gain feedback from this important stakeholder group.

119 The vocational nature of much of the University's CP has given the University many opportunities to engage with employers and receive feedback from them. Programme development is a particular area where the audit team found that feedback is well utilised. The team viewed a number of departmental strategy documents relating to industrial/employer liaison and found that these covered a wide range of current approaches and ideas for further enhancement. In line with the findings of the institutional audit, the present team encourages the University in its aim to achieve routine employer liaison in respect of its CP.

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

120 The University has devoted much care to the development and enhancement of statistics relating to student admission, progression, completion and assessment. This, and guidance for staff on the interpretation of such data, was seen as a feature of good practice by the institutional audit. At the start of the spring term programme annual progression statistics are produced centrally and DARs are compiled by programme leaders. Moreover the allocation of separate programme codes for partner institutions and the ability of the system to identify CP students enables both separate and comparative data to be available to the University, and partner and University programme staff.

121 However, the CPSED acknowledged that this collaborative data is not always used as consistently or effectively as possible. At programme level, some departments have not used the opportunity to request and utilise separate statistics for partnership provision, and 'have not undertaken comparative analyses of home and partner-based provision'. The CPSED also stated that there has been no consideration at University level of data relating to students in partnerships. The University intends to use ACS to address this issue.

122 In examining the use of data, the audit team confirmed the lack of consistency that was acknowledged in the CPSED. Some departments demonstrated good practice in the use of data to compile reports that used comparative analysis to enhance practice, but many departments and the University's senior academic committees had not made effective use of the available data. Partner staff who met with the team stated uniformly that they compiled all data themselves and then forwarded this to the University. They demonstrated little awareness of DARs, although University staff assured the team that DARs were received by partners in the spring. University staff attributed partners' lack of awareness to the fact that partners had completed their own monitoring, and submitted their internally required self-assessment reports, in the case of further education colleges, and PQEPs, well before receipt of the DAR.

123 At University level, appropriate collaborative data has been available, but there has been little discussion within key committees of such data, or comparisons with statistics for students studying at the University. There are opportunities for reviewing CP data at assessment boards, where partners are distinguished and can be compared with home provision and other partners where relevant. The audit team noted good practice in two Education programmes that operated across a number of partners. Here, both assessment data and ensuing statistics were discussed by partner and University staff at steering groups.

This allowed for helpful comparison of progression and achievement of students studying at different providers.

124 The audit team confirmed that a member of academic staff compiled the statistical reports upon which DARs are based. They were told that in order to customise the data in an appropriate format to identify collaborative partnerships and facilitate comparative analysis, it might be necessary to meet with that person to discuss requirements. The University was aware that the provision of this data could be further enhanced, and also acknowledged the need for greater involvement of partner staff in analysis. Discussion of statistical requirements took place at AQDC in May 2006 and a core specification for collaborative statistics is currently being compiled. Further staff development regarding the analysis and use of data by programme staff is planned.

125 The audit team noted that appropriate statistical data on CP was available from University systems and that the University was moving to make more effective use of this data. However, most collaborative arrangements and the senior levels of the University have not made systematic use of statistical data. Thus there has been little comparative analysis and few opportunities for enhancement of practice based on such data. The team recommends that it is desirable for the University to continue to enhance the provision and analysis of collaborative data sets to ensure their appropriate use at local and institutional levels.

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

126 The CPSED stated that 'the University seeks to assure the quality of teaching staff in collaborative partnerships through a variety of methods linked to the stages of institutional appraisal; programme validation; programme delivery and ongoing monitoring and review'. The primary focus is on UK collaborative partners because with overseas collaborative partners 'University staff deliver the

programmes with local tutor support'. The audit team discovered that, in practice, there were occasions where material was delivered by staff from overseas partner institutions, either as direct delivery or through tutorial support. Staff reported that any development for overseas partner staff would be undertaken through mentoring by visiting University staff. There are also plans to make some staff development material (for example, diversity awareness) available electronically.

127 The procedures for institutional appraisal include consideration of the suitability of the staff at the partner institution to support the proposed programme both in terms of quantity and quality. Partner institutions are required to provide details of staff qualifications and experience as part of the appraisal documentation. During the validation of a new programme at a partner institution, there is a requirement for evaluation of human resources available or required for the programme; staff expertise in the partner organisation matched to modules; arrangements for the recruitment, induction, management and support of partner staff involved in programme delivery; and details of how staff development needs will be identified and met across the collaborative arrangement.

128 Consideration is also given at validation as to who will be responsible for providing/funding staff development. Once the programme is underway, partners are required to notify the University programme team of any changes in staff contributing to the programme in order to seek the head of department's approval.

