



The UK Quality Code for Higher Education - Advice and Guidance



Sector-Agreed Principle 1 -
Taking a strategic approach to
managing quality and standards

July 2025



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About this Guidance

Context

This Advice and Guidance supports the [UK Quality Code](#) and is designed to unpack *Sector-Agreed Principle 1 - Taking a strategic approach to managing quality and standards* and the Key Practices that sit under it. It has been produced by QAA in partnership with a writing group of sector experts and peer-reviewed by colleagues across UK higher education. This is in accordance with the ethos that the Quality Code remains a sector-agreed reference point, built on a shared understanding of what providers can expect of themselves and each other in the assurance and enhancement of quality and the maintenance of standards across post-secondary education throughout the UK. QAA would like to thank the writing group and peer readers for their invaluable contribution in developing this guidance.

An important contextual note relates to the diversity of higher education providers in the UK. Providers can be large universities, operating with significant infrastructure, or small specialist providers, operating on a significantly smaller scale, or any number of other different operating models. The Advice and Guidance is designed to be useful for all providers (and representatives from a range of providers formed the writing and peer review groups), but we recognise that, on occasion, the nomenclature used could suggest a larger provider's context. It is important that each reader interprets the Advice and Guidance in the context of their own operating environment and that all readers recognise that quality and homogeneity are not synonymous.

Scope

This Advice and Guidance encourages providers to reflect on their practice and processes in relation to the Sector-Agreed Principle. Following the Advice and Guidance is not mandatory, but illustrative of approaches that can help providers meet the relevant Principle. National regulators and QAA do not view the information in the Advice and Guidance as compliance indicators. This guidance does not interpret statutory requirements.

The language we use

Where the word 'should' (or any other similarly directive language) appears in the Advice and Guidance this represents a shared understanding within the UK higher education community. On some occasions an institution can align with the Sector-Agreed Principle in a range of different ways, and in such cases an institution may have a different approach to that set out here. Ultimately, to be aligned with the Quality Code, an institution must be able to demonstrate how it meets the Sector-Agreed Principles in practice. No provider or individual should feel that the Advice and Guidance is prescriptive or impinges their autonomy or freedoms.

Structure

In response to sector demand, the Advice and Guidance aligns directly with the overarching Sector-Agreed Principles to provide clear navigation between the different elements. The guidance begins by unpacking the Principle in an operational context. It is then divided into subsections focusing on each Key Practice outlining practical considerations and approaches for providers to benchmark their own way of working. This features practical tips and experience shared by providers on operational practice. Finally, in each subsection there are tools to enable reflection on the guidance. These tools offer the opportunity to explore what 'good' might look like through reflective questions and practical scenarios that enable interrogation of current practice with a view to enhancing quality.

Commonly used terms

The following terms are used throughout this advice. Other terms which benefit from a precise definition are listed at the end of this document.

- **Students** - refers to all individuals studying towards a higher-level award regardless of demographic, mode of delivery, level of study, subject area, or geographic location.
- **Provider** - describes all types of organisations that provide higher level learning, including universities, colleges, institutes of learning, and employers. We also use 'institution' in some instances where 'provider' might not suit the context.
- **Student Representative Body** - a formal body or mechanism that represents and promotes the interests of students. This may be known as a students' union, a students' association, or guild, or by another bespoke name where these specific organisations do not exist.



Sector-Agreed **Principle 1** - Taking a strategic approach to managing quality and standards

Providers demonstrate they have a strategic approach to securing academic standards and assuring and enhancing quality that is embedded across the organisation.

Key Practices

- a. Academic standards and the quality of the student learning experience are the responsibility of the provider. Degree-awarding bodies are aware that they have ultimate responsibility for the qualifications offered in their name.
- b. The strategic approach is employed wherever and however provision is delivered and is embedded in the culture and practices of providers.
- c. The strategic approach aligns with providers' policies and practices on equity, equality, diversity and inclusion, and environmental sustainability for students and staff.
- d. The strategic approach to securing academic standards, quality assurance and enhancement is published, communicated clearly and accessible to staff, students and external stakeholders. It is supported by a comprehensive and transparent governance framework.
- e. The strategic approach is monitored and evaluated on a regular basis.
- f. External expertise is a key element of the strategic approach to managing quality and standards.



Principle 1 - Taking a strategic approach to managing quality and academic standards

Providers demonstrate they have a strategic approach to securing academic standards and assuring and enhancing quality that is embedded across the organisation.

What is meant by 'a strategic approach'

Effective oversight is fundamental to the provider's understanding of its performance, how it supports the student experience and how it protects academic standards. It ensures that at each level of the organisation there is a valid, systematic, evidence-based approach that results in transparent qualitative and quantitative information, which is used effectively to foster enhancement, to disseminate good practice, and to remediate issues. This enables the provider to mitigate risks, to recognise and address challenges to quality and standards and to allocate resources effectively and proportionately to address them.

