University of Bradford

Preface

The Quality Assurance Agency for Higher Education (the Agency) 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 the Agency carries out reviews of individual HE institutions (universities and colleges of HE). In England and Northern Ireland this process is known as institutional audit. The Agency operates similar but separate processes in Scotland and Wales.

The purpose of institutional audit

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

- providing HE, awards and qualifications of an acceptable quality and an appropriate academic standard; and

- exercising their legal powers to award degrees in a proper manner.

Judgements

Institutional audit results in judgements about the institutions being reviewed. Judgements are made about:

- the **confidence** that can reasonably be placed in the soundness of the institution's present and likely future management of the quality of its programmes and the academic standards of its awards;

- the **reliance** that can reasonably be placed on the accuracy, integrity, completeness and frankness of the information that the institution publishes, and about the quality of its programmes and the standards of its awards.

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

Nationally agreed standards

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

- *The framework for higher education qualifications in England, Wales and Northern Ireland* (*FHEQ*), which include descriptions of different HE qualifications;

- The *Code of practice for the assurance of academic quality and standards in higher education*;

- subject benchmark statements, which describe the characteristics of degrees in different subjects;

- guidelines for preparing programme specifications, which are descriptions of the what is on offer to students in individual programmes of study. They outline the intended knowledge, skills, understanding and attributes of a student completing that programme. They also give details of teaching and assessment methods and link the programme to the FHEQ.

The audit process

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

The main elements of institutional audit are:

- a preliminary visit by the Agency to the institution nine months before the audit visit;

- a self-evaluation document submitted by the institution four months before the audit visit;

- a written submission by the student representative body, if they have chosen to do so, four months before the audit visit;

- a detailed briefing visit to the institution by the audit team five weeks before the audit visit;

- the audit visit, which lasts five days;

- the publication of a report on the audit team's judgements and findings 20 weeks after the audit visit.

The evidence for the audit

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

- reviewing the institution's own internal procedures and documents, such as regulations, policy statements, codes of practice, recruitment publications and minutes of relevant meetings, as well as the self-evaluation document itself;

- reviewing the written submission from students;

- asking questions of relevant staff;

- talking to students about their experiences;

- exploring how the institution uses the academic infrastructure.

University of Bradford

NOVEMBER 2003

Institutional audit

Contents

Summary

Introduction

A team of auditors from the Quality Assurance Agency for Higher Education (the Agency) visited the University of Bradford (the University) from 10 to 14 November 2003 to carry out an institutional audit. The purpose of the audit was to provide public information on the quality of the opportunities available to students and on the academic standards of the awards that the University offers.

To arrive at its conclusions the audit team spoke to members of staff throughout the University, to current students, and read a wide range of documents relating to the way the University manages the academic aspects of its provision.

The words 'academic standards' are used to describe the level of achievement that a student has to reach to gain an academic award (for example, a degree). It should be at a similar level across the UK.

Academic quality is a way of describing how well the learning opportunities available to students help them to achieve their award. It is about making sure that appropriate teaching, support, assessment and learning opportunities are provided for them.

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

Outcome of the audit

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

- broad confidence can be placed in the soundness of the University's current and likely future management of the quality of its programmes and the academic standards of its awards. Confidence in the capacity of the University to manage the quality and standards of the awards in collaborative provision, the focus of which for the purposes of this audit is Bradford College (the College), is limited;

- the judgement on collaborative provision is made in the context of the need to formalise existing arrangements and the report acknowledges the quality of provision offered by the College. In coming to both of these judgements, the team considered that the continuing validity of the statements of confidence is dependent on a fundamental review of the University's quality strategy and arrangements for quality assurance.

Since the audit QAA has been provided with information that indicates that appropriate action has been taken by the University in response to the findings of this report. As a result the audit was signed off in June 2005.

Features of good practice

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

- the University's commitment to the regional community;

- the value of the University's programme specifications in supporting course approval processes and in providing information for students;

- the University's efforts to combine major course reviews with those required by professional, statutory and regulatory bodies;

- the induction and mentoring of new staff;

- the joint training and staff development initiative with the College; and

- the University's commitment to widening participation and to catering for the needs of a diverse student body.

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 and standards of the awards it offers are maintained. It is essential that the University:

- on the basis of the evidence relating to the partnership with the College, reviews and modifies monitoring processes to ensure effective oversight of its collaborative provision and secures appropriate and formal agreements with the College.

The audit team advises the University to:

- without delay, progress the work to define assessment levels to ensure consistent standards across the University;

- without delay, initiate a review of the strategy and structures for the management of quality and standards;

- review the effectiveness of the structures and processes for annual monitoring of academic provision;

- in collaboration with the student body, develop effective and transparent arrangements for student participation in all appropriate quality assurance processes; and

- ensure that the current review of the tutorial system delivers an effective and appropriate level of support across the University.

It would be desirable for the University to:

- consider how it could improve the extent to which students feel they are informed of the outcomes of the feedback they provide and the manner in which it is employed; and

- consider furnishing either the Academic Policy Committee or the Quality Assurance Subcommittee with statistical analyses of student progression and completion across the full range of the University's provision, including that which is offered in partnership with other organisations.

Business and Management, Clinical Sciences, Engineering and Peace Studies

To arrive at the conclusions and recommendations in the paragraphs above, as well as speaking to staff and students and receiving information about the University as a whole, the audit team also looked in detail at several individual programmes to find out how well the University's systems and procedures were working at that level. The University provided the team with documents, including student work and, here too, the team spoke to staff and students. The team was able to confirm that the standard of student achievement in the programmes is appropriate to the titles of the awards and their location within *The framework for higher education qualifications for England, Wales and Northern Ireland* (*FHEQ*), published by the Agency. The team was also able to state that the quality of learning opportunities available to students is suitable for a programme of study leading to the awards.

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 the Agency 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 has responded actively to the *FHEQ*, subject benchmark statements and guidelines for programme specifications. The University does not have a comprehensive and coordinated approach to the evaluation of the precepts contained in the *Code of practice for the assurance of academic quality and standards in higher education* (*Code of practice*) and has not yet completed a full consideration of the

sections of the *Code* relating to collaborative provision as it applies to the College and student assessment. The individual programmes looked at by the team confirm the overall institutional approach to the academic infrastructure. Scrutiny at the level of the discipline also showed that programme specifications are widely shared with students. From 2004, the published information set will include the recommended summaries of external examiners' reports and feedback from current students for each programme. The University is working towards meeting this expectation and is preparing for the publication of its information set.

Main report

Main report

1   This is a report of an institutional audit of the academic standards and quality of programmes at the University of Bradford (the University). The audit was undertaken during the week commencing 10 November 2003. The purpose of the audit was to provide public information on the quality of the University's programmes of study and on the discharge of its responsibility for its awards.

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

3   The audit checked the effectiveness of the University's procedures for establishing and maintaining the standards of its academic awards; for reviewing and enhancing the quality of the programmes of study leading to those awards; and for publishing reliable information. As part of the audit process, according to protocols agreed with HEFCE, SCOP and UUK, the audit included consideration of an example of institutional processes at work at the level of the programme, through discipline audit trails (DATs), together with examples of those processes operating at the level of the institution as a whole. The scope of the audit encompassed all of the University's provision and collaborative arrangements with the College (the College), but not its collaborative arrangements with other partners which will be the subject of a separate, future audit.

Section 1: Introduction: the University of Bradford

The institution and its mission

4   The University was established in 1966 by Royal Charter, having developed from the Bradford Institute of Technology (founded 1957), which succeeded Bradford Technical College (1882). The latter had its roots in the mid-nineteenth century in the Bradford Schools of Learning, Design and Building. This background of applied, interdisciplinary education with a technical focus provides a foundation which still underpins the ethos, structure and culture of the institution today. The main campus is currently sited in the 'West End' of the city with sites in Trinity Road which houses a Health Centre and the School of Health Studies and, three kilometres away, Heaton Mount in Emm Lane houses the School of Management.

5   The University had 9,959 students registered during 2002-03. These included 6,465 students studying full-time at undergraduate level, and 970 at postgraduate level. Additionally, 1,462 students were studying part-time at undergraduate level and 1,062 at postgraduate level.

6   The current University structure is organised into eight academic schools, each responsible for a range of subject disciplines. The Schools of Engineering, Design and Technology; Archaeological, Geographical and Environmental Sciences; Informatics; Management; Health Studies; Life Sciences; Social and International Studies; and Lifelong Education and Development; are supported by two administrative units: Learning Support Services (LSS) and Corporate and Central Services.

7   A particular feature of note within the academic provision at the University is the long-standing, close geographical and collaborative relationship which exists with the College. The combined resources of the College and the University represent a major investment in the City of Bradford and provide a diverse range of progression routes through a comprehensive range of programmes. The detailed discussions and proposals towards a possible merger between the University and the College were discontinued in July 2003 and have been replaced by a Continuing Collaborative Strategy Group to manage the quality agenda, estates issues and the student focus.

Mission statement

8   The University motto of 'Making Knowledge Work' is supported by the aim 'to be a centre of excellence in both teaching and research in a focussed and coherent range of professional and applied disciplines'. High priority is accorded to assuring the effectiveness of quality assurance and enhancement practices through regular assessment, monitoring, review and continuous improvement processes. The strategic aims and corporate objectives are set out in the Corporate Plan 2000 to 2005 and define the commitments in pursuit of the mission as 'quality, excellence and…developing people'.

Collaborative provision

9   The University offers a large portfolio of modules, joint awards, undergraduate and postgraduate awards in collaboration with other institutions, primarily the College. The collaborative provision of the College was addressed within the scope of this audit (see paragraphs 123 to 134 for further comment).

10   A number of international franchise arrangements exist with partners in, for example, India, Singapore, Malaysia, Hong Kong and Barbados. The majority of these programmes are linked to the School of Management.

11   As a member of the West Yorkshire Consortium (Foundation4Success) with Leeds Metropolitan University and the University of Huddersfield, the University is leading the quality assurance processes for the Foundation degree in Health and Social Care. The programme is franchised to the College, Thomas Danby College, Shipley College and Wakefield College.

12   A joint initiative with the Medical School of the University of Leeds and the College to deliver the BSc (Hons) in Clinical Sciences and Foundation year in Clinical Sciences/Medicine commenced in 2002 supported by Department of Health (DoH) and HEFCE funding. This programme offers routes to the MBChB programme at the University of Leeds, thus widening participation into medicine and meeting the aims of the University's strategy.

Background information

13   Published information available for this audit included:

- the previous Quality Audit report for the University (May 1998);
- eight Agency subject review reports published since 1998;
- seven Agency subject review reports published since 1998 for the College;
- information available on the University web site.

14   The University provided the Agency with:

- an institutional self-evaluation document (SED);
- a student written submission (SWS);
- four discipline self-evaluation documents (DSEDs) for the provision selected in Clinical Sciences, Engineering, Management and Peace Studies;
- the Corporate Plan 2000 to 2005;
- the Annual Operating Statement 2002;

- an External Examiners' Information pack and Induction pack;
- a Board of Examiners' Information pack;
- a Course Approval and Review Panel Information pack;
- University and the College prospectuses;
- access to the intranet;
- sections of the Quality Assurance Handbook.

15   Professional Review Body reports were made available within the supporting information for the relevant DATs including the award EQUIS from the European Foundation for Management (2003) and the Association of MBAs (AMBA) (1999) accreditation for management and business programmes, IMechE for Mechanical Engineering (2001), and General Medical Council approval for year 1 of the BSc (Hons) Clinical Sciences.

The audit process

16   Following a preliminary meeting held at the University on 27 February 2003, the Agency identified that four DATs would be conducted during the audit visit. The institutional SED and supporting documents were received in June 2003 and the DATs were selected by the audit team. The DSEDs and supporting information were received in September 2003. Each of these documents was written specifically for the purpose of the audit.

17   The audit team visited the University on 8 and 9 October 2003 for the purpose of exploring with the Vice-Chancellor and Principal of the University, senior members of staff and student representatives matters relating to the management of quality and standards raised by the SED. At the close of the briefing visit a programme of meetings for the audit visit was developed by the team and agreed with the University.

18   The University Students' Union (UBU) participated in the preliminary meeting with the Agency representative and submitted a written submission (SWS) expressing their views of the student experience at the University. UBU developed a questionnaire which was distributed within the Union and on the UBU web site. Course representatives were also consulted via email and an invitation was extended for them to attend a Course Representative Forum. The Academic Affairs Officer developed the SWS based on the 77 returned questionnaires and this was shared with the institution. The submission identified the low participation of students generally and, more specifically, noted the lack of representation of

student views from the School of Health Studies and from part-time students. The report identified students' views on the strengths and areas for improvement of the student experience. These were explored during the audit visit.

19   The audit visit took place from November 10 to 14 2003 and included meetings with staff and students of the University and the College. The audit team was Dr D H Furneaux, Mrs R Glenister, Professor P J Hicks, Professor J C P Raban, Dr C A Vielba, auditors, and Mrs R A Goggin, audit secretary. The audit was coordinated by Ms F R Crozier, Assistant Director, Development and Enhancement Group.

Developments since the previous academic quality audit

20   The report from the 1998 audit was generally favourable but highlighted several areas for further consideration by the University. These included the need to identify a focal point with clear responsibility for coordinating the institution's quality assurance and enhancement activities; develop a clear and effective policy for checking external perceptions of the general health of its courses, besides their academic standards (this related to quinquennial review arrangements); the extent to which it should seek to ensure that key skills are universally embedded within the curriculum; how departments in dispute might be given the opportunity to make academic representations to the Academic Policy Committee (APC) in relation to the standards of course documentation; how greater consistency might be secured in respect of the provision of information to students regarding the curriculum, student learning, assessment activities and student support; whether there is scope for more external participation in its course development, approval and standards monitoring process; the mechanisms used to promulgate its teaching quality enhancement strategies and practices; the mechanism employed to disseminate good practice; and, the ways in which its relationships with the UBU might be further strengthened.

21   Areas of good practice noted within this report included the annual course monitoring process; involvement of research students in monitoring and transfer procedures, and attention given by the Higher Degrees Committee to the safeguarding of standards of provision through appointment of a second external examiner in cases of difficulty or dispute; thoroughness of consultation processes regarding the development of generic level descriptors; rigour and thoroughness of the University's departmental admissions procedures and mechanisms employed to help ensure the quality

and accuracy of publicity materials; and, boldness and vigour with which it is confronting challenges involved in establishing standards across its diverse range of subject disciplines, a boldness which is combined with a willingness to listen, revise and adapt in response to staff opinion.

22   The University responded formally to this report in April 1999 specifying the measures it had taken in response to each of the matters for further consideration. Progress towards the relevant points is commented on within the main body of this report.

23   Major changes since the last audit were identified in the SED. These included the appointment of a new Vice-Chancellor in 1998 and again in 2001, with subsequent revision of governance processes and organisational structures. These changes prioritised commitment to quality as a means of ensuring the most effective achievement of the University's aims and objectives. The revised academic structure regrouped the staff into eight schools. This involved phasing out the three faculties and their associated boards and course committees.

24   The University is currently developing a new corporate strategy (2004 to 2009) for its future as a single organisation. In it the Vice-Chancellor acknowledges the merger activity as having 'significantly deepened our perception and understanding of the issues we face…and will help us chart our way forward'.