129 To supplement the University's formal procedures for scrutinising the quality of partner staff, there are processes of joint staff development and, in some cases, joint peer review of teaching. This approach to staff development also applies to administrative and technical staff from collaborative partners.

130 Although there is thorough scrutiny of staff resources in partner institutions at validation and review, the audit team did not find any other formal University mechanisms for identifying the staff development needs of staff from partner

institutions. However, measures are being taken to extend the development of new partners through advice, for example, on the Academic Infrastructure and higher education culture to help them prepare for validation. The University may wish to consider reviewing ways in which ongoing partner staff development needs can be more systematically identified.

131 The University issues invitations to all partner staff to participate in its staff development programmes and was including partner staff in its recent initiative in providing increased opportunities for continuous professional development (CPD). It also invites UK partner staff to the annual Learning and Teaching Conference, to the Friday Forums, and offers reduced fees on advanced postgraduate qualifications for all partner staff who wish to engage in CPD.

132 The audit team noted the absence of a formal University job description for the link tutors and, consequent upon this, the lack of any formal staff development provided for link tutors. The team considered that the link tutors are an essential part of the maintenance and smooth running of CP and recommends that it would be desirable for the University to consider the development of a job description and a programme of staff development for these key personnel.

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

133 The University has had specific procedures in place since 2000 for the quality assurance of programmes delivered wholly or partly through distance learning. ACS established a working party to map these procedures against the revised *Code of practice, Section 2*, when flexible and distributed learning was added in 2004. The University anticipated that the new component of the Quality Assurance Manual for flexible and distance learning (including e-learning) will be approved by AQDC in January 2007.

134 In a meeting with the audit team, the University confirmed that no collaborative programmes were running that are delivered entirely by distance learning, although one such programme had been validated using the previous procedure in 2005. Collaborative programmes are, however, delivered by blended learning using distributed and distance-learning (DDL) methods. The CPSED asserted that such programmes are subjected to the 'full rigour of the University's quality assurance processes'.

135 The CPSED also outlined the support for DDL and gave a number of examples of DDL developments used to support collaborative programmes. At least one-third of the first-year DDL materials are required to be available for scrutiny during the validation process. A number of CP programmes use e-learning as a substantive part of the delivery. Electronic discussion forums and more general e-support mechanisms are also used to support learners.

136 After examining the relevant documentation available to it, the audit team concluded that the University's framework for managing collaborative programmes delivered by distributed and distance learning is appropriate and effective.

Learning support resources for students in collaborative provision

137 The University's approach to learning resources as outlined in the CPSED is to provide equity of resources for all students whether studying at the University or within collaborative partners. Learning Support and Development is the central department with key responsibility for resources. It contains three areas: Communications and Information Technology Developments; eLearning at Bolton (eLaB) and LSS.

138 The LSS subject liaison librarians are responsible for assessing the adequacy of learning resources for new CP programmes. They do this by sending out pro formas requesting details of specific arrangements for the proposed programmes. The Heads of LSS and eLab are also able to comment on new

proposals via the Academic Development and Approval process, and LSS recommendations inform the PVC (Academic's) decision to allow progression to the next stage. Subsequently, the validation process requires the panel to be satisfied that resources will be sufficient and 'fit for purpose'. Librarians may be involved as members of the proposal team, or as experts on learning resources. The CPSED also stated that they 'may also conduct learning resource appraisals to inform the validation of new collaborative programmes'.

139 Assessing and providing for ongoing learning resource needs is an area that the CPSED highlighted for further development. Currently a number of methods are used to judge the sufficiency of resources, and these generally relate to formal and informal staff and student feedback. The LSS Charter Mark for Service Quality report noted commendations by partners but also identified mutual monitoring and evaluation of services as an area for continuous improvement. The University Charter Mark action plan for LSS is addressing this. The University's collaborative partnership events held in Spring 2006 noted weaknesses in liaison arrangements with partners, particularly in following up initial reviews of provision. The establishment of a network/user group of LSS staff and partners and the Learning Resources (LR) Partner Forum in May 2006 has been part of the University's response to this.

140 Among a number of examples of good practice within the area, the CPSED cited 'steady progress in online access to the library catalogue, e-books and e-journals'. The University recognised that the student application and enrolment process on certain courses at partners had led to delays in some students gaining access to eLearning support materials.

141 The audit team found that the processes for initial appraisal of learning resources for new partners and new programmes were generally sound, and involved the use of University learning resources staff. However, these arrangements differed between UK and overseas provision. For overseas partnerships, the initial resource appraisal was based on

information provided by the partner, and the institutional appraisal did not usually directly involve a member of learning resources staff. The University may wish to consider greater on-site involvement of learning resources staff in overseas approvals.