Quality and standards

Providers demonstrate commitment to their responsibility for academic standards and the quality of the student learning experience through effective and strategic oversight. Often, quality arrangements are developed and implemented over time, with overlapping or even conflicting activities. A strategic approach differs by setting and controlling a coherent range of systems, articulated in one place.

This can take the form of a clearly articulated quality framework, owned and implemented by the provider for the purposes of self-evaluation, assurance of quality, and enhancement.

Mission and strategy

To be effective, quality approaches need to be developed strategically, with clear links to a provider's overarching mission and strategy. All providers should have a strategic plan, which documents their strategy, and sets out the direction of travel and priority activities. Ideally, this strategy should have the achievement and maintenance of quality and standards as clearly expressed priorities.

This could be articulated in different ways - the strategy may set out an enhancement-led approach to quality, or it could state that a separate quality assurance strategy should be developed. However it is articulated, a provider should aim to ensure that all quality instruments - including policy frameworks, activities, governance structures, and processes - are part of an integrated system that supports effective delivery of the provider's strategic intent and reflects on ongoing effectiveness and impact.

Developing a strategic approach

A strategic approach is a whole institution (including any provision delivered with and/or through partners) approach to the management of academic standards and the quality of the student experience. The owners of the strategy will differ between providers, but typically a central services team responsible for quality will develop the strategic approach and bring it through the providers' approval systems. The head of this team will lead its development and contributors may include the Pro-Vice Chancellor for Education or equivalent, heads of teams that collect and analyse data, corporate governance, and senior colleagues from academic departments. Typically, the strategy will require formal approval by the providers' governors.

Aims and key features of a strategic approach

A strategic approach should aim to:

1. ensure that the institution has a clear view of the breadth of their provision and performance across it, is aware of its strengths, what activities are producing positive outcomes, and seeks to build on this to enhance provision
2. identify where challenges and opportunities exist, and when challenges do arise, enable effective action to be taken to address them
3. ensure that the structures in place overseeing all areas of quality and standards understand their roles, as well as the importance of engagement and challenge from all members representing their areas of expertise in order to avoid group-think – that is, the practice of thinking or making decisions as a group, resulting typically in unchallenged, poor-quality decision-making'
4. give confidence to the governing body (and any other groups that support it in its work) that the evidence received about academic quality and standards is complete, accurate and transparent in relation to the purposes for which it is used
5. ensure the quality assurance processes used under the strategy can be relied upon to inform future practice, and
6. identify areas where knowledge/information is inadequate, particularly in relation to risks to standards and quality.

Key features of effective strategic approaches to managing quality and standards include:

1. establishing systems to ensure academic quality and standards are maintained and relevant regulatory requirements are met, proportionate in relation to the size, nature (for example, monotechnic; multi-subject) and organisational and operational structure (for example, heavily centralised or distributed) of the provider
2. evidence gathering, analysis and action processes that are tailored to measure performance against the provider's strategic objectives
3. identification of risks that would adversely affect quality and standards, then consider the actions needed to avoid or manage those risks
4. establishing systems for collecting, and then making effective use of, consistent information (including key performance indicators (KPIs), module feedback, effectiveness of specific interventions, performance by protected characteristics), enabling the provider to make informed and credible judgements and decisions
5. ensuring the processes that capture the information are objective, reliable and broadly comparable with other providers in the sector, giving results that help meet the aims above
6. acting upon the information collated at the appropriate level in the provider, governance structures should enable the creation of action plans which clearly articulate ownership and also provide oversight of progress to be able to provide assurance to the governing body of proportionate, impactful and timely response.

Systematic mechanisms are employed that:

1. are clearly articulated in documents (for example, regulations, quality handbook, procedures, and/or a quality framework) which are approved through appropriate governance channels, are reviewed on a regular basis, extend to external partners and interaction with professional, statutory and regulatory bodies (PSRBs), and are accessible to all staff and students
2. are supported through staff induction and ongoing training that articulates, normalises and embeds the strategic approach within the culture, mindset and practices of the provider (see Key Practice b)
3. identify, celebrate, disseminate and support effective practice across the provider
4. ensure that where issues are identified, these are addressed in a timely and effective way, including when either individual and/or patterns of instances raises broader issues of policy or practice
5. encourage novel approaches to changing trends in education, both in general and in discipline-specific contexts
6. are capable of meeting external regulatory requirements, responding to changes, and give the provider assurance that they are being met.

The evidence collected in the maintenance of standards and quality assurance of the learning experience:

1. is valid
2. is proportionate to its purpose
3. is independently verifiable
4. could not be manipulated at source
5. aligns with agreed reporting mechanisms, and
6. meets legal data protection duties.