25   Since 1998, the University has undergone eight subject reviews, two developmental engagements and a review of the Foundation degree in Health and Social Care. The University uses key findings within the reviews by the Agency to inform the quality assurance processes and improvements have been recognised in subsequent visits. While the SED quoted features of good practice, it also noted the ways in which the weaknesses in the profile have been actioned through new policies and procedures. Weaknesses are identified as occurring mainly within Teaching, Learning and Assessment (mainly in assessment) and in Quality Management and Enhancement (QME). Responses have included new procedures on anonymous marking, double consideration of marks, processing of external examiners reports, and guidelines on the volume of assessment. In relation to QME the early criticisms of insufficiently rigorous application of central university systems at departmental level and in relation to key skills led to further work on the modular structure and uniform regulations. A systematic approach to key skills through the Excellence Plus strategy links with a personal

development planning process for students in four of the eight schools. In addition, following the overseas audit in Singapore (2002) the University implemented a review of quality assurance procedures for collaborative provision with overseas partners in January 2003.

26   The University has responded to issues raised in previous reports; however, this report revisits the key issues from previous reviews and findings are recorded within the relevant sections of the main report.

Section 2: The audit investigations: institutional processes

The institution's view as expressed in the SED

27   The SED made no explicit overarching statement as to how it assures the quality of its programmes and the standards of its awards. However, it did discuss the assurance of awards, and pointed to the standard unit descriptor, the use of learning outcomes and their linkage to *The framework for higher education qualifications in England, Wales and Northern Ireland* (*FHEQ*), and the regulatory framework as the means of assuring the standards of awards. Elsewhere it states that the external examiners and external experts provide an external perspective on the quality and standard of awards. In the last audit report the University indicated they were in the process of developing a Quality Strategy. This has not been taken forward and staff told the audit team that the strategy was 'embedded in everything they do'.

28   The University produces a Quality Assurance Handbook, published and mainly referred to in electronic format, and this is supplemented by additional guidance and institutional codes of practice on various issues. These documents are referred to throughout this report.

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

29   The SED identified procedures for new course approval, course monitoring, and the major review of awards as elements of the University's framework for managing quality and standards. In the absence of a quality strategy the audit team took the view that the committee structure related to quality assurance activities would be central to their understanding of how quality and standards are managed in the institution. A helpful diagram of the committee structure was available in the SED.

The main University committees concerned with quality and standards are the APC and its two subcommittees, the Quality Assurance Sub-committee (QASC) and the Learning and Teaching Sub-committee (LTSC). APC reports to Senate, the two subcommittees may report direct to Senate or to Senate via APC. Within each school there is a school board and a subordinate 'academic' committee, variously named in different schools. The way in which the structure worked and the roles of the committees at each level were discussed with staff during the visit. The team formed the view that the structure was complex and strongly hierarchical, containing seven layers of activity from a module level to the deliberations of Senate. Such a multilayered arrangement has inherent difficulties, particularly with the inevitable summarising and filtering of information as reports move up through the system and with the timescales in which decisions need to be made. These issues are discussed in more detail below (paragraphs 43 to 46). As a result the team was not convinced that Senate, as the most senior decision-making committee on academic affairs, was always able to take an informed overview as to what was being done in its name at lower levels in the organisation.

30   The SED characterised the style of the institution as 'evolving a more collegial and coordinated approach to quality management and enhancement through the development of closer links between central administration and support services, and the academic areas and Schools. Since the last audit there has been a recognised shift of emphasis towards the development of a more collective responsibility for the maintenance of academic quality and standards'. Discussions with various groups of staff on this issue centred on the approach the University took to the development, implementation, and monitoring of central policies, particularly those relevant to the maintenance of academic quality and standards. A picture emerged of an organisation that spent considerable time and effort developing and updating guidance and procedures, primarily in response to the academic infrastructure. This information is made available to schools, primarily in electronic format, through a Quality Assurance Handbook, various guidance notes, and University codes of practice.

31   The audit team was unable to identify a coherent policy with regard to the implementation and monitoring of such documents as those listed in paragraph 30. Schools would be expected to take note of the expectations placed upon them and react appropriately. The team was told that a central unit,

the Academic Standards and Support Unit (ASSU), had a facilitative role and would respond to requests for further guidance and advice from schools as they arose. There were a few examples where the implementation of the guidance was being monitored (for example, Volume of Assessment guidance - checked at course approval stage), and others (content of student handbooks, operation of the staff-student liaison committees (SSLC), assessment procedures) where monitoring was less apparent. As a result of the collegial rather than central approach to the implementation of the documents, there are potential implications for the consistency of academic standards and of the student experience across the institution; the team noted, particularly through its work in the area of the DATs, that practice was varied across the Schools.

32   The University introduced a new regulatory framework for its modular structure in 1997-98 following extensive consultation. Since then tensions have emerged between the need to ensure uniformity across the institution and the need to provide flexibility. The *Code of practice for the assurance of academic quality and standards in higher education* (the *Code of practice*), *Section 6: Assessment of students*, has been considered by the institution, and a corresponding University code has been developed using the *Code of practice* as a framework. One precept that has considerable implications for the setting and achieving of consistent standards across the institution is that referring to the publication and consistent implementation of clear criteria for the marking and grading of assessments. Currently there are several sets of marking and grading criteria in use and no such criteria exist at institutional level. The audit team was made aware of a consultation paper from the APC incorporating discussion of this issue, but in discussions the team was informed of a view that the proposals for institution-wide criteria went against the grain of autonomy at discipline level. In the team's view this issue will need firm executive action rather than a collegiate consultative approach if the assurance of consistent standards across the institution is to be achieved effectively within a reasonable timescale.

33   The focus on collaborative provision for this audit was the relationship with the College. The arrangements for the quality assurance of this provision are described in the SED as 'different but related' to those for University awards. Procedures for dealing with collaborative provision generally are described as the same as those operated internally by the University. The University does not have a specific central committee overseeing the quality assurance of collaborative provision. Schools have responsibility for collaborative provision within the specific discipline area and subsequent reports are considered alongside those for equivalent provision offered internally. The audit team noted that these arrangements may not have the capacity to take into account the inherent increased risk involved in the operation of provision based in other institutions.

34   The audit team concluded that the quality assurance processes and the associated committee structure had developed gradually over the years to a point where they were now overly complex, hierarchical and multilayered. Successive changes have been made in response to external developments to the point where the quality assurance arrangements no longer best serve the University's need to have effective, efficient, timely, appropriate and inclusive processes. Given the mutual decision not to merge with the College in the foreseeable future, and the complexity of processes involved, the team considers that it would benefit the University to conduct a complete holistic review of its quality assurance structures and processes.

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

35   The SED discussed the enhancement of quality and standards by describing various initiatives the institution intends to pursue. These include reviews of:

- the effectiveness of how the University listens to the student voice;

- the effectiveness and expectations of the personal tutor system;

- the effectiveness of the arrangements for quality related committees and the system of course approval and review;

- the usefulness and effectiveness of the approach to programme specifications; and

- the implementation of the national academic infrastructure.

36   The audit team discussed these proposed initiatives during the visit. Although one of the initiatives had been on the University's agenda for several years (the personal tutor system), staff the team met were not always aware of how these intentions were to be progressed. The lack of a strategic approach to enhancement in terms of linking with the Corporate Plan may help to explain why personal tutoring, for example, has not received more prompt and effective attention. This issue was first raised in an Annual Monitoring

overview in 1997-98 and also identified as an issue in the 1998 audit report.

37   However, in the specific area of teaching quality enhancement, a more strategic approach has been adopted with the introduction of a Chancellor's Award for Distinguished Teaching and a well-established Teaching Quality Enhancement Group. In the audit team's view both these initiatives make an effective contribution to the recognition and enhancement of teaching quality.

38   In the audit team's view, the strategic approach to teaching quality enhancement could be extended to other quality and standards issues, particularly if they are linked back to priorities in the Corporate Plan and the role of key committees.

Internal approval, monitoring and review processes

Programme approval

39   The procedures for processing a proposal for new courses or units are detailed in a Handbook for the Approval of New Courses and Units and Changes to Existing Courses and Units (the Handbook) and involve two main phases. Proposals for new programmes/courses are normally initiated at school level, and phase one approval, which includes consideration of the potential market and resourcing issues, is signed off by the school dean prior to consideration by the Working Group for New Course Development (WGNCD). WGNCD makes recommendations to the Planning and Budgeting Sub-committee, a joint committee of Senate and Council. In phase two the proposal is incorporated into the School Plan, phase 2A focuses mainly on resourcing and support issues, while phase 2B considers the academic implications. At this point formal approval by schools is required via school boards before submission of the proposal for consideration by a course approval and review team (CART).

40   The University has established a Course Approval and Review Panel (CARP) comprising nominated representatives from schools. From this panel, staff are assigned to one of eight school CARTs. Cross representation is a feature of these teams so that an internal/external perspective of proposals can be gained (for example, chairs of school CARTs are from a different specialist area). CARTs also contain 'external experts' who are appointed to the team for a fixed period. The Handbook contains detailed 'criteria for the consideration and approval of new course proposals by University Committee' and the process is administered by the ASSU.

41   Once the CART has considered the proposal it makes a recommendation to the QASC which in turn makes a recommendation directly to Senate. The Handbook describes various types of approval including approval subject to minor modifications. In this case final approval rests with the Chair of the CART. If issues of policy arise at QASC when discussing a course approval then these would be referred to APC.

42   The audit team noted that Senate received no documentation other than the list of courses when asked to formally approve them. Individual courses have been approved by Senate with several conditions, including being 'subject to the requirements of the CART, the LTSC, and consideration of the comments of the external expert'. In discussion, it was suggested that these conditions came under the 'approval subject to minor modifications' but it was unclear as to the justification for this designation. As Senate's official approval must be received before courses could be advertised, it is possible that this constraint was in part driving the process. These issues led the team to the view that the process as presently constructed was not serving the institution as well as it should. The process is clearly rigorous but its complexity can lead to long gestation periods for new courses. This conclusion is contributory to the recommendation concerning the holistic review of quality assurance processes.

Annual monitoring

43   The process of annual monitoring was commended at the last audit when Annual Monitoring Reports were based on the six areas of report used in subject review. The process has recently been revised, a narrative report is no longer required and there are now three main components to the reports: a tabular description and evaluation of good practice; an evaluation of how aims and learning outcomes of the programmes have been met; and an action plan in tabular format. The report continues to be supplemented by supporting information which consists of stage evaluation questionnaire results; admission, progression, award and destination statistics; external examiner reports and the departmental and/or University response, and an executive summary of SSLCs. The reports are produced by designated members of staff; course meetings are normally held to discuss the report and the draft is discussed at the School Teaching and Learning Committee or equivalent. The report is then submitted to the ASSU for consideration by an Annual Monitoring Team (AMT) selected from the CARP in the same way as for CARTs, except there is no external representation apart from that provided

by the 'internal external' representation, that is, internal members of staff but from a different specialist area. Each team reviews the separate undergraduate and postgraduate Annual Monitoring Reports for taught provision which are produced by a group of schools. Both verbal and written feedback is provided to schools. Formal reports of the outcomes of the AMT meetings are submitted to the QASC. The audit team became aware of variable practice across schools in the way in which programmes are reported upon. By agreement with ASSU, some schools programmes are grouped together, and some Annual Monitoring Reports cover a large collection of courses in a single report.

44   There have been some difficulties with the new process and authors have found the new format difficult and needed additional support and guidance. Variable response rates from students for their stage evaluation is an ongoing concern although good practice has been shared with departments by the AMTs. Departments are expected to forward copies of the Annual Monitoring Reports to the appropriate external examiners.

45   In the audit team's view the changes made to the Annual Monitoring Reports process have not improved it. There seem to be several weaknesses in the report framework in that it lacks cohesion and structure. For example, good practice may well be identified as part of a review process but making it a main element of the report seems to have resulted in authors searching for examples to satisfy the template. This has resulted in the inclusion of items more akin to normal procedures (for example, recording student attendance and standardised mark sheets) under the guise of good practice. The executive summary of SSLC was not always present in the examples provided to the team, and in discussion with students the team were made aware of two separate examples of quite serious issues brought to SSLC that were either not addressed or actively suppressed. The team discussed with staff the ability of the students to make their voice heard, with particular reference to their module/unit questionnaires. It was apparent that there was widely differing practice; the team was also told that formally the students had no role in the production of the Annual Monitoring Reports other than the completion of their stage questionnaires.

46   While the process for dealing with the reports, once produced, seemed generally sound, the audit team concluded that there was room for improvement in the current structure and production of the Annual Monitoring Reports and in the involvement of students. The report structure lacks cohesion and some staff have found it difficult.

The involvement of students in the process is minimal, and the student input to the process is inconsistent across the institution, and often weak. This conclusion is contributory to the recommendation concerning the holistic review of quality assurance processes.

Periodic review

47   The University carries out a regular major review of academic awards called Course Continuation Review (CCR), each award being reviewed at least once per six-year cycle. A formal set of guidelines, Handbook for Course Continuation Review Guidelines 2003-04, informs the process. These reviews are carried out by CART teams which are put together from the CARP as described above. The review team reports through the QASC and the APC to Senate. A particular feature of CCR is that external input is an integral part of the review. There is a requirement for at least one internal member of the review team to be from outside the area responsible for the provision, additionally an appointed external expert is required to attend the review. The Handbook recommends that students be given an opportunity to discuss their experience of the course with the review team. The audit team noted that there was no student representation on the review team. A comprehensive set of documentation is required, centred around a critical appraisal structured on the six areas of investigation described in the Agency's *Handbook for academic review*. The Handbook suggests that this structure facilitates links with annual monitoring.

48   For courses which are not undergoing CCR within two years, a process of mid-term review was introduced whereby programme specifications and supporting annexes were approved for the next academic year. These reviews were undertaken by sub-panels of the CART and took place either by scheduled meetings or by circulation of documentation and email. Once all programme specifications were developed, this process was no longer necessary.

49   The audit team concluded that the CCR processes were basically sound; there was both external and internal/external input, and the documentation used was well structured and sufficiently detailed to enable effective scrutiny. The formal inclusion of the student voice as an input is welcomed; the University may wish to consider including student representation on the review panel as a way of enhancing the student input and improving the inclusiveness of the student body in University processes. However, the way in which the external experts interacted with the process was consistent across schools.

External participation in internal review processes

50   The last audit report (1998) invited the University to consider 'how far it has a clear and effective policy for checking external perceptions of the general health of its courses besides their academic standards'. At that time there was divided opinion with the report identifying one view that there was sufficient internal expertise available but also 'growing dissatisfaction' among staff with the lack of externality within approval and review processes. The SED discussed general developments in externality, the one most relevant to the 1998 recommendation being that 'In 2000 a formal requirement was introduced for each new course proposal to be considered by an expert external to the University'.

51   External experts are appointed to the CARTs through a similar process to external examiner appointments. These appointments are for a period of three years with an option to extend for one year. The Handbook for CARP members says that external experts are asked to submit a written report on new course proposals/major modifications but are not normally expected to attend the meetings at which the proposals are discussed. The external experts are also required to submit a written report on CCR documentation and are invited to attend all CARTs at which CCR is carried out.