142 In considering the quality assurance measures for programmes approved in recent years, the audit team noted two occasions where issues relating to resources had arisen after validation. One UK partnership had experienced serious resource issues, particularly relating to the use of specialist accommodation. This programme had only been running for a short period, and the link had been subject to a resources appraisal at the time of validation. This report, and the validation, made specific statements about the partner's specialist accommodation to be made available to students on the programme. Subsequently, this accommodation was not made available and, for the 2005-06 and 2006-07 academic years, some teaching had been relocated to the University. Intake to this programme for 2006-07 had been suspended pending a review and reconfiguration of the curriculum and delivery.

143 The second example was the recent validation of an overseas partnership which included discussion of the adequacy of library investment, yet in the first year of operation the University had to address problems with library investment at the partnership. In light of these examples, the University may wish to consider how to further safeguard the security of resource arrangements agreed as part of the validation process.

144 In a meeting between the audit team and senior University staff the University reinforced the close relationships and liaison existing between University resources staff and partners. Staff in partner institutions commended recent efforts to improve liaison on learning resources. However, the team noted that while many initiatives, such as the LR Partner Forum, were successfully engaging with partnership staff based in the UK, the University had yet to find mechanisms to engage overseas partnerships in these or equivalent initiatives.

145 Initial problems with student access to University library and online resources were mentioned by students at partners visited by the audit team, and in the student meeting held at the University. The team also found frequent mention of such problems in the minutes of course committees. In many cases the problems were viewed by both staff and students at partnerships as addressed, and the team heard of one example where, following problems with the previous cohort, the new cohort was transported to the University, registered there, and received effective induction in the use of online resources. Some partner staff felt that these problems had not been fully resolved but University staff with key responsibilities in this area reassured the team and gave examples of a number of measures taken to improve the speed with which access is granted.

146 Many students found the online resources made available to them by the University very valuable, and most CP students who met the audit team were very satisfied with partner and University provision of resources. Use by partner students of physical resources at the University was limited, and most students relied on partner or other facilities and found these satisfactory. Those students that did use the University generally lived in proximity and therefore found it convenient or had some teaching scheduled at the University. The team heard praise for the University facilities from these students.

147 The audit team learned that this valued access to online and physical resources at the University was no longer available to a certain group of partner students. Those students undertaking programmes for which the partner institution was directly funded by HEFCE were not registered with the University as current students and therefore could not be granted a library card or online access because of licence restrictions. The team explored the implications of this with University staff, and formed the view that the University was attempting to ensure that students in directly funded partnerships had equivalent resources. This is a matter that the University may wish to keep

under continual review, particularly where a single programme is being studied by both directly and indirectly funded students.

Academic guidance and personal support for students in collaborative provision

148 Arrangements for providing academic and personal support for CP students vary according to the nature of the collaboration, the level of study and the characteristics of the student body. The University made clear in the CPSED that they believe their procedures 'ensure that full consideration is given to a partner's commitment to the student experience and that arrangements are in place to provide appropriate and timely support and guidance to students'. Arrangements are set out in the academic proposal document as part of validation, and students are informed of arrangements in their programme handbook. The effectiveness of student support is reviewed through annual monitoring and periodic review.

149 The CPSED stated that the University is currently reviewing its policies and procedures in relation to personal tutoring. It recognises that there are models of good practice within partners and expects to disseminate these as part of a good practice guide. The audit team found that the review was ongoing and that relevant staff were unsure whether as yet partner input had been sought.

150 The CPSED also acknowledged that there could be a lack of clarity about the operation within partners of student complaints procedures. This was a finding of the survey of the views of collaborative students. The University expects that the details of complaints procedures will form part of the new SLAs, but the CPSED did not make clear how students were made aware of the procedures.

151 In meetings with students, the audit team was told that students would use their programme handbooks to find out how to invoke a complaints procedure, and would normally turn to local staff for advice in this area. However, the team found that a

significant number of such handbooks did not contain any information about how to make a complaint and/or an academic appeal. The team learned from later meetings that the complaints and academic appeals procedures were made available to students in the University Student Handbook distributed in the first year of study, and thereafter available via the website.

152 This information and the content of programme handbooks, was being revised by the University in the light of the outcomes of a University complaint considered by the Office of the Independent Adjudicator. The new SLA would also be an opportunity to clarify and establish for staff the appropriate procedures. The draft SLA document given to the team had a section on appeals but made brief reference to complaints under the heading of 'Induction'. The University expects that the partners' complaints procedures should normally be invoked unless the complaint relates directly to the University's provision of services. The team concluded that the University should take measures to ensure that this allocation of responsibilities, with reference to the appropriate procedures for each institution, is made available to all students.