Examples of evidence that can be used to judge academic quality and standards include:

1. external examiner reports
2. student feedback via internal, programme and module surveys
3. student survey results, such as the National Student Survey (NSS), Postgraduate Taught Experience Survey (PTES) and Postgraduate Research Experience Survey (PRES)
4. student outcomes data (and other metrics as appropriate), compared against internal and external benchmarks/performance indicators
5. student appeals and complaints
6. reports from PSRBs and, where appropriate, awarding body partners
7. performance against relevant national regulatory and reporting requirements

8. the impact of any activities to ensure academic standards, such as training, learning and teaching initiatives, and calibration exercises
9. initiatives, innovation and good practice.

A strategic quality assurance approach's key outputs might include:

1. an annual report, reflecting on data, action and impact, supported by a range of both qualitative and quantitative data in appendices. The report, focusing on the quality and standards of the institution (including provision delivered by partners), is considered formally at relevant executive, managerial and governance levels within the organisation
2. systematic analysis of qualitative feedback, including student voice and free text comments
3. a real-time dashboard of key metrics that shows the movement in student outcomes, attainment and satisfaction, and the quality of provision and which can inform executive, management and governing body decisions.





Key Practice a

Provider responsibilities for
academic standards
and quality assurance

Key Practice a

Provider responsibilities for academic standards and quality assurance

Academic standards and the quality of the student learning experience are the responsibility of the provider. Degree-awarding bodies are aware that they have ultimate responsibility for the qualifications offered in their name.

All providers should be aware of their dual responsibility to the maintenance of academic standards and quality of the student learning experience.

Providers should ensure they meet their responsibilities for academic standards and quality through a systematic, strategic approach. The specifics will be informed by a range of factors (for example, provider's size, disciplinary mix, organisational structure and the specific national and international regulatory requirements to which they are subject). When entering into partnership arrangements, providers will consider how partner organisations' strategies, portfolios and values align with their own.

Degree-awarding bodies

Where degree-awarding bodies are working with other providers in partnership arrangements, their strategies should cover appropriate quality assurance processes to monitor the quality of the student learning experience and how academic standards are being maintained at providers delivering on their behalf. For more on this, see [Principle 8 Advice and Guidance - Operating partnerships with other organisations](#).

Providers without degree awarding powers

Providers without degree awarding powers should engage with the degree-awarding body to establish an agreed approach to the assurance of academic standards and quality of the student learning experience, which ensures that providers are able to meet their respective regulatory and contractual responsibilities.

Reflective questions

1. How does our governing body know that we have effective and strategic oversight for managing quality and standards that provides assurance to regulators, students and external stakeholders?
2. How robust is the information about quality and standards that we have at each level of the organisation? Are we adopting a risk-aware and evidence-based approach that is systematic and objective that enables us to take a deep dive into issues easily and swiftly?
3. How effective are we at using an evidence base to identify and mitigate risk, allocate resources to address threats to quality and standards and to identify and disseminate effective practice?
4. How can we provide assurance to the governing body, through data and reporting, that any salient risks to the quality and standards of the student learner experience (and related outcomes) are being identified and managed effectively?
5. How do we ensure that we avoid the dangers of 'group-think' in those of our committees that consider academic quality and standards?
6. How do we know that our oversight of academic standards and student experience is appropriate for our context and the environments in which we operate? This includes changes in student demographics, regulatory requirements and expectations, as well as pedagogic and technological changes, working with partners, and emerging opportunities.
7. What is the understanding of the roles and responsibilities within our institution in relation to academic standards and the quality of the student learning experience? How is this embedded and monitored and how are roles supported?
8. What are the reporting lines and mechanisms through our institution (and within partners, where relevant), from module, to programme level, to the governing body? Can they be clearly articulated, and how do we know they are effective?

Reflective questions to drive enhancement

1. How are we fostering a holistic quality enhancement culture?
2. Do people beyond those directly responsible for quality enhancement see it as everyone's responsibility? How do we know?
3. How do we regularly evaluate the impact of quality enhancement activities, particularly at institutional level?
4. How do we identify new opportunities and challenges and address them in an agile way, such as Generative AI?

Scenarios

A new non-executive director questions the information provided to Board

Context

The new NED asks the Academic Registrar about the information the Board receives that helps them fulfil their quality assurance responsibilities.

The Academic Registrar explains that a range of information is systematically collated to provide oversight to the Board of how they are performing in relation to the quality of provision, the programmes they run, the student experience and of the standards of those programmes. The Registrar goes on to highlight that one of the key aims is to show that they are equivalent to other such programmes in the sector and map against external reference points such as the [Frameworks for Higher Education Qualifications](#) (FHEQ).

To ensure the reporting is proportionate and easily digestible, three main inputs are sent to Board:

- an annual report summarising all key sources and matters arising,
- an overarching action plan summarising departments' work to address issues previously identified,
- individual thematic reports going into more detail, such as the analysis of student feedback on their modules.