52   Common practice in the sector is to involve external advisers/experts fully in approval and review processes, the particular value of their contribution being obtained by full, frank, face-to-face debate at review meetings. To ensure the best possible use and involvement of external experts in the approval and review processes, the University may wish to consider requiring the experts to attend approval as well as CCR meetings. Relying solely on written input limits the possibility for the experts to inform developments and this would appear to be a missed opportunity. In addition, the University may also wish to reflect on the matter of the balance of advantage between the benefits of the continuity of a three-year appointment, familiarity with the provision and the staff in the University, and the possible disadvantages of a closer relationship than is comfortable when contentious observations need to be made. It also precludes the involvement of other externals who may be able to provide more expertise in the particular provision under consideration than the CART external experts. The limited involvement of externals in internal approval and review processes is contributory to the recommendation concerning the holistic review of quality assurance processes.

External examiners and their reports

53   The SED stated that external examiners play a key role as arbiters of the standards of programmes leading to awards of the University. It went on to say that they also provide 'an important external gauge…of the academic and pedagogic coherence of the course'. The University's definition of the role of its external examiners distinguishes between unit and course external examiners. The former are responsible for assuring the quality and standards of individual modules, while the latter hold the additional responsibility for assuring the overall quality of a course, and standards in progression and the final award of degrees and diplomas. Course external examiners are expected to attend the meetings of boards of examiners at which final awards are considered and, although the practice of holding *viva voce* examinations has been discontinued for reasons of equity, it is considered good practice for an external examiner to meet with students. Newly appointed external examiners are sent a comprehensive information pack which includes the ordinances and regulations of the University, various documents explaining the role of the external examiner, and a copy of the annual report form. They are also invited to attend an induction event. While no formal provision is made for external examiners to comment on the University's assessment policies, the audit team was informed that they have the opportunity to do so when they attend the induction event.

54   The external examiner report form is designed to elicit information on the procedures followed by departments together with more detailed comment on standards of assessment and student achievement. The reports are considered by the Pro-Vice-Chancellor (Learning and Teaching) and copied to the appropriate departments. External examiner reports are also analysed by the ASSU which prepares on an annual basis summaries for undergraduate and postgraduate provision. These summaries deal with both the positive and more negative comments made by external examiners and offer recommendations for action by the APC. It was evident that these summaries received careful consideration both by the APC and its QASC, and discussion within these committees resulted in a number of resolutions for further action.

55   It was stated in the SED that external examiners' reports are an integral part of the Annual Monitoring Review process and that Annual Monitoring Reports are sent to the appropriate external examiners. However, the audit team observed that in a number of cases external examiners had reported that they had

not received copies of the most recent Annual Monitoring Report. This had also been noted in the most recent ASSU summaries of external examiners' reports, and this was followed by a recommendation from the QASC that in future responsibility for sending Annual Monitoring Reports to external examiners should be transferred to the ASSU. In view of the University's commitment to the integration of the external examining procedure with annual monitoring and ensuring the 'closure of loops', the team viewed action taken by the University as a positive step.

External reference points

56   The SED identified improved 'externality' as one important feature of the University's approach to the maintenance of academic quality and standards, and stated that it has started to integrate the elements of the national academic infrastructure into its own quality procedures.

57   The audit team learned that the ASSU has performed a key role in both evaluating the University's arrangements against the precepts of the *Code of practice*, and in ensuring adherence to any subsequent requirements published by the University through the medium of its own codes of practice and Quality Assurance Handbook. The evidence available to the team indicated that Senate committees had considered the recommendations of the ASSU, and of the various working groups that had been established as each section of the *Code* was published. This, however, has tended to focus on the procedural implications of the *Code*. In any future review of its quality strategy, the University may find it helpful to take a longer-term view by considering the more fundamental issues which inform the continuing development of the *Code*, and to ensure that these issues are debated in full by the relevant committees of Senate.

58   The University is in the process of reviewing the recommendations of a working group on the production of programme specifications, and it is intended that this process should be completed during the current academic year. While there was some variation in the design and the level of detail provided by the programme specifications seen by the audit team, the majority were both comprehensive and written in an accessible style. The SED stated that the intended purposes of programme specifications are to support the course approval process and to provide information for students, and the audit team was able to confirm the value of the University's programme specifications in both respects. The University has addressed the implications of the *FHEQ* mainly

through the production of programme specifications and their approval by CARTs. This process has been supported by the dissemination, as early as 1999, of the then current work on level descriptors and by staff workshops convened by the ASSU and the Teaching Quality Enhancement Group (TQEG).

Programme-level review and accreditation by external agencies

59   Results from Agency subject reviews indicate a satisfactory and generally improving picture since the last audit. The University has identified its lowest scoring aspects as the assessment component of 'teaching, learning and assessment' and 'quality management and enhancement' and described these in the SED as being 'in common with many pre-92 Universities'. The SED identified the use of informal processes to resolve issues as a contributory factor to these lower scores and describes steps taken to improve this. Recent developmental engagements and a Foundation degree review have all achieved successful outcomes.

60   Many University awards are subject to professional, statutory and regulatory bodies (PSRB) accreditation. The SED explained that University policy is to design the curricula in partnership with representatives from professional areas, and where possible to undertake PSRB initial approval and accreditation reviews in conjunction with the University's own approval/review processes. A helpful table in the SED listing the outcomes of PSRB accreditations demonstrated a very satisfactory track record of approvals. The way in which the University engages effectively with the accreditations by external bodies and the successful combination of these events with the internal approval/review processes is an example of good practice.

Student representation at operational and institutional level

61   At institutional level, elected representatives from UBU sit on committees such as Council and Senate as well as the main teaching and learning committees. The latter include the APC, QASC and LTSC. There are seven student representative places on Senate (five undergraduate and two postgraduate), although currently a number of these places are vacant and students that spoke to the team, including sabbatical officers, appeared to be unclear about the process for filling them. A full list of the committees on which students are represented through UBU sabbatical officers is included in the SWS. Training in student representation is available from the National Union

of Students and most of the UBU sabbatical officers had availed themselves of this opportunity.

62   In its SED the University stated that at school-level, student representatives are invited to attend school boards. At departmental level, undergraduate and postgraduate students are elected or otherwise nominated by the student body to serve as course representatives. Departmental SSLCs provide a formal mechanism for student feedback on the quality of their learning experience. A University Code of Good Practice for Staff and Student Liaison is designed to ensure that this mechanism is used consistently across the University, and examples were provided in the SED to illustrate the effectiveness of SSLCs. Training for course representatives is organised by the University and culminates with a residential weekend. This has proved to be very popular with students and is well attended. In discussion with students, the audit team heard that committee meetings are attended by students. However, the UBU sabbatical officers did not feel fully prepared for committee work and they aim to be selective and focus on student issues.

63   The audit team found that in many instances students were not aware that they were invited to attend school boards, although this situation varied considerably across the different schools. Overall the view from students was that arrangements for student representation at the level of school boards were less than satisfactory and needed to be improved. This view was supported in the discussions with members of staff. Although the UBU Academic Affairs Officer is invited to attend all school boards it is often impractical for the officer to do so. Furthermore there is often no mechanism for electing representatives from within a school's student community to sit on the relevant board. As a response to this, the students themselves have devised the idea of forming a Course Representative Executive which would provide a means of ensuring that two course representatives from each school are nominated to attend school board meetings. This scheme is supported by the University and is in the process of being implemented.

64   Positive steps taken by the University to improve the effectiveness of student-staff liaison were welcomed by students. The students' view of SSLCs was that generally they provided a useful forum in which students were able to voice their concerns, although experiences varied across the schools. Students in some schools reported that issues which had been raised at SSLC meetings were not being dealt with effectively. One of the key areas of concern here is that deficiencies in the representation of students at school boards mean that it is frequently difficult or impossible to advance problems if they are not being dealt with satisfactorily at departmental level. Similarly issues raised by students in SSLCs form one of the inputs to the Annual Monitoring Review procedure, although without representation at school boards students have no way of knowing whether their concerns are being accurately conveyed through the system.

65   The University has recently recognised that students have a valid contribution to make to the approval and revalidation of programmes by involving student representatives in the CCR process. However, for the reasons outlined above there is currently a lack of student representation and involvement in the process of Annual Monitoring Review. The audit team recommends that, in collaboration with the student body, the University should develop effective and transparent arrangements for student participation in all appropriate quality management processes.

Feedback from students, graduates and employers

66   SSLCs form one channel through which students are able to provide feedback on the quality of their learning experience. The University provides two additional mechanisms for gathering student feedback, namely the unit and stage evaluation questionnaires. A student satisfaction survey was conducted in 2001-02 covering all aspects of non-academic student support services and it is planned to follow up this exercise in the near future with a survey aimed at discovering more about the student experience.

67   Responsibility for the distribution, collection and analysis of unit evaluation questionnaires has been devolved to the academic areas (schools and departments). Units are sampled over a two-year period to ease the volume of evaluations that students are expected to complete. The raw data from these questionnaires is 'owned' by the teaching staff associated with the unit, and it is left up to schools and departments to determine how the data should be utilised. The procedure employed in a number of academic areas involves the completion of a module (or unit) review form with a summary of the main issues, comments on the scores achieved in the questionnaires and an analysis of assessment results. Staff involved in teaching the module are expected to outline any changes that will be made as a result of the module review. The outcomes of this process then form one of the inputs to an Annual Pedagogic Review which takes a broader view across

the programmes in a department or school. This in turn forms one of the inputs to the Annual Monitoring Review process.

68   Stage evaluation questionnaires are processed and analysed centrally in the ASSU. Summaries of stage evaluation questionnaires form one of the inputs to the Annual Monitoring Review exercise for discussion and review by the AMT. Any issues that are identified as being common to all schools are reported to the LTSC for consideration and recommendations are made to the APC for action.

69   The audit team heard from course and programme leaders that SSLCs are more concerned with immediate operational issues, whereas unit and stage evaluation questionnaires provide a more structured means of obtaining student feedback. Questionnaires may be distributed and collected in class, or students may complete the evaluation forms on the web. The former method has proven to be the most reliable in terms of the student participation rate. Across the different schools, response rates have been variable and the University has expressed its disappointment with the effectiveness of the process for collecting student feedback through the use of questionnaires. This is particularly so in the case of stage evaluation questionnaires. The University stated in its SED that it intends to review the effectiveness of how it listens to the student voice, including the effectiveness of stage and unit questionnaires, and find ways in which information from SSLC meetings can be made available effectively. At present there are few indications of what form such a review might take, although the audit team was told that an overhaul of committee structures and governance is currently being planned. One of the aims of this will be to increase student involvement.

70   In the audit team's view the University should seek to ensure that all academic units have in place an appropriate procedure for using the results of unit evaluation questionnaires as part of a module review process. It is also recommended that the University consider how it could improve the extent to which students feel they are informed of the outcomes of the feedback they provide and the manner in which it is employed. In this way more students may be encouraged to participate in the feedback process.

71   In 2002 the University participated in a national consultation on collecting and using student feedback on the quality and standards of learning and teaching in higher education (HE). One of the aims of this project was to make recommendations on the design and implementation of a national survey of recent graduates.

Progression and completion statistics

72   Student progression and completion data are issued by the ASSU to schools, and the audit team was furnished with examples of the use of this information in the course of the Annual Monitoring Review process. The data set available to staff is reasonably comprehensive. It includes figures over a five-year period relating to the demographic characteristics of student cohorts, entry qualifications, progression, final awards and career destinations. Although the data produced relate to undergraduate or postgraduate provision within an area, rather than individual courses, the University is already making this information available 'at a finer level of granularity'.

73   The SED acknowledged that 'there is often a disparity between the figures recorded centrally and those that can be derived from information held in academic areas'. Some staff also informed the audit team that progression and completion data were not always produced in sufficient time to inform the initial drafting of annual course monitoring reports. The University is seeking to resolve at least the first of these two problems by introducing a single information source.

74   While it was clear that there are effective arrangements to provide statistical data for consideration by course teams, the audit team sought to establish whether, and to what extent, these data were considered by Senate committees. The team was informed that APC did consider the headline issues, and it was apparent that recruitment and admissions data were presented for discussion by both the Planning and Resources Committee and the Senior Management Group. It was concluded that the University might wish to consider the desirability of building upon this practice by furnishing either APC or the QASC with statistical analyses of student progression and completion across the full range of the University's provision, including that which is offered in partnership with other organisations.

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

75   Since the last audit in 1997 considerable effort has been expended in the human resource area in achieving Investors in People (IiP) status. The University became the first pre-1992 university to gain this status in March 2003, and the SED noted that this 'demonstrates our commitment to both staff and students by ensuring that our

responsibilities for staff development are embedded in policies and procedures, which in turn enhances performance'. Staff met by the audit team at different levels within the University noted that the work undertaken to achieve IiP had facilitated addressing and improving a range of human resource policies and procedures.

76   The University's Corporate Plan states that 'staff are its most valuable resource in the creation, development and application of knowledge and the provision of high quality learning'. The University has prioritised the effective management of staff and performance; effective recruitment, development, motivation and deployment of skilled, high-quality staff; and the embedding of equality in all employment processes and a safe, healthy and motivating working environment. These values and priorities are reflected in the University's Human Resources Strategy which has secured government funding in order to pursue the commitment to reward and develop staff in the workplace.

77   The SED noted that equity is of prime importance in recruitment and selection. To ensure equity the University has adopted a number of codes of practice covering such matters as equal opportunities and good practice in recruitment and selection. Training is mandatory for members of appointment committees which are set up by Senate in accordance with University regulations.

78   Arrangements are in place for the induction and integration of new staff. All new academic staff are allocated a mentor for the duration of their probation. Mentors receive training and guidance. Staff without teaching experience commensurate with their roles are required to undertake part or all of the Postgraduate Certificate in Higher Education Practice. In discussion with the audit team, members of staff stated that the guidance they had received when they joined the University had been particularly helpful and that mentors had played a valuable role which often extended beyond probation. New lecturers are also expected to agree a Personal Development Plan covering teaching, learning and research within three months of their appointment.

79   A staff survey was carried out in 2002 which revealed a general level of satisfaction with the University as an employer and place of employment. The survey identified a number of priorities for action including dealing with poor performance and ensuring that the appraisal scheme is comprehensive (see below).

80   The University has a formal appraisal scheme for all staff. With encouragement of IiP this has been transformed from a rather patchy exercise to near complete coverage. Training is available for both appraisers and appraisees. The focus of the scheme is developmental although the process assists staff in application for promotion. Staff reported that they had found the process supportive and helpful for their personal development. A 360-degree feedback has been introduced for senior managers on a trial basis and is being developed for wider use. Departments are also required to look at the broader picture of development needs identified through individual appraisal.

81   The University operates an Annual Salary Review and Promotions Exercise which covers academic staff and non-academic staff outside the manual grades. The criteria for promotion are laid out clearly and reflect the University's priorities of teaching, research, administration and special contributions to the University. Staff reported that they had received support from line management in seeking promotion which was appreciated. A Discretionary Pay Scheme is in operation for all staff which allows schools to reward exceptional performance.