153 Most programme handbooks seen by the audit team gave useful information about both academic and personal support, and some gave details of support available at the University, together with University and local contact details. Students uniformly praised the local levels of support they were given, and a number of students cited personal and academic support as an important factor in their successful progression through the programme. In some cases students said that the support they received had been a highlight of their higher education experience. Use of University support mechanisms was rare and reflected the effectiveness of local mechanisms, but most students were aware of the possibilities of support from UBSU and of the support facilities available at the University. The link tutor was often seen as a point of contact should students encounter difficulties with the

provision of local support.

154 From the testimony of students and scrutiny of documentation, the audit team formed the view that personal development planning (PDP) was well embedded in the programmes offered by partners. Awareness of such elements of the programme was generally high among staff and students, and in some cases the team saw clear mapping of the PDP aspects of programmes within programme handbooks.

155 The induction of CP students is generally effective. From some meetings with students, a picture emerged of thorough induction; including pre-course packs and meetings, an induction at the partner and a further induction at the University, where students met the link tutor and became familiar with the library and online resources. In meetings with staff the audit team was told that decisions as to whether induction for UK students included a visit to the University and an introduction to learning support facilities, were a matter for each programme team to decide. However, central learning resources staff expected that all local partner arrangements would be offered a University induction visit.

156 Another important strand of support on some programmes is the mentor. On some programmes the mentor is chosen from a list and is not a workplace manager, on others the mentor is an employer. Students seemed very satisfied with the support provided by mentors. The audit team heard of practice on one programme where a pre-course meeting of students, their chosen mentors and line managers was held to discuss expectations and support for students on the programme. Students had clearly benefited from this process, and the University might wish to disseminate this practice.

157 The audit team encountered little evidence or comment on support for students with disabilities. Staff responsible for programmes had found that few students demonstrated any special needs. They considered that standard University support

mechanisms for students with disabilities would be utilised where necessary. The team noted the care with which the draft SLA specifies responsibilities for special needs support for both directly and indirectly funded students, and saw this as an enhancement of current practice.

Section 3: The collaborative provision audit investigations: published information

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

158 The University produces a range of published information for both potential and actual students. The overall responsibility for the reliability, accuracy and completeness of published information rests with the PVC (Strategic Planning and Communications).

159 The University's prospectuses highlight any provision delivered in the UK under collaborative arrangements. The memoranda of cooperation between the University and its collaborative partner is required to specify where the responsibility lies for checking the accuracy of marketing and promotional material distributed by the partner organisation. The audit team found that there was variability in the detail with which this is specified in the memoranda. The new SLAs are intended to supplement this by identifying the responsibility within the partner organisation and the University for developing, maintaining and approving all promotional material.

160 The Director of Academic Partnerships and Widening Participation has responsibility for the accuracy of materials used for marketing and advertising undertaken by the UK-based collaborative partners. The Director of International Relations has a similar responsibility in relation to overseas partners. The CPSED stated that collaborative partners are required to obtain prior approval for the content and presentation of any promotional material and this is specified in the written agreements between the University and its partners.

161 University staff acknowledged that this approval process was not always adhered to by partners. In addition, there have been two separate reports produced, one covering UK collaborative partnerships and the other overseas, which review the use of publicity material. Both reports highlighted inconsistencies in practice between partners. In both cases, the reports emphasised the need for further developmental work with partners and in the case of the overseas report, more rigorous 'in country' monitoring of publicity materials through local agents. The audit team noted the separation of areas of responsibility for UK and overseas partnerships and concluded that opportunities for the enhancement of University-wide processes in respect of such materials may be missed. The team recommends that it is desirable that the University strengthens its control over partners' use of publicity materials in both UK and overseas partnerships.

162 The CPSED stated that the University provides additional information for the partner to distribute to students. This includes details of the relationship between the University and the partner, how the quality assurance procedures work, academic regulations relating to assessment, information on how to appeal to the University and information on any rights of access that students may have to services, including libraries and IT facilities. Partners are also required to provide general information about their facilities, health and safety information, student discipline and complaints procedures. Partners also provide information on other academic regulations, including assessment, policies and procedures in relation to academic misconduct and appeals. A programme handbook which incorporates the programme specification, details of the curriculum, assessment scheme and reference to the relevant regulations, timetabling, staff names and contact points is also required from the partner.

163 UK-based students admitted to programmes delivered under indirectly funded collaborative arrangements also receive a copy of the University of Bolton Student Handbook and a CD containing information about the University's regulations, policies and procedures. UK students on directly funded programmes and overseas students are referred to the electronic copy of the Handbook on the University website, although the audit team found it difficult to navigate to sections on, for example, appeals and complaints. Students also receive a module guide at the start of each module.