82   The University also promotes recognition of teaching excellence through its annual Chancellor's Awards for Distinguished Teaching with nominations made by students and then supported by staff colleagues.

83   The audit team considered that the University's approach to the assurance of quality of teaching staff, through appointment, appraisal and reward was a feature of good practice. Using the IiP framework an over-arching and inclusive strategy has been developed which staff confirmed is being implemented consistently and effectively at local level.

Assurance of quality of teaching through staff support and development

84   Training and development plays a key role in realising the University's strategic objectives by endeavouring to create a workforce able to deliver high-quality teaching and research. Policy on training is coordinated centrally through the Staff Development and Training Sub-Committee (SDTSC) and is delivered by, among others, the Staff Development Unit (SDU) and the TQEG. The University has a clearly articulated staff development policy covering such matters as objectives, responsibilities and access, and produces an annual statement of plans and priorities.

85   Staff welcomed the inclusive approach taken by the University to training and development. The SDTSC sets policy in the light of needs identified during the planning cycle and appraisal. It also monitors the quality and effectiveness of provision. To facilitate this process the SDU is exploring the application of the EFQM (European Foundation for Quality Management) model of excellence as a way of evaluating the wider impact of staff development in the University.

86   The SED stated that the University provides short courses, seminars and workshops on issues relating to teaching and learning, research and management practice. A joint initiative with the College has led to the development of an impressive joint catalogue of training and development events open to members of both institutions this year.

87   The TQEG in conjunction with the ASSU runs a Learning Support Seminar series which aims to train staff to participate in quality assurance activities, to disseminate good practice in teaching and learning, and foster debate on local and national quality issues. The SED noted how the seminars were used to improve practice in dealing with plagiarism and increase consistency and good practice in presenting mark sheets.

88   Among the training provided are courses for PhD students who are involved in teaching and demonstrating. These are organised through the Graduate School. Research students had found these courses a helpful introduction to the classroom. The TQEG runs a Postgraduate Certificate in Higher Education Practice which is accredited by the Institute for Learning and Teaching in Higher Education (ILTHE) for membership purposes. All new teachers are required to take this course and experienced new staff can also take parts of the course.

89   In response to feedback from the IiP process and staff opinion, management development has been identified as a priority in the corporate plan. This is being achieved through training programmes and initiatives such as the Manager's Handbook which acts as a guide to University policy and good practice in the management of people.

90   The TQEG plays a wider role in supporting staff in their role as teachers. Peer observation schemes have been running for some time and are tailored to meet the needs of particular schools. The SED noted that peer observation is now embedded in University practice and the reviewers were able to confirm this with staff. The University strongly encourages membership of the ILTHE and supports staff's initial subscriptions. About a quarter of academic staff are now members.

91   The audit team was impressed by the level and quality of staff development that was offered in the University and by the ways in which it is planned, coordinated and delivered. Staff were very positive about this area of work and appreciated the opportunities open to them. The team viewed the new joint training catalogue which has been developed with the College as a means of widening development opportunities as a feature of good practice.

Assurance of quality of teaching delivered through distributed and distance methods

92   The University's SED did not make specific comment on the assurance of the quality of teaching delivered through distributed and distance methods. The audit team did not discuss the quality of provision directly with any students studying in this way.

93   Currently some 514 students are studying for their degrees by distance learning on a range of undergraduate and postgraduate courses in Management and Health Studies. Some 204 of these students are located in the Far East and registered on MBA programmes supported locally in Hong Kong and Singapore. Two further masters programmes in research methods and a number of modules in the School of Lifelong Learning have been approved but have not yet registered students. All current distance-learning provision involves a mixture of self-directed study and either attendance at study days or ongoing tutorial support delivered either face to face, by telephone or email.

94   In order to carry this policy forward a Working Group on Technology in Open and Distance Learning, chaired by the Head of the TQEG, was established in 2000 under the aegis of the LTSC. Much of the work of the Group has focused on the rollout of the University's virtual learning environment (VLE). In November 2003 the group agreed to widen its remit and membership, and rename itself the Electronic and Distance Learning Working Group. This group has responsibility, among other things, for monitoring the use of technology in learning and ensuring compliance with the *Guidelines on the quality assurance of distance learning* and other appropriate codes, published by the Agency.

95   A Distance Learning Support Librarian is being funded to develop existing provision for users whose needs are not met by traditional library services. Consideration is also being given to ways in which other support services could be developed to

increase support for distance-learning students. The School of Lifelong Learning and Development provides specific advice on its web site to students undertaking distance-learning courses and modules.

96 The approval process for new distance-learning courses is basically the same as for on-site provision but additional information must be supplied in the course proposal and programme specification. In addition, the University provides guidance to staff developing distance-learning programmes on the specific issues to be addressed in this type of provision. The monitoring procedures for such courses are the same as for on-site provision but with additional issues to be considered by the review team.

97 The audit team concluded that the University was addressing the quality assurance issues associated with distance learning in an increasingly coordinated and effective way.

Learning support resources

98 In its Teaching and Learning Strategy the University states that it aims to provide a range of learning resources, which will help students with different learning styles and from a wide variety of backgrounds, to develop their own knowledge and understanding. During the reorganisation of the University that took place in 1998, LSS was set up as one of the 10 schools and academic planning units. It incorporates the library, information technology (IT) services and Career Development Services and was formed with the objective of providing better continuity of support for the academic community. The administrative IT infrastructure is the responsibility of Management Information Services and this is currently undergoing a phased merger with LSS to ensure compatible development of academic and administrative IT services. This is becoming increasingly important as student information systems will need to be more closely integrated with the VLE system that the University is currently installing.

99 Liaison between support services and the academic areas is maintained through representation on institution-wide committees, user groups and involvement in SSLCs. Direct feedback from staff and students is encouraged through questionnaires and feedback forms and subject specialists in the library maintain regular contact with their respective academic areas. IT Services see interaction with academic departments taking place at four levels: the student; the department; centrally provided services; and access to national resources.

Annual service reviews form an essential part of the annual planning process for the library and IT services and feedback is gathered through the Annual Monitoring Review process, student questionnaires, SSLCs and the library and computer user groups. There is no independent monitoring of quality assurance for LSS.

100 Students are generally satisfied with the library and IT services. This was reflected in the SWS and in the meetings the audit team had with students. Some students claimed that they rarely used the library, and undergraduate students in particular expressed a preference for accessing information in electronic form, for example, lecture notes on the web. Postgraduate students made greater use of the library for accessing journals. Students commented to the team that borrowing demand often exceeded availability of required textbooks. The library introduced a one-day loan period in response to an issue raised by the SSLC in the Department of Archaeological Sciences and evidence of a high rate of borrowing suggests that this may at least be helping to overcome the problem.

101 The University has identified the potential for distance learning while recognising that the set up costs can be substantial (see paragraphs 92 to 97). It intends to build upon existing provision (mainly in Health Studies, Management and Graduate Education) and investigate the potential for developing collaborative relationships with commercial partners. The Dean of Students is in the process of preparing a document on 'Learning Entitlement' which broadly sets out what the minimum expectations of a student should be. The particular needs of distance-learning students should be considered within this document.

102 Closely allied to the introduction of distance learning is the implementation of the VLE. The pilot phase of the VLE project involved three schools (Management, Health Studies and Social and International Studies) and lasted for one year (2001-02). It was followed in 2002-03 by the Phase 1 Roll-out which consolidated use of the VLE in academic areas that featured in the pilot phase, and also added users from two other schools as part of the support for the University's Excellence Plus project.

103 There appears to be some uncertainty concerning the implementation of the VLE in terms of whether it is being driven top-down or bottom-up. Senior management seem to think that the project is being strategically managed in a top-down fashion whereas many of those involved at the 'grass roots' level are convinced that the continued development of the VLE and of large-scale

networked learning is happening bottom-up. A comment from the interim report that was produced at the end of the pilot phase suggests that the University is still not convinced that VLE is necessarily more effective than other teaching and learning methods.

104 In the audit team's view, a more coordinated approach to the provision of learning resources in support of its mission to widen participation would be helpful. This approach could encompass staff development (for example, developing the personal tutor role) as well as learning resources and student support services.

Academic guidance, support and supervision

105 This aspect of provision was not fully covered in the SED. The University interpreted the relevant section as referring to staff development and support rather than to the academic guidance, support and supervision of students.

106 In the 1998 Quality Audit report it was noted that 'Another striking example of the institution's devolved operational framework became apparent in the team's discussions with staff about the personal tutor system, which varies in its nature from department to department and is not apparently subject to any generally agreed set of guidelines'. A very similar picture has emerged from the meetings that took place with staff and students during the present audit visit.

107 Students reported that, with one or two exceptions, they generally found staff to be friendly and approachable, and that most maintained an 'open door' policy. Whereas some schools and departments have effective tutor support systems in place, and an appropriate amount of emphasis on the role of the tutorial in supporting student learning, this is by no means the case across the University as a whole. In its meetings with students the audit team came across several cases where there had been very little interaction between students and their advisers. While it is recognised that such a lack of engagement may be attributable as much to students as to staff, in the team's view the University has not developed policies and guidelines that attach sufficient importance to the tutorial as an integral component of the framework to support student learning. There have been plans to review the tutorial system since 1998 but very little seems to have been done in practice. In a meeting involving the team and staff with responsibility for quality and standards, it was acknowledged that practice was not uniform across the schools and departments and that the system

was not as good as the University would like. A desire to audit existing practice in the academic areas was expressed with a view to developing a more ordered system. It was suggested that such an audit could be carried out in the latter part of the current academic year. The variation in practice, both within and between the different academic units, was highlighted as an issue in the SWS and was confirmed in meetings with students.

108 The University has developed an Excellence Plus Strategy which is aimed primarily at student self-development and key skills acquisition. A pilot exercise was conducted in four of the eight schools in 2001-02 to audit key skills on entry. One of the aims of Excellence Plus is the development of key skills throughout the curriculum by enhancing the personal tutorial system. It is intended that this should be achieved by incorporating the use of Progress Files within that system as an integral part of an undergraduate programme across all stages of study.

109 Another aspect of academic guidance and support relates to the feedback given to students on assessed work. Again, practice across the different schools and departments is extremely variable. In many instances staff were found to be providing excellent feedback on students' assignments such as essays and coursework, and work was returned promptly. In other cases students told the audit team that they received negligible feedback and work was returned late, or in some cases not at all. The students' experience depended on which particular member of staff was responsible, even within the same department or school.

110 In the SED the University described its Graduate School as playing a central role in providing learner support for all postgraduate research students through a wide range of dedicated programmes of generic and transferable research skills. The Graduate School also delivers a biannual Research Supervision Training Workshop for new and established supervisors across the University. This approach helps to ensure that there is consistency in the way that programmes leading to higher degrees are managed.

111 The University has produced two very comprehensive codes of practice (CoP) that relate specifically to research student programmes, namely the CoP for Research Students and the CoP for Research Supervisors and Directors of Postgraduate Research. The advice contained within these documents is fully in line with the relevant section of the Code of practice, published by the Agency, and graduate students who met with members of the

audit team gave examples of the provision of tailored academic and technical support for their research.

112 There appears to be no institutional overview of personal tutorial support and so far as the audit team have been able to tell there is no centrally produced guidance or University CoP on this subject. It is recommended that the University should take steps to ensure that the current review of the tutorial system delivers an effective and appropriate level of student support across the institution.

113 A recommendation from the 1998 Quality Audit was that the University should review how best to ensure that there is enhanced consistency in the provision of information regarding the curriculum, student learning, assessment activities and student support. As a result an analysis was carried out of the information contained in student handbooks from different departments and this has led to the preparation of guidelines on the suggested minimum tables of contents that such a document should contain.

114 The University has developed a CoP on Placement Learning which reproduces the precepts from the relevant section of the *Code of practice*, published by the Agency, on this subject and considers them in a Bradford context. All schools have produced a comprehensive handbook on placement learning and a Placement Tutors Forum has been set up to enable the sharing of good practice. Guidelines have been published which set out the suggested topics that need to be included in placement handbooks.

Personal support and guidance

115 Details of the University's central student welfare services were included in the SED under the heading of Learning Support Resources. These provide support and guidance to students in a number of areas including accommodation, finances and financial support, welfare, counselling, disability support and health. As mentioned previously, Career Development Services forms part of the integrated LSS.

116 A Dean of Students has been appointed by the University to strengthen the relationship with the UBU and ensure that student welfare is placed at the forefront of university life. According to the SED 'The Dean makes a full contribution to planning, developing and monitoring [the University's] provision of integrated services to students in relation to welfare, the campus environment and the student learning experience'. The Dean of Students was responsible for organising a student satisfaction survey that was conducted in 2001-02 and is

currently examining support for mature students. The students that the audit team spoke to were unclear as to the role of the Dean of Students.

117 Career Development Services has recognised the requirements of locally-based students, many of whom are from minority ethnic groups, and has led the development of the Impact Programme. This collaborative project is now operating in six Yorkshire universities and has received national acclaim for its success in raising aspirations and employability in its target group.

118 In addition to the traditional face-to-face guidance offered by Career Development Services, the Department has also introduced 'Careers Advice Via Email'. This can be accessed from the Career Development Services' web site and is aimed particularly at non-traditional learners who may find it difficult to visit the campus. In response to demands from students for temporary paid work a JobShop has been created which includes the possibility of casual work within the University.

119 In keeping with the mission statement of 'Confronting Inequality: Celebrating Diversity', a policy statement on equal opportunities underlines the University's commitment to promoting equality, diversity and an inclusive and supportive environment for all students and staff. The University has made particular efforts to meet the needs of students with disabilities and has a well-established Disability Office consisting of four full-time staff and six volunteers. Under the leadership of the Disability Coordinator the Office has been developed and expanded over the last 10 years and is dedicated to fulfilling the requirements of both students and staff on matters relating to disability. The services that the Disability Office can provide are described in a comprehensive Disability Statement which is accessible through the University web site. This contains relevant advice for both current and prospective students and explains the structures and mechanisms that the University has put into place to ensure that students (and staff) with disabilities are not disadvantaged and to fulfil its obligations under the Disability Discrimination Act. There are CoP for Access to the Curriculum for Disabled Students, and for the Assessment of Disabled Students as well as Guidelines for Applications from Students with Disabilities and, where appropriate, these policy documents have been developed with reference to the relevant section of the *Code of practice*. Each department has a member of staff acting in the role of equal opportunities facilitator and this provides a channel for communication between the Disability Office and departments. In 1999 a Forum for Action

on Disability Issues was set up and this aims to meet three or four times a year and reports directly to the Equal Opportunities Committee.

120 The University has found that over three quarters of the students who have declared themselves as disabled are diagnosed as dyslexic, thus making this by far the most common disability found among students. In recognition of the particular issues associated with dyslexia the University has produced an informative publication entitled 'Dyslexia: A Different Way of Thinking'. This provides useful factual information and advice on dealing with this condition.

121 The SED provided an accurate description of the arrangements for personal support and guidance and where relevant the precepts of the CoP have been adequately addressed.

122 The SWS reveals that a significant proportion of the students sampled had not had occasion to use Student Financial and Information Services, or the Career Development Service. Of the students who had come into contact with the services described in this section, most were content with the experience.

Collaborative provision

123 The University's collaborative provision, apart from the College, will be the subject of a separate audit. This section of the report, therefore, relates to the relationship between the University and the College. The context within which the arrangements for this particular relationship are set is described in paragraphs 125 to 127.

124 Approximately 43 per cent of the students registered for the awards of the University are enrolled on courses offered at or by its partner organisations. While the majority of the University's partnerships are with organisations overseas, a substantial proportion of its collaborative provision within the UK is located at the College. Of the College's 4,000 students who are registered for University awards, 33 per cent are studying on a part-time basis and 7 per cent are enrolled on postgraduate programmes. The University is, with Leeds Metropolitan and Huddersfield Universities, a member of the Foundation4Success consortium, and it offers other Foundation degrees in collaboration with industrial partners, the NHSU (National Health Service University) and several further education colleges, including the College. There is also a new undergraduate programme in Clinical Sciences which was developed in partnership with the Medical School of the University of Leeds.

125 The SED stated that the University's partnerships are subject to 'the same range' of quality assurance mechanisms that operate internally. The general arrangements for the management of collaborative provision vary from both those for Foundation degrees and those which apply to its partnership with the College. This prompted the audit team to explore the rationale for these variations and, specifically, to establish whether it reflected a view within the University on the particular risks posed by particular types of collaborative provision. In discussions with staff it emerged that the issue of risk is approached primarily from a market and business perspective, rather than in terms of risks to academic quality and standards. The team was assured that the University recognised the need to establish a solid platform for working with partners, and that this included measures to ensure that the negotiation of partnerships is strategically underpinned and that there is a complementarity between the University and its individual partners. The team was informed by staff that the University's activity in this area is subject to a clear and consistent framework for quality assurance.

126 It is stated in the Quality Assurance Handbook that 'the University attaches great importance to its commitment to maintain high quality in respect of collaborative provision'. Both partners to a collaborative arrangement must 'ensure comparability of the learning experience, equivalence in academic standards and the proper enforcement of the principle of duty of academic care for all students' registered on the University's courses. The Handbook then sets out detailed procedures for assuring the quality and standards of the University's collaborative provision. Part of this section of the Handbook sets out general arrangements for the approval, monitoring and review of partnerships and collaborative programmes; the selection and approval of staff; assessment and external examining; certification and the approval of publicity material, including the provision of information to students. While there is a template for 'contractual agreements' for franchised courses, the audit team noted that no equivalent document is provided for courses that are developed by partner organisations and validated by the University and that the Handbook does not contain any procedures for the management of joint awards with other universities.

127 The College is the University's only 'Associate College', and several sections of the Handbook set out the particular arrangements for the management of this partnership. Under these, the College is afforded

considerable responsibility for the assurance of the quality and standards of its provision, a responsibility which is routinely discharged by its Academic Planning Committee. The College undertakes the validation and review of courses leading to University awards subject only to the inclusion of University members on validation panels, and the receipt by the QASC, APC and Senate of the minutes of the College's Academic Planning Committee. Course monitoring is undertaken by the College in accordance with its own procedures, and the Handbook makes no provision for University involvement in this process. Although Senate appoints external examiners for College courses which lead to awards of the University, the SED stated that reports are received by the College, and there is no specific reference to this partnership in the University's procedures and guidance for external examiners. Finally, while the Handbook sets out detailed regulations governing student appeals, the only apparent provision for University involvement in this process is the inclusion of a University representative on the academic appeals committee convened by the College. The audit team noted that the sections of the Handbook which apply specifically to this partnership had not been updated to reflect recent changes in the committee structures of, and reporting lines between, the two institutions. It also noted that the recently established Continuing Collaboration Strategy Group (CCSG) had identified a need to improve the alignment of the two institutions' annual monitoring and validation procedures.

128 On the basis of the evidence provided by the Handbook, the audit team concluded that the relationship between the College and the University is one in which the former enjoys a degree of autonomy which exceeds that afforded to its own schools. The security of the partnership is formally underpinned by a selective range of University-prescribed procedures, the reciprocal representation of each institution on the committees of the other, the joint CCSG, and by the more informal relationships that are maintained between staff in central departments, schools and departments within the two institutions. The SED indicated that the University has also played an active role in supporting the College in its preparations for Agency subject review and has encouraged the staff of the College to attend University seminars and workshops on teaching, learning and assessment. The team's discussions with College staff yielded many examples of College initiatives and joint projects, but few in which the University had acted independently to develop its partner and enhance its provision.

129 The audit team learned that there has been a long-standing association between the two partners, and that this relationship has been developmental in character. The team was informed that for this reason it was felt that the University should not be too intrusive in its engagements with the College. The team was also informed that the College had formerly been designated as a higher education institution; it had been an associated institution of the Council for National Academic Awards; it occupied a site adjacent to the University and the two institutions had developed a joint infrastructure with Funding Council support. It was against this background that the College had signed the Agreement of Association (the Agreement) with the University in 1996 and, in 2002-03, the governing bodies of the two institutions approved a recommendation that they should merge. Immediately prior to the present audit, the team was advised that the merger negotiations had been suspended and that the University was in the process of re-establishing its links with the College in a manner that is sensitive to the College's need for independence.

130 The audit team considered that while the closeness of the relationship between the two institutions was itself a source of strength, this did not obviate the need for comprehensive formal procedures underpinned by an effective contractual agreement. The Handbook includes a copy of the Agreement with the College. The Agreement is described as 'a framework for the further development and strengthening of the academic relationship between the University and the College'. While it provides for the 'shared involvement' of the two institutions in academic quality assurance processes, the particular responsibilities of each are specified elsewhere in the Handbook. The University confirmed that it does not have separate agreements at the College to secure individual programmes which lead to University awards, and the Agreement is subject to quinquennial review.

131 The Agreement lacks the specificity and legal force to provide a secure basis for the University's partnership with the College and the University would encounter difficulty in demonstrating that the Agreement is consistent with the relevant precepts of the CoP. Having noted that the Agreement has not been reviewed since its original signing in 1996, despite the stated requirement for a quinquennial review, the audit team formed the view that the University had not availed itself of the opportunity to re-evaluate its partnership with the College, either as a precursor to the merger negotiations or, following their suspension, as a means of establishing that the continuing justification for the degree of autonomy currently afforded to the

College. In the course of its discussions with staff, the team learned that the University now intends to review the Agreement. The team concluded that the decision to review the Agreement should be implemented at the earliest possible opportunity.

132 The audit team sought to establish the means by which Senate and its subcommittees derived the information that it required to enable it to fulfil its responsibilities for the quality and standards of programmes offered in collaboration with the College and other organisations. In particular, the team attempted to locate those individuals, groups or committees within the University which are responsible for receiving, evaluating and acting upon this information. In the case of the College, the primary and formal channel of communication is through the College's management and committee structure through the APC, the QASC and onwards to Senate. There appeared to be no formal provision for contact between the College's staff and students and the staff of the University and the team was informed that external examiners have prime responsibility for assuring the quality and standards of the University's collaborative provision. Although external examiners' reports are received and considered by the College, no specific reference to these reports was made in the minutes and papers of the relevant committees within the University.

133 In general, although one member of the ASSU has designated responsibility for collaborative provision, the University does not have a committee with an explicit remit for overseeing its collaborative arrangements, and responsibility for collaborative provision is not consistently included in the job descriptions of programme managers. The audit team concluded that the University's review of its Agreement with the College could be usefully extended to include a reconsideration of its arrangements for the management of its responsibilities for the quality of programmes delivered by all its partners and the standard of the awards to which they lead.

134 A document prepared for the Senior Management Group in 2001-02 stated that the University's quality assurance procedures 'are in reasonably good order and comply with benchmarks and reference points'. The University provided documentary evidence demonstrating that it had considered and acted upon Section 2 of the *Code of practice* and it was also apparent that it had undertaken timely action to ensure that the College's overseas operations did not endanger its responsibilities as the awarding institution. However, in undertaking its review of the Agreement with the

College and in any related review of the quality assurance arrangements for collaborative provision, the audit team would encourage the University to consider whether it is able to demonstrate the consistency of its current practices with Section 2 of the *Code*.

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

Discipline audit trails

135 In each of the selected DATs, appropriate members of the audit team met staff and students to discuss the programmes, studied a sample of assessed student work, saw examples of learning resource materials, and studied annual module and programme reports and periodic school reviews relating to the programmes. The team's findings are as follows.

Clinical Sciences

136 The DAT covered the undergraduate provision for a Foundation year in Clinical Sciences/Medicine (one year full-time) and BSc (Hons) Clinical Sciences (three years full-time) which were approved in 2002. Recruitment in 2002-03 resulted in 55 students entering the Foundation year and 49 into year 1. This collaborative programme offers multiple entry and exit routes to allied healthcare programmes at the University, the MBChB programme at the University of Leeds, and graduate careers in the NHS or pharmaceutical industry. To support the DAT the School provided a SED which set out the programmes' aims, the School's management and review processes, and also discussed the School's strengths and current and future plans. Programme specifications, course approval documentation, statistics and samples of course documentation and student work were also made available to the audit team along with the widening participation strategy, an explanation of the interrelationship of Clinical Sciences, the University with the MBChB programme at the School of Medicine of the University of Leeds, and criteria for screening UCAS forms and selection interviews. Clinical Sciences was chosen as a DAT because, even though the first cohort of students had not graduated, it showcased the University's course approval procedures and also collaborative provision at programme level.

137 The programme involves multiple relationships across schools and departments within the University (the School of Life Sciences, the School of Health Studies, the School of Management and the School of Informatics and the LLS), and the

University of Leeds, the College, Bradford NHS Hospitals and Primary Care Trusts. It meets DoH and HEFCE requirements for 'widening the participation for students entering medical education and to produce graduates who are better prepared to understand, reflect and meet the needs of our local community and respond appropriately to cultural and medical needs'.

138 The programme specification and learning outcomes annex map onto the *FHEQ* level H outcomes at modular level. However, the audit team was unable to determine the overall graduate outcomes, as these are not differentiated by level. The programme aims demonstrate the rationale for establishing the programme, and are utilised effectively within the Annual Monitoring Report to evaluate progress. The learning outcomes refer to subject benchmark statements in the relevant sciences. However, the pathway in Accounting would benefit from reference to relevant subject benchmarks for further transparency within the programme specification. The programme specification is made available to students at the beginning of the programme and student representatives who had recently reviewed the recent AMR report were aware of its link to that process.

139 The analysis of student performance in the first cohorts confirms that the course aim of widening participation to build a workforce of equality and diversity is matched by a rigorous selection criteria enabling admission to the School of Medicine of the University of Leeds. The admissions process is clear to students and involves structured interviews. The widening participation strategy for Clinical Sciences (2002-03) has been successful in offering opportunities into medicine and healthcare education to groups currently under-represented in higher education and has attracted candidates from the local community. Eight out of 34 eligible students from the Foundation year and 20 from 31 students from year 1 transferred to the MBChB at Leeds in 2003; students reported successful transition. After some initial uncertainties in the first year of operation, students are clear about the process and timing of applications to Leeds. The criteria for gaining a place at Leeds and the support offered by the course team enabled students in their decision to transfer at the end of the Foundation year or delay application until the end of year 1. Students who are unsuccessful in their applications are supported in decision-making regarding their programme of study and career options for the future.

140 The Annual Monitoring Report (2002-03) was available in draft form during the visit. It includes an executive summary of issues raised and resolved through SSLC and stage evaluation questionnaires are included with the report. Analysis of withdrawal statistics is the responsibility of the Course Management Committee; the way in which their findings articulate with the annual monitoring process remained unclear to the audit team.

141 The course approval process was demonstrated within the DSED and included approval by the professional body (the General Medical Council) and the Medical School of the University of Leeds. The School of Life Sciences Teaching and Learning Committee has overall responsibility for quality assurance at school level with resources being approved through a University committee. External advice to the CART was received through written comments from professors in two different medical schools. The timescales involved led to some overlap in processes with final documents from the Programme Director being approved by the chairs of the Teaching and Learning Committee and CART after approval by Senate. This process was considered necessary in order to enable entry of data into the prospectus. A meeting between the Programme Director and one external adviser informed the content of the curriculum. This advisory meeting was outside the course approval meeting and indicates a dual role for the external adviser in supporting the course team and providing externality to the University.

142 Minor changes are identified by the programme team and forwarded for approval through the Teaching and Learning Committee; for example, the decision made to make First Aid at Work extra curricular after stage 1 examinations was influenced by student feedback, the SSLC and the Course Management Committee.

143 The Annual Monitoring Report for the Foundation year and first year (2002-03) was produced through an annual pedagogical review meeting and follows the University guidelines in its format. However, the learning outcomes were not evaluated at this stage because no students have yet graduated from the programme. The Annual Monitoring Report evidences the course team's commitment to the continuous review and enhancement of the programme and responsiveness to student issues. A theme of enabling consistency of the student experience across the programme has led to enhancement of standards in module handbooks and includes the use of common assessment criteria across the programme. The action plan clearly links actions to named

individuals/groups responsible for their completion; the progression statistics are included with an emphasis on the destination of students at the end of each stage.

144 Assessment strategies are informed by the University guidelines on the volume of assessment, map across to the MBChB in the School of Medicine of the University of Leeds and are influenced by the medical board of examiners. Formative assessment aids progress within modules and tutorial time is scheduled within timetables to support student learning. Students receive appropriate and timely information about their assessments and written feedback is discussed with students. The grades they achieved influence whether they are able to transfer to medicine. The programme team have actively worked with students to encourage a 'working together' theme this year, having recognised a more competitive approach to learning in the first year of operation.

145 Module handbooks for 2003-04 have been revised to inform students of the criteria for assessment which is adapted to meet each assignment. Consistency across markers has been established by a system of double-marking of scripts with records held by the Programme Director; students receive feedback from the first marker.

146 The Personal and Professional Development and Special Studies theme is a strand throughout the programme. Students are clear about the expectations and have experienced an increasing challenge during each successive year. Samples of assessed work demonstrated that student achievement was consistent with level of module outcomes.

147 Students receive information which is helpful and enables them to negotiate through their programme of study successfully. The course team is currently developing a student handbook to incorporate these materials for students in future years. The course team have produced comprehensive module handbooks which have been revised for 2003-04 to provide a consistent standard of information across the programme. The audit team noted the good practice of including feedback from module review within the handbooks for the next session.

148 Timetables include evidence of introduction to library and computer studies and meetings scheduled for personal planning and development tutorials. The Course Management Committee and SSLC take place within the teaching timetable thus enabling attendance by course representatives. The timetable changes from week to week and students are kept informed of any unforeseen changes through notice boards and email contact.

149 Students appreciate the course team's approachability and the support they received from the staff in a variety of roles: programme director, widening participation coordinator, admissions tutor and personal tutor. Students also appreciate the support offered to them at varying points in the programme such as applying for entry to medical school.

150 Personal tutors meet with students frequently (four to five meetings each semester) to support them in achieving their personal and professional development goals and in developing their reflective skills. Seminars from clinicians and the anatomy sessions at Leeds have been evaluated highly. The course team has responded to student requests for more support regarding their experience of dissection and the course team will be expanding this provision for future cohorts.