164 The CPSED acknowledged that the procedures relating to the provision of information to students on collaborative programmes have not been consistently applied and there has also been a 'lack of clarity in the arrangements and responsibility for monitoring the quality of information'. The University has made a number of changes since the institutional audit which it hopes will address these problems. These changes include the review of the responsibilities of the ACS, the formation of the CPWG, the appointment of the Director of Academic Partnerships and Widening Participation and the development of the role of the recently appointed Director of International Relations in managing overseas collaborative arrangements.

165 The audit team found significant inconsistency in the structure and content of programme handbooks and module guides. In particular, programme handbooks are one of the sources of information on University procedures for complaints and appeals and the team recommends that the University explores ways in which greater consistency across departments and collaborative partnerships can be introduced.

166 Staff are making increasing use of WebCT to provide students with module related information and learning materials. Much information is also available on the University website which provides access to a range of information for off-campus learners. The University was investigating the procurement and implementation of a Content Management System. This is envisaged to enable the University to improve its editorial policies, workflow and approval processes.

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

167 The audit team reviewed the University's progress in relation to Teaching Quality Information (TQi) and found that it had uploaded all TQi requirements to date, including external examiner reports for the collaborative programmes.

Findings

Findings

168 An audit of the collaborative provision (CP) offered by The University of Bolton (the University) was undertaken during 20 to 24 November 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. As part of the CP audit process, the audit team visited three of the University's partner organisations in the UK where it met staff and students. This section of the report summarises the findings of the audit. It concludes by identifying features of good practice that emerged during the audit, and making recommendations to the University for action to enhance current practice in its collaborative arrangements.

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

169 The University's mission is to provide accessible, professionally focused education, and it uses CP to extend its portfolio of such provision through partners, whether local or overseas. The great majority of students studying with the University through CP do so part-time.

170 The framework for managing the University's CP is rooted in its framework for managing on-campus provision. The standard framework and associated procedures are supplemented as necessary by additional elements specific to managing CP. In particular, new partners of the University are appraised by a formal process.

171 Academic standards are established through a rigorous validation process and external examiners are key to monitoring academic standards. Academic Board has the ultimate responsibility for maintaining the University's oversight of academic standards and quality for all the University's provision.

172 Student feedback is used in a variety of ways by the University, most formally, in its annual monitoring process, through which action plans are drawn up in response to issues raised by students, external examiners and staff. Although the audit team found inconsistencies and variety in the mechanisms used to elicit students' views, the students and staff met by the team found the University to be responsive.

173 The audit team found that the University uses CP successfully to extend its mission and concluded that, overall, its approach to managing its CP is well founded and well documented. The University responds quickly and appropriately to its partners and students. However, the team identified a number of areas where implementation could be strengthened, including the consistency of the interpretation and implementation of the University's policies and procedures. The team also found examples where serious issues had arisen where, although the University had responded appropriately and promptly, there had been no formally recorded oversight.

174 During the audit process, the audit team found that the University's collaborative register did not accurately characterise all partnerships and that there was not always a shared understanding among senior staff of the nature of all partnerships. The team found variability in its memoranda with its partners and learned that the University does not regard these memoranda as legally binding. The team also found a lack of clarity in the University's approach to overseas partnerships where English is not the sole language used.

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

175 The CPSED described the approval process as 'a testing, peer assessment-based process', and provided separate descriptions for programme validations and partner appraisal

for collaborative programmes. From the scrutiny of documentation, visits to partner institutions and discussions with staff, the audit team concurred with this view, finding the processes for approval of new programmes and/or partners to be effective and in line with the *Code of practice for the assurance of academic quality and standards in higher education (Code of practice)*. The validation process normally involves external panel members, although the team found some inconsistencies in the interpretation of University regulations in this area.

176 The process of periodic review of CP involves subject areas being scrutinised on a five to six-year cycle. The audit team found the existing processes to be rigorous, normally involving external panel members and incorporating on-site overseas visits. The CP self-evaluation document (CPSED) stated that a new form of periodic review is to be introduced in 2006-07, based on three forms of review, depending on the nature of the CP. The team found that the new process had yet to be used and the procedures were yet to be fully appreciated by staff who met the team. Moreover, the guidance on periodic review available in the Quality Assurance Manual website did not, at the time of the audit, reflect the new methodology. If the new process is to be implemented, the team would encourage the University to ensure that the guidance given to staff is both accurate and current.

177 All University programmes are subject to annual monitoring, including programmes delivered as part of a collaborative partnership, whether or not they are linked to a University-based programme. The annual monitoring approach involves a four-stage approach. The audit team found the University's processes for annual monitoring to be rigorous and aligned with the *Code of practice*. However, the team felt that the University might wish to monitor the process, especially given the recent introduction of a further stage, for CP, into an already complex process. The team also found that the timing and detail of the consideration of the annual monitoring documents varied

between departments and recommends that the University reviews this. The team found the innovative use of the Education Department's website to enable active participation by collaborative partners in the annual monitoring process for the Postgraduate Certificate in Education/Certificate in Education (PGCE/CertEd) to be an example of good practice.