151 Students participate more in module evaluation and stage evaluation in year 1 than in the Foundation year. Academic staff are actively seeking student help in achieving increased completion of these through the SSLC. Module leaders' analysis of responses is discussed at the annual pedagogical review to inform any changes to modules for the next session. These are recorded in module handbooks. Stage evaluations are analysed and although they are very positive, any suggested improvements are dealt with through action plans recorded within the Annual Monitoring Review process.

152 The SSLC met on five occasions in its first year of operation with clear evidence of responsiveness to student issues and loop closure. One example of an issue which has been resolved is the clarification of the systems for the transfer of students to Leeds. Elected student representatives are enabled to feedback to peers through time negotiated within the timetable or through a group email system. This year five course representatives are undertaking training offered by the University for course representatives.

153 This complex course with multiple entry and exit points provides a high quality, multidisciplinary course that allows student to develop the skills required by 'Tomorrow's Doctors' and other health care professionals. It has achieved the aims of widening participation, with recruitment from ethnic minorities and the local region. A range of contributing staff with expertise in their fields meet regularly to develop and enhance the student learning experience and to involve students in this process. The curriculum is revised as issues arise. Students reported the success of such a strategy which encourages collaboration throughout the programme.

154 In the audit team's view, the quality of the learning opportunities provided was suitable for this multidisciplinary course and from the evidence analysed are located correctly within the *FHEQ*.

Engineering

155 The DAT covered the following programmes offered by the School of Engineering, Design and Technology in the areas of mechanical and medical engineering:

Foundation Year;

MEng and BEng Mechanical Engineering;

BEng Mechanical and Automotive Engineering;

MEng and BEng Medical Engineering; and

BEng Mechanical Engineering with Management.

The last of these has ceased recruitment and its withdrawal is being managed.

156 Following the restructuring of the University into eight schools in 1999, the School of Engineering comprised the Departments of Chemical, Civil, Electrical and Electronic, Mechanical and Medical Engineering and Industrial Technology. In 2002 a review of Engineering led to an internal reorganisation of the School with the adoption of a unitary (non-departmental) structure and the cessation of chemical engineering as an activity. The review was precipitated by several factors, not the least of which was a decline in recruitment to conventional science-based BEng and MEng programmes. In terms of recruitment, the School's strategy has been to:

- expand the intake onto an existing Foundation year that serves to prepare students with non-existent or poor GCE A-Level results in Maths and Physics for entry onto its BEng and MEng programmes;

- introduce a range of non-accredited design and technology programmes;

- increase the number of overseas students, particularly through direct entry into the second and third years of its programmes.

157 In addition, the School has engaged in an ambitious programme of recruitment events involving schools, especially those in the local area, and external funding is being sought to continue this activity.

158 The restructuring of the School involved a reduction in academic staffing from approximately 65 to 45 for a student complement of 800 and resulted in a student/staff ratio of 20:1. At the same time a complete CCR was carried out and this enabled the School to realign its activities and reduce the size of its module catalogue from around 350 to 190 modules. From 2002 the name of the School was changed to Engineering, Design and Technology to reflect the breadth of the School's activities. Following this major reorganisation, one of the external examiners was able to comment that the School had 'coped extremely well and, what is more important, that the education of the undergraduate students has not been disadvantaged in any way'.

159 The DAT was based on the CCR documentation and focused on those programmes in the areas of mechanical and medical engineering. The DSED included programme specifications and these had been prepared in accordance with the requirements laid down by the University. One of the major principles at the University is that the programme specification is a document written for students, but in order to support the course approval process three supplementary annexes had been produced. These show, in spreadsheet form, information about teaching hours and strategy, assessment and learning outcomes. The programme specifications for the Mechanical and Medical Engineering degrees make appropriate reference to the *Subject benchmark statement* for engineering and specify learning outcomes that are consistent with those expressed in that document.

160 Student progression emerged as a significant issue in the 2001-02 Annual Monitoring Review exercise with almost half of the students on the Mechanical Engineering programmes and two-thirds of the students on the Medical Engineering programme failing to progress to stage 2 honours at the first attempt. After resits the progression rates rose to 73 per cent and 43 per cent respectively for the Mechanical Engineering and the Medical Engineering programmes. Similar Pass rates of the order of 70 per cent were recorded for students progressing from stage 2 to stage 3. Staff in the School pointed to the declining market for these programmes and the consequences of this in terms of producing a long 'tail' in the admissions profile. It was also noted that the economic conditions that students are faced with force them to take up part-time employment, and this often occupies too large a proportion of the time that they should spend studying. When asked for their comments on the low progression rates, students acknowledged that the figures were poor but felt that this was not necessarily the University's fault. They recognised that there was likely to be a correlation between

attendance in classes and grades achieved in examinations. In the DSED the School pointed to the success of the Foundation year in helping to improve the pass rate from stage 1 to stage 2, and in widening participation.

161 Annual Monitoring Reports for 2001-02 and 2002-03 were made available to the audit team and these contained references to module review, external examiners' reports, SSLC meetings and feedback from student questionnaires. Between the 2001-02 and 2002-03 Mechanical and Medical Engineering Annual Monitoring Reports reports it was difficult to determine whether closure had been achieved on a number of the issues that had been raised in the action plan created as part of the earlier exercise. In particular, it was unclear how the School proposed to evaluate the effectiveness of any measures that had been taken to address these issues.

162 The School has developed a robust framework for module review and annual pedagogic review which exploits the feedback provided by students through unit evaluation questionnaires. Staff are able to reflect on the content and delivery of modules and plan for changes in subsequent years. The timing of the process is compromised at present by delays in central data becoming available although this can be fed in later.

163 As part of the restructuring and relocation of the School the University has invested in new laboratories and teaching space and a substantial injection of funds from industry has provided a state-of-the-art computer aided design (CAD) suite. The students were particularly pleased with the quality of the computing facilities and being able to access them into the evening.

164 Students are assigned a tutor when they enter the School and are expected to see their tutor at regular intervals during the first semester of the first year. In practice the interaction that students have with their tutors varies widely across the School from very supportive individual or group-based contact on the one hand, to virtually no contact at all on the other. The audit team discussed the question of tutorial support with staff from the School and were told that improvements could be expected when the system was changed to include Personal Development Planning. This was due to be rolled out eventually as part of the University's Excellence Plus strategy, although since the School was not one of the pilot sites for this initiative it had not yet received any guidance from the centre on the measures that would need to be introduced. Although it was acknowledged that improvements

were necessary to the tutorial provision within the School, it was prepared to wait for the Excellence Plus roll out.

165 SSLCs exist for the Foundation year and for the Mechanical and Medical Engineering programmes. These normally meet three or four times a year and while the attendance of student representatives has been patchy at times during the past year (2002-03), the numbers present were sufficient to enable the SSLCs to fulfil their function. It is intended that the minutes of SSLC meetings should be circulated to students by email shortly after the meetings have been held; indeed, the formal constitution for SSLCs states that 'minutes will be circulated promptly', although there is evidence to suggest that they were frequently subject to delay. Students were generally satisfied with the way in which relatively simple problems were dealt with by the SSLCs, but were concerned that more significant issues could rarely be resolved in time to benefit the current cohort of students. Apart from the SSLCs, students were not represented on any other committees within the School. The School staff said that, in addition to the UBU sabbatical officer, two student representatives were entitled to sit on the School Board. Students that the DAT team spoke to were unaware of this right to representation at this level, although the process of appointment to the SSLCs had not begun at the time of the audit visit. It was recognised that this situation was about to change with the establishment of the Course Representative Executive.

166 In a meeting with students the team was informed that the feedback of comments to students on their assessed work was extremely variable. Although in many cases the feedback was appropriate this was not always the case, and in a few cases students reported that work they had handed in was never returned to them. The Annual Monitoring Report for 2001-02 noted that several pieces of coursework were lost after being submitted, although students were not disadvantaged as receipts had been issued for their work.

167 All of the BEng programmes have been awarded full accreditation by the Institution of Mechanical Engineers (IMechE) for a period of five intakes from 2002. The outcome of the IMechE accreditation visit in 2002 highlighted a number of concerns in connection with the MEng programmes in relation to their continued viability and the amount of M-level material taught in the final year. The School appreciates that it needs to take a strategic view of the future of accreditation in engineering, design and technology programmes and began to address the concerns raised during the

CCR process. This will be especially important in the light of the new UK-SPEC proposals that have been developed by the Engineering Council (UK).

168 Separate external examiners are appointed for the Mechanical/Automotive and Medical Engineering programmes and operate according to the standards laid down by the University. These procedures were described by one external examiner as 'exemplary'. The examiners were actively engaged in the reviewing of draft examination papers and marking schemes, and opportunities were provided for scrutinizing coursework and examination scripts prior to the final year Board of examiners' meeting. It was noted that blind double-marking was adhered to and marks were allocated according to the marking schemes. Issues have been raised in the past in connection with coursework assignments in the final-year, although action has been taken to make these more challenging. Other issues in connection with low module averages in the middle (second) year and the balance between assessed coursework and unseen examinations are still being addressed. Both of the examiners declared themselves very satisfied with the standard of final-year projects and thought that the marks awarded were fair. A number of students were interviewed and the feedback they gave to the examiners was very positive. Particular mention was made of the fact that the School had undergone a major restructuring exercise and yet this had been achieved without having any detrimental impact on the academic performance of its students.

169 The audit team's review of student work was based mainly on samples of examination scripts from the various programmes that formed the subject of the DAT. The team were satisfied that the standard of student achievement was consistent with the learning outcomes contained in the programme specifications and was appropriate for the award of the BEng (Hons) degree as described in the *FHEQ*.

170 The audit team was satisfied that the quality of learning opportunities available to students was appropriate for programmes of study leading to the award of BEng (Hons) and MEng degrees and that these awards were appropriately located within the *FHEQ*.

Management

171 The DAT in the School of Management covered three undergraduate programmes: BSc Accounting and Finance, BSc Marketing and BSc Business Studies and Law, the latter being a degree offered jointly with the College. It also covered the MBA

programme as delivered full-time, executive part-time and distance learning within the UK. The number of students registered on these programmes totals 369; 186 are undergraduates and 183 are postgraduates of whom 63 are studying by distance learning. The MBA is a well-established programme that has been running for almost 30 years; all three undergraduate programmes have been developed within the last three years.

172 To support the DAT the School provided a contextual statement which set out the programmes' aims, the School's management and review processes, and also discussed the School's strengths and current and future plans. Programme specifications, internal and external review documents, statistics and samples of course documentation and student work were also made available to reviewers.

173 Programme specifications have recently been written and approved, at a special Mid-Term Review, for all programmes. The specifications relate to the levels defined in the FHEQ and staff confirmed the use of benchmark statements in developing the specifications. The section of the Code of practice relating to assessment had been used less directly.

174 The School relies on University systems for the provision of agreed progression and completion figures. Staff informed the audit team that the implementation of the University's new information system has caused some hiccups and concerns about accuracy. Local data is also collected for all programmes and used to monitor progress and outcomes.

175 The processes of monitoring and review of provision follow the system adopted by the University. As operated by the School these processes have distinct strengths and weaknesses. The annual monitoring process is a thorough and inclusive process which is coordinated by the relevant associate dean and feeds upwards to the AMT and CART and also to the School Board and the Dean. Students are invited to comment on the reviews and are involved in their discussion at School Board. The SED noted a number of areas where issues have been directed through the Annual Monitoring Review and the resulting action plans have led to improvements. Both staff and students commented on the Annual Monitoring Review as a useful process.

176 Within the School a number of processes such as Annual Monitoring Reviews focus on a range of provision, often all undergraduate or all postgraduate. This has the advantage of bringing together issues that are common to programmes at a particular level, but makes it more difficult to focus

holistically on particular degree programmes. Lack of specific programme focus is also a weakness in relation to the input of some external examiners who have been appointed to moderate standards for particular subjects across a range of programmes, and occasionally, also levels. The School has procedures for formally responding to external examiners' reports through the Dean, and issues raised in the reports are channelled into the Annual Monitoring Review. An example of an issue dealt with successfully in this way is the action taken to ensure that more First class degrees are awarded. In the view of the audit team the impact of external examiners could be increased if more examiners submitted timely reports and if externals regularly attended assessment meetings. Externals carry an unusually heavy load. In the team's view, the School should weigh carefully the advantages of the broad scope of work undertaken by externals against the disadvantages of the workload.

177 In recent years the School has undergone two external accreditations, one by EQUIS and one by AMBA. In both cases the School has received a positive outcome to the process and has acted effectively to address points raised by the accreditors.

178 The School has undertaken work to define assessment and grading criteria for undergraduates which has been ratified by School committees and external examiners and issued as advice to staff through the staff handbook. The University has detailed assessment regulations for all degrees but does not lay down detailed assessment strategies or policies regarding grading criteria. The University should consider building on such work to develop criteria with application across the institution.

179 The audit team had the opportunity to examine coursework and examination scripts from a selection of modules on the programmes included in the DAT. The standard of the work reviewed was in all cases appropriate to the awards and levels for which it had been submitted.

180 Students are provided with handbooks that they judge to be clear, helpful and accurate both about the University and the requirements of their programme. In addition, a great deal of further information is available to students on the web. Some students were not aware of the details of some processes, for example, how to appeal or complain, but they were aware of where they could find such information should they need it. Undergraduates commented favourably on the Student Self Development module as a preparation for study, and MBA students commented favourably on the support available for those returning to learning. Those students studying on the BSc Business Studies and Law degree received separate information from the University and the College. The audit team noted that students on such joint degrees could benefit from a single integrated handbook. The production of such a document might also highlight some areas of duplication or gaps in procedures, requirements and support that should be addressed by the two institutions.

181 The DSED noted the dedicated library, IT, teaching and social facilities available on the Management Campus. Students commented favourably on the learning support facilities available to them, in particular the rollout of the VLE and the library. The School continues to invest in both hard and soft learning resources. The DSED noted that a wireless environment has been developed for MBA students to use for their laptops as a result of student demand. The School also has its own Effective Learning Officer to help students develop their study skills as part of the School's response to the widening participation agenda.

182 Undergraduate students are assigned a personal tutor. Students on the BSc Business Studies and Law degree also have a tutor at the College. The tutoring system is reactive rather than proactive and students were not fully clear about its purpose. There was no direct criticism of the tutoring service but it appeared to the audit team that it could pay a more significant part in the students' experience of Bradford.

183 Students have the opportunity to raise issues in various ways. In the School of Management student representatives are members of the School Board and it is proposed to extend student involvement to both undergraduate and postgraduate committees. Students commented that a main channel for involvement was the SSLCs. The audit team can confirm that issues raised were dealt with or passed to relevant bodies for action. SSLC meetings were the source of many issues taken forward by the Annual Monitoring Review process. Minutes are posted publicly. Student opinion is surveyed at the end of each module and each year and the results feed into the Annual Monitoring Review. Students cited a number of issues they raised that had been addressed effectively. They also noted that the culture of the School encouraged informal contact and felt that members of staff were approachable and receptive to student views. The students on the BSc Business Studies and Law degree do not have direct representation on bodies dealing with law degrees at the College of which they are part. This should be addressed.

184 The audit team found that the quality of learning opportunities was suitable for the programmes of study leading to the awards named above and that these programmes were appropriately located within the *FHEQ*.

Peace Studies

185 The Department of Peace Studies offers five undergraduate awards and three masters programmes:

BA (Hons) Peace Studies;

BA (Hons) Conflict Resolution;

BA (Hons) Development and Peace Studies;

BA (Hons) International Relations and Security Studies;

BA (Hons) Peace Studies and Spanish;

MA Peace Studies;

MA Conflict Resolution; and

MA International Relations and Security Studies.

All programmes were included in the scope of the DAT.

186 A substantial proportion of the Department's students is recruited from the European Union and overseas, and the majority of those registered for postgraduate awards are studying on a full-time basis. The aims of the Department include the provision of 'a curriculum supported by active scholarship…and a research culture that promotes breadth and depth of intellectual enquiry and debate'. The provision offered by the Department derives significant benefit from the research activity of its staff, and this was apparent in the range, character and content of the modules available to students.

187 Programme specifications were supplied for each of the Department's undergraduate programmes, and a single specification was provided for the postgraduate provision. Reference was made to the appropriate benchmark statements and, although they were not differentiated by level, the programme learning outcomes were stated in terms that are consistent with the *FHEQ* awards descriptors. In its discussions with both staff and students, the audit team sought to establish the intended purposes of these programme specifications, and the uses to which they were put. Staff explained that programme specifications were designed to serve as an aid to programme and quality management, and as a source of information for students.

188 Staff described the experience of producing programme specifications and their various annexes

as a useful, if time-consuming and challenging, discipline. The specification and its annexes are employed as the primary documents for course approval exercises and they replace the voluminous documentation previously required by the University. The annexes, and in particular the provision of learning outcomes on a module-by-module basis, were described by staff as helpful for course management purposes. The annual monitoring of courses is conducted against the aims and learning outcomes set out in programme specifications, and draws upon the information provided by student evaluations, external examiners' reports and the statistical data supplied by the ASSU. The audit team was informed that AMRs are drafted by the programme directors in the light of discussion in the SSLC, and that they are shared widely with colleagues across the School before they are considered by the School Academic Committee.

189 The audit team was supplied with copies of the most Annual Monitoring Reports for the programmes listed in paragraph 185, and the minutes of the School Academic Committee and SSLC. The Annual Monitoring Reports adhere to the University format and while it was apparent that they contained a reasonably thorough evaluation of the provision against its aims and learning outcomes, the team observed that the reports offered little narrative in support of this evaluation and the action plans. While students confirmed that they were afforded the opportunity to participate in discussions on the Annual Monitoring Reports, it was apparent from the minutes of the School Academic Committee that formal discussion at that level tended to focus on matters of presentation and format to the possible exclusion of issues of more substantive import.

190 The DSED stated that the Department's procedures 'allow for student input into the programmes in a number of ways', including informal feedback through interactive teaching, the Student Liaison Assistant and departmental events. Student representatives reported that the Student Liaison Assistant performed an important role in facilitating communication between staff and students, complementing the Department's other more formal arrangements for eliciting student feedback which included student representation on the School Academic Committee and regular meetings of the SSLC. These more formal mechanisms include the issue of student evaluation questionnaires for which, the audit team was informed, there is a relatively high response rate. Staff suggested that the high response rate was due to the responsiveness of the Department to the

comments made by its students and thus their willingness to provide feedback through this medium. This was corroborated by the evidence provided by the reports issued by the Department to students on the outcomes of their evaluations, and by the comments made by students in their meeting with the team. In this meeting students said that the informality of their relationships with staff and the 'strong community feel' within the Department created a culture which encouraged feedback. Both the students and the DSED provided examples of effective and appropriate action having been taken in response to student feedback.

191 The programme specifications are placed on the Department's web page. Students informed the audit team that they were not only aware of these programme specifications, but also valued them as an initial source of the information needed for module selection and as a means of determining programme outcomes and their future career prospects. Students were particularly complimentary about the additional information supplied to them by the Department. This information includes brochures, student handbooks and module descriptors. The brochures for both undergraduate and postgraduate programmes are detailed and informative, providing useful introductions to the field of study and brief details of module content and assessment requirements. Student handbooks are provided for each year or stage rather than on a module-by-module basis. They include expanded and accessible versions of the relevant programme specifications, a statement of progression requirements, staff details and guidance on study, support and assessment.

192 The Department's teaching policy includes sections on reading and returning students' work and marking. The latter sets out the Department's policy on second-marking (including anonymous and blind double-marking). Students commented on the good support for assessment, the prompt return of assignments and helpful feedback on assessed work. The external examiners' reports generally confirmed the high standard of teaching, assessment and student achievement within the Department. While several reports commented on inconsistent marking standards, it was evident from subsequent reports that the Department had taken appropriate action. Staff explained that the issue had been discussed at staff meetings and that marking guidelines had been reviewed before the marking period. The audit team considered that the standards and content of the assessed work that it saw were appropriate to the titles of the awards and

their location within the *FHEQ*, and that the Department is vigilant in ensuring that its high standards are maintained.

193 The DSED stated that 'all students are offered a supportive and structured environment' and that the 'tutorial system and allied support structures are designed to support the University's widening participation strategy'. The students met by the audit team expressed the view that the arrangements for supporting their learning enabled the Department to meet the needs of students recruited with a wide range of entry qualifications and from diverse national and cultural backgrounds. These arrangements include the appointment of the Student Liaison Assistant, reflecting the Department's aim of assisting students in career preparation and the development of key skills. In practice, the role of the Student Liaison Assistant appears to range more widely, and it was suggested by staff that this could be one factor which might account for the low level of student appeals within the Department. Students commented very favourably on the quality of teaching, which they described as 'leading edge', and the safe environment provided by the Department for the exchange of views within such a diverse student body. On the basis of the available evidence, the team considered that the claims made by the DSED were justified, and that the resources and environment provided by the Department afforded full opportunities for students to achieve the requirements of the awards for which they were registered and that these awards are correctly located within the *FHEQ*.

Section 4: The audit investigations: published information

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

194 The SED focused on the undergraduate prospectus as an award winning publicity document that gained the HEIST Award in 2003. During the visit, the audit team accessed examples of information available to students such as course brochures, intranet information, programme specifications, student handbooks and timetables. These were discussed with students at institutional and discipline levels.

195 The SWS states that 78 per cent of those students whose views contributed to the report described the University information as a fair representation of student life and raised no concerns

about the reliability of the information. Students confirmed that when enquiring further about the recruitment process the University provided a professional and personal service.

196 Information received at programme level was reported as being up to date and coherent, although it is not presented to students in a consistent format; for example, the University student handbook guidelines are not used as a benchmark by programme directors. Good practice was noted within one programme where a minimum standard for module handbooks was monitored by the programme. There was some evidence within one DAT that two different sets of information are provided for students undertaking joint awards with the College. Paper based information is often internet supported by internet-based materials. The provision of specific internet-based contact within one department for non-academic but subject related activities was noted by the audit team as good practice, and the use of group emails to contact peers in the same year was working well for most students.

197 The programme specifications are useful to students and were described by one group as being helpful in choosing their programme of study as they could review the expected outcomes of their programme and the variety of career opportunities available on completion.

198 Students reported that they understood the expectations on them regarding assessment and programme requirements. The majority of students met by the audit team reported that although they did not expect to use the academic appeals and student complaints procedures, they would look for these on the University intranet and consult the UBU or their personal tutor for help to begin the process.

Reliability, accuracy and completeness of published information

199 The SED detailed the University's response to the recommendations of the HEFCE's document 02/15, *Information on quality and standards in higher education*, and its progress towards publishing such data. The University has been making information available on the University intranet and, with respect to admissions, progression, award and destination statistics, the senior management group will formally approve the release of information into the public arena. In relation to these statistics, the University has developed a 'value added' component which enables a dynamic manipulation of data by an enquirer. While this does not identify students by name, the ability of an enquirer to interrogate the data at programme

level by gender, ethnicity, and entry qualifications may lead to breach of confidentiality where the cohort size is small.

200 The University is currently consulting on the appointment of Chief External Examiners with responsibility for producing overview reports and will be reviewing this strategy in light of the recent information requirements published by HEFCE. The audit team did not discover plans to gain feedback from employers and graduates.

201 The stage evaluation questionnaires are analysed centrally and provided to programme leaders for inclusion within Annual Monitoring Reports. The University is adapting this report to meet the requirements for published information.

202 Information for the prospectus is closely linked to the course approval and minor change processes. The defined timescale enables the University to advertise their programmes accurately.

203 The audit team was satisfied that the University is publishing reliable, accurate and complete information and is making progress towards meeting the requirements of *HEFCE 02/15*.

Findings

Findings

204 An institutional audit of the University was undertaken during the week commencing 10 November 2003. The purpose of the audit was to provide public information on the quality of the University's programmes of study and on the discharge of its responsibility as a UK degree-awarding body. As part of the audit process, according to protocols agreed with HEFCE, SCOP and UUK, four DATs were selected for scrutiny. This section of the report of the audit summarises the findings of the audit. It concludes by identifying features of good practice that emerged from the audit, and recommendations to the University for enhancing current practice. With regard to collaborative provision, this report focuses on the University's relationship with the College. The rest of the University's collaborative provision will be the subject of a separate audit.

The effectiveness of institutional procedures for assuring the quality of programmes

205 The University has established a CARP to which staff are nominated. Groups to undertake approval, monitoring, and review processes are appointed from the Panel to either CARTs or AMTs. The course approval process consists of two stages of procedures which involve both academic and resourcing committees at school and University level. It results in a report which goes to a subcommittee of the APC, the QASC, which makes recommendations to Senate. Guidelines for all processes are provided in Handbooks. External input is provided by appointed 'external experts' primarily by written submission.

206 Annual Monitoring Reports are written to a common template by designated members of staff. A standard set of supporting documentation is required which includes external examiners reports and the responses to them. When approved at school level these are submitted to an AMT convened from the CARP. Feedback is given to schools and a written summary report is made by one of four AMTs to the QASC. The audit team concluded that the process for dealing with the reports was sound but that the structure of the report lacked cohesion.

207 Each programme is reviewed on a six-yearly cycle by CARTs put together as for course approval. There is also a more informal process of mid-term review for approval of programme specifications only. Course teams provide a comprehensive set of documentation which includes a written critical

appraisal. After the review meeting a report is submitted to the QASC which in turn reports to the APC. The audit team concluded this review process was well informed and robust. There was concern over the form and consistency of the external experts' input into the programme approval process. External experts are only required to provide written input to this process and are not required to attend discussions; the team considered that the University may be missing an opportunity to make best use of the external input to the process. External experts are appointed for three years.

208 Overall, the audit team concluded that processes were lengthy and complicated. There are some concerns about the role of Senate, the format and consistency of the external input and the limited number of staff involved.

209 Student feedback is elicited through unit level questionnaires, stage questionnaires and through SSLCs. The outcomes from stage questionnaires are part of the supporting information for Annual Monitoring Report but the input from unit questionnaires is variable. The SED identified the return rates on stage questionnaires in particular as an ongoing difficulty. Attempts to share good practice in this area have been made.

210 There is no university-wide requirement for schools to seek feedback from graduates or from employers of graduates on the quality of programmes. Some schools have advisory boards drawn from their employment sector which provide informal opportunities for constructive interaction in this area. No structured formal mechanisms exist for obtaining feedback on the quality of programmes from graduates.

211 There is significant distance-learning provision in some schools and collaborative provision figures noticeably in the University's overall undergraduate numbers. The University's policy is that all such provision should be subject to the same procedures as it applies to its internal provision except for the College, to which different but related procedures apply. In the audit team's view the current policy does not recognise the inherent increased risk for the College as a partner institution. There are also significant concerns about the ability of the University to oversee effectively provision in the College leading to a University award.

212 The SED stated that the main quality-related committees together form an important function for assuring quality and standards of awards. It goes on to say that the University recognises that the reporting structure and membership require further

qualification to avoid duplication and assure effectiveness. It also says that it believes its Annual Monitoring Review to be effective.

213 The audit team concluded that the quality assurance processes and the associated committee structure had developed gradually over the years to a point where they were now overly complex, hierarchical, and multilayered. Successive changes have been made in response to external developments to the point where the quality assurance arrangements no longer best serve the University's need to have effective, efficient, timely, appropriate and inclusive processes. Given the mutual decision not to merge with the College in the foreseeable future, the team consider it necessary and timely for the University to conduct a complete holistic review of its quality assurance structures and processes paying particular attention to the arrangements with the College and the quality assurance of the provision delivered there that leads to a University award.

The effectiveness of institutional procedures for securing the standards of awards

214 In 1997-98 the University introduced a regulatory framework for its modular scheme. Since then, a tension has emerged between ensuring uniformity across the institution and affording sufficient flexibility to accommodate local needs. This tension was apparent in the attempts by the University to implement institution-wide criteria for the marking and grading of assessed work. The audit team formed the view that this issue will require firm executive action if the assurance of consistent standards is to be achieved within a reasonable timescale.

215 The University distinguishes between the roles of unit and course external examiners. All newly-appointed external examiners are sent a comprehensive information pack and they are invited to attend an induction event. The annual reports of external examiners are considered by the Pro-Vice-Chancellor (Learning and Teaching) and copied to the appropriate departments. Departments are required to report on progress made on issues that have been raised by external examiners in their Annual Monitoring Reports and, once approved, copies of these should be sent to external examiners. External examiner reports are also analysed by the ASSU which on an annual basis prepares summaries for undergraduate and postgraduate provision.

216 The SED stated that external examiners play a key role as arbiters of the standards of programmes leading to awards of the University and, to this end,

particular care has been taken in the development of the University's procedures for external examining including the processing of external examiners' reports. The University's view was confirmed by the audit team's enquiries. It was evident that the summary reports are considered thoroughly by senior committees, and discussion within these committees has resulted in a number of appropriate resolutions for further action. Action taken by the University includes a strengthening of its procedures for ensuring that external examiners receive copies of the relevant AMRs. The team viewed this as good practice.

217 Student progression and completion data are issued by the ASSU to schools, and the audit team was furnished with examples of the use of this information in the course of the Annual Monitoring Review process. Although the data set available to staff is reasonably comprehensive, it relates to undergraduate or postgraduate provision within an area rather than to individual courses, although this can be provided by ASSU if required. The University is addressing this issue and it is also seeking to resolve the occasional disparities that arise between centrally-recorded and locally derived information. In general, the team found that there are effective arrangements to provide statistical data for consideration by course teams, but that the University might wish to consider the desirability of furnishing its senior committees with statistical analyses of student progression and completion across the full range of the University's provision, including that which is offered in partnership with other organisations.

The effectiveness of institutional procedures for supporting learning

218 Operating within LSS the University's library and IT facilities are generally well appreciated by students. The library offers extended opening hours and works closely with the academic areas while many of the 369 computer workstations maintained by IT Services are accessible 24-hours a day.

219 The SED provided a comprehensive description of provision in this area and explained the role that these services play in supporting the University's aims and objectives. In recent years there has been substantial investment in the provision of information in electronic format and undergraduates in particular expressed a preference for accessing information in this way. Annual service reviews form an essential part of the annual planning process for the library and IT Services.