178 The CPSED stated that the University is committed to securing effective student representation to help inform its processes for monitoring and enhancing the quality of the learning experience. It acknowledged the difficulties in securing representation at all levels and that there is some variability in the arrangements in departments and across partnerships. The commitment is demonstrated by the continuing investment in the Student Representation Project.

179 The audit team was told of the procedures for securing and training student representatives and providing training packs. The team found that there was some variability in the implementation of student representation across some collaborative partnerships and in the accessibility of the training packs. Students were, however, generally satisfied that they had appropriate opportunities to raise any concerns, and the team found that representation operated effectively on committees, especially at programme level, and University responsiveness to issues raised by student representatives was good.

180 The audit team found evidence of the effective use of employer feedback as part of the validation process and the University is currently reviewing its employer liaison strategies. The University has set up an alumni office and part of its role will be to facilitate the securing of feedback from graduates.

181 The feedback from CP students through the University of Bolton Students' Union (UBSU) survey undertaken for the purpose of the CP audit, was generally positive and the University is currently considering its findings. The audit team was interested in whether the survey would be repeated in the future, but were informed that a decision had not yet been

made. The team formed the view that there would be a clear benefit in repeating the exercise. Formal module and programme evaluation takes place but there is considerable variability in practice and the outcomes of such evaluation are not always considered by course committees. The University might wish to include module evaluation in its considerations in reviewing the consistency of implementation of policies and procedures.

182 The CPSED acknowledged that there was a need to improve the use of data sets and their analysis in monitoring its CP. This view was borne out in meetings with staff. There were some instances of very good use of data for monitoring but the audit team found that this was not the norm. Data is produced centrally and monitoring data sets are constructed by a member of staff from the Mathematics area. However, many partners compile and analyse their own data. The University is working on the development of a core specification for the data sets and method of analysis. The team recommends that it is desirable for the University to continue to enhance the provision and analysis of collaborative data sets to ensure their appropriate use at local and institutional levels, so as to ensure a more consistent and systematic approach to the quantitative aspects of monitoring its CP.

183 The audit team found that there was evidence that the level of staffing and the quality of the staff teaching on the University's awards are considered as part of the partner institutional approval and programme validation process. The ongoing monitoring of this is then considered at periodic review, and through the link tutors.

184 The primary focus is on UK collaborative partners since the CPSED stated that University staff deliver the programmes on overseas collaborations with local tutor support. However, the audit team identified that there have been occasions where provision was delivered by staff from overseas partner institutions, either through direct delivery or through tutorial support. The team was told that development of overseas partner staff is undertaken through mentoring by visiting University staff.

185 The University informed the audit team that the partner institutions tended to have their own staff development procedures but these are supplemented by those of the University. Accounts given by staff in meetings with the team and the visits to partners confirmed that these processes were in place and effective in ensuring that adequate and effective staff development is provided at the partner institutions. On the basis of the available evidence, the team found that the University was ensuring that effective procedures existed to review the suitability of staff engaged with collaborative programmes.

186 The link tutor plays a key role in the successful operation of collaborative partnerships. The staff at the partners clearly valued the effective liaison and support provided through the link tutor. The link tutors who met the audit team understood their roles and appeared to be extremely committed to supporting the partner institution. However, the team identified that there was no staff development specific to link tutors nor was there a University-wide, documented description of the role. Consequently, the team recommends that it would be desirable that the University formalises a core definition for the link tutor role and ensures that appropriate staff development is in place.

187 The audit team found that there was a process of scrutiny of learning resources as part of the validation process, although in the case of overseas CP this does not usually involve a visit by a learning resources specialist. In discussions with students, the team found that there was broad satisfaction with the provision and maintenance of learning resources, although there were some instances of partnerships occasionally operating with inadequate resources. The online resources provided by the University, both via WebCT and through the website, were seen as particularly useful by students. There are some restrictions on access to University learning resources by directly funded students, although the team saw evidence of the University working with partners to overcome these. The team concluded that the University's procedures to assure itself of the quality of learning resources in CP are generally effective.

188 The audit team found that the provision of academic and pastoral support offered to students was generally good. The main emphasis is the provision of such support locally and, although different models operated in partners, there was evidence that the support was effective. The team found that the induction of students was effective, and centred on the partner institution, but often involving significant direct input from the University. There was variability in the clarity of the procedures for student complaints and appeals due to the variability of the programme handbooks. The team considered that the University's procedures to assure itself of the quality of the academic guidance and personal support received by CP students are effective.

189 Overall, the audit team concluded that the University's procedures are fit for purpose and carefully operated so as to be effective in ensuring that programmes were properly approved, monitored and reviewed, with quality assurance and enhancement sought. From scrutiny of the material made available to it, and from meetings with partners, institutional staff and students, the team concluded that the University's management of the quality of the educational provision in collaborative programmes was effective.

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

190 The University has a number of mechanisms for safeguarding the academic standards of its awards gained through CP; including programme approval and review processes with external involvement, accreditation by professional, statutory and regulatory bodies (PSRBs), and the appointment of external examiners.

191 The audit team noted that there was some inconsistency in the guidance on external membership of approval and review panels provided by the Validation Handbook, and also noted the University's intention to adopt a

more consistent approach to external academic membership. It also noted some variability in the input from practitioners and employers to the approval and review process. The team concluded that it would be desirable for the University to review the Validation Handbook guidance to ensure an appropriate and consistent approach to external membership on approval and review panels.

192 The CPSED stated that the University believes that its procedures for involving and responding to external agencies in programme-level review and accreditation are fundamentally sound. The audit team examined the responses to the 2004-05 Ofsted inspection and the Chartered Institute of Building and The Association of Building Engineers accreditation reports and found that good use is made of accreditation process and the reports. The team noted the discussion of PSRB reports at the Academic Quality and Development Commitee (AQDC) and found there is an appropriate central overview of the accreditation process. The process makes an important contribution to the effectiveness of the University's maintenance of academic standards.

193 The CPSED stated that the policies and procedures relating to external examiners and their reports are fundamentally sound. The audit team concurred with this view and found that the detailed reports and the process by which they are considered protect academic standards effectively. The CPSED noted that appropriate action had been taken to rectify some shortcomings for reporting on CP. The University is encouraged to review the outcome of this action to ensure that it provides for a more effective evaluation of CP. In the light of the overall evidence, the team considered that the University has effective mechanisms for safeguarding the academic standards of its awards gained through CP.

194 The audit team noted a lack of clarity with regard to assessment in languages other than English, and also there was a need to ensure that serious problems affecting academic standards in CP were clearly recorded within the University's deliberative structures. It

considered it advisable that the University develops polices and procedures to meet both these concerns.

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

195 The CPSED stated that the University addressed the requirements of the Academic Infrastructure in a reflective rather than a compliant manner and was addressing developmental issues to further enhance the engagement of partners with external reference points. The audit team found that the process of programme approval does embed the use of *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ) and subject benchmark statements. Guidance on both is given to partners. The team encourages the University to pursue its plans to further formalise and enhance the engagement of partners with external reference points.

196 The audit team noted amendments to the CP Procedures Manual and draft amendments to the quality assurance procedures to align the University's policies and procedures to the revised *Code of practice, Section 2*. It also noted extensive discussion of FHEQ issues at AQDC. Other than the lack of alignment of its current memoranda of agreement to *Precept A10* of the *Code, Section 2*, the team was satisfied that the University is addressing the requirements of the Academic Infrastructure in an appropriate way.

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

197 The audit team found the CPSED to be a well-structured document that provided a very helpful basis for the audit. The use of subheadings relating to 'Issues and solutions' and 'Good practice' in most sections of the

document demonstrated the University's capacity for self-evaluation. A further section on 'Enhancement' enabled the team to understand the actions planned by the University to address identified concerns in each area of practice. Thus the institution's capacity to both reflect on current practice and formulate actions to enhance practice and maintain academic standards was well illustrated in the CPSED. While most sections of the CPSED were comprehensive, others such as the section on academic guidance and personal support would have benefited from more detail.

198 The CPSED was well referenced in relation to policy and procedures, and also gave useful examples of practice. References were available to the audit team on a CD-ROM accompanying the CPSED. This comprehensive reference resource reflected the openness of the University to critical comment and feedback. The team found that this openness was an important feature underpinning the University's overall approach to quality assurance and enhancement.

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

199 Following the report of an internal audit of the University's UK-based CP, the University had put in place before the present CP audit some measures that have led to enhancement of the management of its CP. In particular, the audit team found that the appointment of a Director of Academic Partnerships and Widening Participation, and the establishment of the CP Working Group, had a significant positive impact on UK partnerships.

200 In its CPSED, the University identified a number of enhancements that it plans to introduce, the most significant of which is the need to introduce service level agreements (SLAs) for UK CP. SLAs are intended to serve as an adjunct to the memoranda which will make the responsibilities of each partner explicit in a way that the memoranda do not. Having seen

a prototype of what will become a web-based tool, the audit team formed the view that this innovative and carefully designed approach will be valuable to the University and its partners.