220 The phased merger of Management Information Services with LSS will become increasingly important as student information systems need to be more closely integrated with the VLEs system that the University is currently installing. At present it is being left to schools and departments to articulate a clear and strategic objective for the use of a VLE and the University needs to do more to develop and promote a top-level strategic vision of the role that these systems will play in the University of the future. There is a similar lack of any clear strategy for the provision of learning resources in support of the University's mission to widen participation.

221 The variability in the way that the tutorial system operates across different schools and departments in the University was commented on in the 1998 Quality Audit report and the audit team found evidence which showed that the situation has changed little in the intervening period. There appears to be no institutional overview of personal tutorial support and, so far as the team have been able to tell, there is no centrally produced guidance or University CoP on this subject. In its SED the University stated that a review of the effectiveness and expectations of the personal tutor system will need to be carried out in the context of the Excellence Plus Strategy. Excellence Plus is aimed primarily at student self-development and key skills acquisition and has so far been piloted in four of the eight schools. It is intended that the use of Progress Files should be incorporated as an integral part of the personal tutor system. The team recommends that the University should expedite the review of the personal tutor system.

222 Academic support for students engaged in postgraduate research is provided through the appointment of supervisors and, in most cases, there are two members of staff associated with each student. Graduate students who met with members of the audit team spoke highly of the standard of supervision they had experienced.

223 Details of the University's central student welfare services were included in the SED under the heading of Learning Support Resources. This provided an accurate description of the arrangements for personal support and guidance and where relevant the precepts of the *Code of practice* have been adequately addressed.

224 The University achieved IiP status in March 2003 and the priority it attaches to the effective management of staff and performance is reflected in its Human Resource Strategy. Arrangements are in

place for the induction and integration of new staff, all of whom are allocated a mentor for the duration of their probation. Staff conveyed to the audit team that the guidance they had received when they joined the University had been particularly helpful and that mentors had played a valuable role which often extended beyond probation. The University has a formal appraisal scheme for all staff and in recent years this has been transformed from a rather patchy exercise to near complete coverage. The University also promotes recognition of teaching excellence through its annual Chancellor's Awards for Distinguished Teaching with nominations made by students and then supported by staff colleagues.

225 Staff training and development plays a key role in realising the University's strategic objectives by endeavouring to create a workforce able to deliver high-quality teaching and research. The ASSU in conjunction with the TQEG runs a Learning Support Seminar series, and a joint initiative with the College has led to the development of an impressive joint catalogue of training and development events open to members of both institutions. The SED noted that peer observation of teaching had been embedded in University practice and the audit team was able to confirm this with staff.

226 The audit team was impressed by the University's approach to the assurance of quality of teaching staff, through appointment, appraisal and reward. The team also considered that the level and quality of staff development that was offered in the University and the ways in which it is planned, coordinated and delivered was worthy of note.

Outcomes of discipline audit trails

Clinical Sciences

227 The Clinical Sciences DAT reviewed the undergraduate provision of the Foundation year in Clinical Sciences/Medicine (1 year full-time) and BSc (Hons) Clinical Sciences (3 years full-time). The audit team formed the view that the standard of student achievement was appropriate to the title of the award and its location within the *FHEQ*. Assessment took account of University guidance and was managed with consistency across the programme. The learning opportunities offer a seamless transfer of students to the Medical School of the University of Leeds. Programme specifications are made available to students and are utilised by the Course Management Committee in the annual monitoring process. They could be enhanced by identifying the levels at which the graduate outcomes are achieved and inclusion of all relevant subject benchmarks for each of the identified routes within the award.

228 The course team is committed to the continuous review and enhancement of the programme and demonstrated evidence of their responsiveness to student feedback including actions resulting from the review of module and stage evaluations submitted by students. Module handbooks inform new students of actions taken as a result of previous students' experiences of the module. Students commented favourably on the course team's approachability and its availability in a variety of supportive roles, noting in particular the benefits of regular meeting with their personal tutors. The audit team concluded that the quality of learning opportunities offered is suitable for this multidisciplinary course and located correctly within the *FHEQ*.

Engineering

229 From its study of students' assessed work, and from discussions with students and staff, the audit team formed the view that the standard of student achievement in the BEng programmes in Mechanical Engineering, Mechanical and Automotive Engineering and Medical Engineering, and the MEng programmes in Mechanical Engineering and Medical Engineering, was appropriate to the titles of the awards and their location within the *FHEQ*. The programme specifications relate to the *Subject benchmark statement* for engineering and provide concise information about the programmes in a style that is oriented towards the needs of prospective students.

230 The School has had difficulties with the level of recruitment onto its BEng and MEng programmes and the audit team were concerned about the low progression rates for the programmes that formed the subject of the DAT. Tutorial support and the feedback of comments on assessed work were reported by students to be variable and the School is expecting to address the former through implementation of the University's Excellence Plus Strategy.

231 The School of Engineering, Design and Technology underwent a major restructuring exercise in 2002 although according to reports from external examiners this was achieved without having any detrimental impact on the academic performance of students. As part of this exercise the University invested in new laboratories and teaching space and a substantial injection of funds from industry provided a state-of-the-art CAD suite. Students commented favourably on the quality of the computing facilities and being able to access them into the evening.

232 The audit team concluded that the quality of learning opportunities provided for students was suitable for programmes of study leading to the award of BEng (Hons) and MEng degrees and that these awards are correctly located within the *FHEQ*.

Management

233 From its study of students' assessed work, and from discussion with students and staff, the audit team formed the view that the standard of student achievement in the MBA programme, the BSc programmes in Accounting and Finance, BSc Marketing, and the BA in Business Studies and Law offered jointly with the College, was appropriate to the titles of their awards and their location within the *FHEQ*. Programme specifications set out clearly the aims, objectives and learning outcomes of the programmes together with details of how these are to be achieved and the programme delivered. The specifications reflect the relevant subject benchmark statements.

234 Evaluation of the provision by both undergraduates and graduates is very favourable. They appreciated the quality of the environment and the learning resources available to them. Students commented on the good communications which marked their relationships with staff, the quality of feedback they received and their involvement in School affairs. Students on the joint programme were complimentary about their learning experiences but noted that further coordination between the two providing institutions could be beneficial. The audit team concluded that the quality of learning opportunities provided for students, including graduate students, was suitable.

Peace Studies

235 The Department of Peace Studies offers five undergraduate awards and four masters programmes. The standards and content of the assessed work were appropriate to the titles of the awards and their location within the *FHEQ,* and the high standard of teaching, assessment and student achievement within the Department was confirmed by external examiners' reports. There are effective arrangements for the moderation of assessed work, and students commented favourably on the department's assessment procedures.

236 The information provided for students is detailed and informative, and there is clear evidence that the Department succeeds in its attempts to provide a safe and supportive learning environment that caters for the needs of students recruited with a wide range of entry qualifications and from diverse national and cultural backgrounds. Students commented very favourably on the quality of teaching, which they described as 'leading edge'. The audit team considered

that the resources and environment provided by the Department afforded full opportunities for students to achieve the requirements of the awards for which they were registered.

237 Programme specifications were supplied for each of the Department's undergraduate programmes, and a single specification was provided for the postgraduate provision. These are designed to serve as an aid to programme and quality management, and as a source of information for students. The programme specifications are placed on the Department's web page and students informed the audit team that they were valued as an initial source of the information needed for module selection and as a means of determining programme outcomes and their future career prospects.

238 The Department has established effective arrangements to enable students to contribute to the monitoring and development of its provision. These include the appointment of a Student Liaison Assistant and a variety of formal arrangements for eliciting student feedback. Students reported that the informality of their relationships with staff, and the fact that effective and appropriate action is taken in response to student feedback, created a culture which encouraged their active participation in the evaluation of courses.

The use made by the institution of the academic infrastructure

239 The SED identified improved externality as one important feature of the University's approach to the maintenance of academic quality and standards, and stated that is has started to integrate the elements of the national academic infrastructure into its own quality procedures. The ASSU has performed a key role in both evaluating the University's arrangements against the precepts of the *Code of practice* and in ensuring adherence to any institutional requirements though the medium of its own codes of practice and Quality Assurance Handbook. The evidence available to the audit team indicated that Senate committees had considered the recommendations of the ASSU, and of the various working groups that had been established as each section of the *Code* was published. This, however, has tended to focus in the procedural implications of the *Code.* In any future review of its quality strategy, the University may find it helpful to take a longer-term view by considering the more fundamental issues which inform the continuing development of the *Code* and to ensure that these issues are debated in full by the relevant committees of Senate.

240 The University is currently reviewing the recommendations of a working group on the production of programme specifications, and it is by this means that the University is addressing the implications of the *FHEQ*. This process has been supported by the early dissemination throughout the University of work within the sector on level descriptors. While there was some variation in the level of detail provided by programme specifications, the majority were both comprehensive and written in an accessible style. The intended purposes of programme specifications are to support the course approval process and to provide information for students, and the audit team was able to confirm the value of the University's programme specifications in both respects.

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

241 The SED prepared for the audit gave a clear description of the University arrangements for assuring the quality of the provision and securing the standards of its awards. It reflected on aspects of the provision indicating areas of good practice and areas of difficulty. The audit team was able to explore these during the visit.

242 At the time of the visit some of the intended changes indicated within the SED had not yet been implemented. The overall lack of a strategic emphasis within the document with little reference to the development, implementation and monitoring of central policies for quality assurance processes and consistency of academic standards was noted by the audit team and reflected the current situation at the University.

243 The SED reflected the planned merger with the College which was anticipated at the time of its submission. However, this was no longer the case at the time of the visit. The audit team was guided by the SED, but scheduled further detailed discussion with staff at both institutions to review the University's current approach to its relationship with the College.

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

244 The SED discussed the enhancement of quality and standards by describing various initiatives the institution intends to pursue. These included reviews of:

- the effectiveness of how the University listens to the student voice;

- the effectiveness and expectations of the personal tutor system;

- the effectiveness of the arrangements for quality related committees and the system of course approval and review;

- the usefulness and effectiveness of the approach to programme specifications; and

- the implementation of the national academic infrastructure.

The audit team discussed these proposed initiatives during the visit and staff the team met were not always aware of how these intentions were to be progressed.

245 The lack of a more strategic approach to enhancement may help to explain why personal tutoring, for example, has not received prompt and effective attention. This issue was first raised in an Annual Monitoring overview in 1997-98 and also identified as an issue in the 1998 Quality Audit report.

246 The role of quality-related committees is discussed in the main body of the report. In the specific area of teaching quality enhancement a more strategic approach has been adopted with the introduction of a Chancellor's Award for Distinguished Teaching and a well-established Teaching Quality Enhancement Group. In the audit team's view both these initiatives make an effective contribution to the recognition and enhancement of teaching quality.

Reliability of information

247 The SED detailed the University's overall position in relation to both the published information set and information required to be available within all higher education institutions by *HEFCE 02/15*. The audit team found that the University was making progress towards fulfilling its responsibilities in this matter.

248 The University currently publishes information about admissions, progression, award and achievement on the intranet and will release this information into the public arena once assured of its accuracy. The audit team has concerns about the proposed facility to allow public users to manipulate the data, because of the possibility that individual students within small cohorts could be identified.

249 The review documentation and discussion in meetings confirmed that the current published information matches the reality of the provision. With the exception of gaining information from

graduates and employers, the University plans to publish data at, or above, the national standards.

Features of good practice

250 The following features of good practice were noted:

i the University's commitment to the regional community (paragraphs 7, 11 and 137);

ii the value of the University's programme specifications in supporting course approval processes and in providing information for students (paragraphs 58 and 240);

ii the University's efforts to combine major course reviews with those required by PSRBs, (paragraph 60);

iii the induction and mentoring of new staff (paragraph 78);

iv the joint training and staff development initiative with the College (paragraphs 86 and 91); and

v the University's commitment to widening participation and to catering for the needs of a diverse student body (paragraphs 137 and 153).

Recommendations for action

251 Recommendations for essential action:

i on the basis of the evidence relating to the partnership with the College, that the University reviews and modifies monitoring processes to ensure effective oversight of its collaborative provision and secures appropriate and formal agreements with collaborative partners (paragraphs 127, 132 and 133).

252 Recommendations for action that is advisable:

i without delay, progress the work to define assessment levels to ensure consistent standards across the University (paragraph 32);

ii without delay, initiate a review of the strategy and structures for the management of quality and standards (paragraphs 42, 46 and 52);

iii review the effectiveness of the structures and processes for annual monitoring of academic provision (paragraphs 45 and 46);

iv in collaboration with the student body, develop effective and transparent arrangements for student participation in all appropriate quality assurance processes (paragraph 65); and

v   ensure that the current review of the tutorial system delivers an effective and appropriate level of support across the University (paragraph 108).

253 Recommendations for action that is desirable:

vi   consider how the extent to which students feel they are informed of the outcomes of the feedback they provide and the manner in which it is employed could be improved (paragraph 70); and

vii   consider furnishing either APC or QASC with statistical analyses of student progression and completion across the full range of the University's provision, including that which is offered in partnership with other organisations (paragraph 74).

Appendix

The University's response to the audit report

The University welcomes the opportunity to provide a statement on developments since the audit visit in response to the recommendations outlined in the report. Following the significant decision made before the audit visit to suspend the proposed merger with the College, the University and Bradford College have established a 'Continuing Collaboration Strategy Group' to address relevant quality related issues.

The Group has prepared an action plan that addresses the issues subsequently confirmed by the audit team. Following on from the regular discussions held with Bradford College during the merger process, it has been agreed to formally align Bradford College's quality assurance arrangements for validated programmes with the University's own rigorous procedures for course approval, monitoring and review for which 'broad confidence' has been affirmed by the audit team.

The draft revised Agency *Code of practice; Section 2: Collaborative provision, flexible and distributed learning* [including e-learning] when finalised will provide the University with an opportunity to review current practice and management of all our collaborative provision against the precepts through normal procedures developed to respond effectively to external requirements.

A University consultation, initiated before the audit visit, on the implications of the publication and consistent implementation of clear criteria for the marking and grading of assessments has resulted in the preparation of a series of informed recommendations presented to the Academic Policy Committee for further discussion and subsequent approval and implementation across the University.

As stated in our self-evaluation document (and instigated before the audit visit), we continue to review the effectiveness of our quality strategy and arrangements for quality assurance. Although we do not possess a written quality assurance strategy, we consider that quality is an integrated component of everything we do, rather than perceived as a separate entity. However, we recognise the need to reflect on the merits of this belief. The annual review of our course approval, monitoring and review panel provides an opportunity to consider the effectiveness of our quality assurance processes and we have regular meetings of Associate Deans, and CART Chairs, all of which make recommendations to the Academic Policy Committee.

Since the audit visit we have completed the annual monitoring review process to assure and enhance the quality of all our undergraduate and postgraduate taught provision. In our self-evaluation document we reflected on some difficulties that we experienced during the first year of the implementation of a new format for annual monitoring reports. The quality of the annual monitoring reports this year has improved as a result of increased guidance and support. We acknowledge that there is room for improvement and will work with academic departments to further enhance the monitoring process as appropriate.

We continue with our pro-active approach to support the implementation of the teaching quality information data set with further development of a web based facility for academic departments to access the published information.

Finally, we welcome the findings of the discipline audit trails which confirm that our quality assurance systems and processes are working effectively at the programme level.