201   For 2006-07, the University has strengthened its annual monitoring procedures by adding a section specific to CP, and by requiring departments to work with partners to produce an Annual Programme Review Report for CP. An agreed dataset for UK CP is being developed to facilitate evaluation at the local level. Also for 2006-07, the University has introduced a new framework for the periodic review of its CP. Although it was too early to see these in use, the audit team regarded these enhancements as appropriate.

202   The audit team learned that there are no immediate plans to introduce SLAs for overseas CP. This was one of a number of examples which led the team to conclude that the limited opportunities for sharing experience across all its partnerships, UK and overseas, could undermine the potential for enhancement while giving rise to further inconsistencies. The team recommends that it would be desirable for the University to maximise the potential for enhancement by the appropriate coordination of systems and procedures for UK and overseas collaborative provision.

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

203   The University has procedures in place for the approval and verification of publicity material. Procedures vary depending on whether the partnership is a UK or an overseas collaboration. Generally, prospectus, leaflet and web-based publicity information is approved by the University prior to publication, although the audit team found examples where this did not occur. The University has recently developed procedures to monitor the publicity publications and websites of all its partner institutions. However, the team recommends that it is desirable for the University to strengthen its control over partners' use of publicity materials in both UK and overseas partnerships.

204   Transcripts are produced by the University for all students enrolled with the University. Other published information such as programme specifications and programme handbooks are considered as part of the validation and review process. However, the audit team found that inconsistencies existed in the information provided to students through programme handbooks and, therefore, urges the University to find ways in which greater consistency in the documentation issued to students can be achieved across departments and collaborative partnerships.

205   During the visit the audit team assessed the University's progress in relation to Teaching Quality Information (TQi). The team found that it had uploaded all TQi requirements to date, including external examiner reports for the collaborative programmes.

Features of good practice

206   Of the features of good practice noted in the course of the CP audit, the audit team noted in particular:

i   the responsiveness and support demonstrated by the University at all levels to its collaborative partners and students; from the initial proposal of new collaborative partnerships through to their implementation and operation (paragraphs 33, 108, 114, 172)

ii   the innovative use of the website to enable active participation by the collaborative partners in the annual monitoring process for the PGCE/CertEd (paragraphs 62, 177).

Recommendations for action

207   The University is advised to:

i   ensure that it has effective mechanisms in place for maintaining a complete and accurate record of each relationship within its collaborative provision portfolio so that appropriate institutional oversight can be applied (paragraph 30)

ii   develop further its institutional strategy and policies regarding the use of languages other than English in the teaching, assessment and support of its collaborative programmes overseas (paragraph 32, 79)

iii   review the extent to which the interpretation and the implementation of its policies and procedures is appropriately consistent within departments and across all collaborative partnerships (paragraphs 42, 60, 62, 65, 112, 113, 115, 151, 165, 181, 182, 191)

iv   ensure that any serious issues with respect to collaborative provision, and the University's response to these, are clearly recorded within the University's deliberative structures (paragraphs 43, 83)

v   put in place legally binding partnership memoranda that better protect the interests of the University and its students (paragraph 59).

208 In addition, the University may wish to consider the desirability of enhancing its quality management arrangements by:

vi   maximising the potential for enhancement by the appropriate coordination of systems and procedures for UK and overseas collaborative provision (paragraphs 44, 47, 50, 144, 202)

vii   reviewing the Validation Handbook guidance to ensure an appropriate and consistent approach to external membership on approval and review panels (paragraphs 77, 191)

viii continuing to enhance the provision and analysis of collaborative data sets to ensure their appropriate use at local and institutional levels (paragraphs 48, 63, 125, 182)

ix   formalising a core definition for the link tutor role and ensure that appropriate staff development for the role is in place (paragraphs 132, 186)

x   strengthening its control over partners' use of publicity materials in both UK and overseas partnerships (paragraphs 161, 203).

Appendix

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

The University welcomes the collaborative provision audit report, which provides a generally accurate account of the University's approach to the strategic and operational management of its collaborative provision. Alongside the report of the 2005 institutional audit, the collaborative provision audit report confirms the continuing effectiveness of the University's arrangements for the management of the standards and quality of its programmes.

The report also identifies features of good practice which reflect favourably on the contributions, commitment and professionalism of University and partner organisation staff. The University was particularly pleased to note that the report recognises the truly collaborative, responsive and supportive nature of our relationships with partners and the way that this is exemplified in a particular aspect of the operation of one of our larger, longstanding UK partnerships.

A number of the recommendations made in the audit report were already in hand at the time of the audit and/or have been addressed subsequently. Other matters are being embraced within the pre-existing enhancement plan for the University's collaborative provision.

Overall, the University viewed the audit as a constructive and professionally conducted peer review process, the outcomes from which will continue to be helpful to us as we further develop the strategic and operational management of our collaborative provision.