Sources for these reports include:

- external examiner (EE) reports,
- NSS results, student programme and module feedback,
- external feedback on course design,
- annual report of student appeals and
- complaints, a case summary from the relevant complaints ombudsman, professional body reports, and a report showing how their activities satisfy the regulatory requirements in force in the UK nation they operate in.

The Students' Union is involved in the development of reports, who subsequently give presentations as a direct, independent source of evidence. The reports explain the significance of the metrics and whether there are any issues for concern. The reports are presented live by the lead writer who answers questions and can go into greater depth.

Considerations

- How do our reporting procedures compare with this model?
- How would new matters arising outside of this cyclical process, such as a critical failure to comply with professional body standards, be dealt with?
- Could the reports be made more current, by using online dashboards that reflect real-time developments in metrics and KPIs, for instance?



Key Practice b

Embedding a strategic approach to
maintaining standards and quality
assurance

Key Practice b

Embedding a strategic approach to maintaining standards and quality assurance

The strategic approach is employed wherever and however provision is delivered and is embedded in the culture and practices of providers.

Key Practice b focuses on the delivery of provision with emphasis on the implementation of a strategic approach. This can be done through articulating, planning and embedding the approach across culture and practice within a provider and across any partnership arrangements, with student and stakeholder engagement a key component in its success.

Articulating the strategic approach

Articulating a strategic approach should begin in the fundamental strategic instruments and approaches that guide the provider as a whole. Most providers have purpose, mission, vision and values statements. While these have separate functions, they work together to position and define a provider at the highest level:

- A purpose statement explains the rationale for a provider's drive - its reason for existing.
- A mission statement defines a provider's stakeholders, its focus, core objectives and approach to achieving these.
- A vision statement defines where a provider aspires to go and a result of realising long-term strategic ambitions and institutional values. Vision statements should be aligned to the mission, by articulating external and internal drivers that motivate strategic ambitions.

The student at the centre

These strategic instruments should explicitly place students and their learning journey at the centre of all the provider's work. All strategic activities should cascade from these, especially the vision statement which sets the strategic ambitions for a specific period. These instruments focus institutional priorities and key activities, and they should also set a clear direction of travel in relation to quality and standards.

Defining the institutional plan

The vision is often translated into a separate institutional strategic plan which articulates the ambitions and strategic priorities that the provider seeks to achieve in relation to maintaining or enhancing quality and standards. All these documents form part of the strategic approach and provide a focal point that defines what a provider wants to achieve and how.

The purpose, mission and vision statements help establish the destination for the provider, while the strategic plan should set expectations for metrics to ensure delivery remains in line with their ambitions, objectives and responsibilities.

Strategic planning

Formulating an effective strategic plan is an important mechanism which can draw together key areas and assurance activities that build a robust decision-making process which is informed by data, monitoring and evaluation activities. A robust strategic planning process will require a provider to think forward and implement a level of monitoring appropriate for them.

The three key components to clarify through strategic planning are performance indicators, strategic processes, and objectives. These components will create a scaffold that supports:

- Progress: a cohesive scaffold of metrics and information which enable monitoring, evaluation and review of strategic delivery against quality and standards.
- Methodology: strategic processes which facilitate and support internal decision-making and prioritisation to ensure maintenance of quality and standards.
- Delivery: enables a provider to draw connections between student experience enhancement activities and measurable improvements in NSS/PTES/PRES outcomes, helping support a culture where everyone is actively encouraged to contribute to quality and standards.

Embedding a strategic, holistic approach

Many activities are put in place by providers to manage quality and standards. These components are defined by each provider to reflect their unique identity, organisational structure, operating environment and ambitions. They can be used across multiple levels of a provider, or used in different teams, departments, schools or faculties. They have been typically implemented over time in a piecemeal fashion.

However, a strategic approach to maintaining standards and quality assurance requires a whole-provider approach. It is not limited to particular academic or professional services. Culture and practice are developed and led by people at many levels within a provider, for example, the collective responsibility in undertaking evaluation activities.

Many activities which assure or maintain quality and standards of provision are not solely related to academic quality. Delivery of provision, learning experience, reviews, policy, practices, governance, enhancements and quality assurance are closely connected with a wide range of professional services and require processes which may often sit outside the academic remit. At the same time, some policies and processes will be operated by local departments, and their outcomes may not always be visible to those primarily responsible for quality and standards.

Student and stakeholder engagement

The embedding of culture and practice across a provider requires the engagement of multiple stakeholders to ensure its effectiveness. Cultural identity can only be fostered in partnership with students, staff, and relevant external stakeholders as appropriate to the provider - such as communities, industry - and not imposed upon them.

Within a provider, there needs to be full engagement from the student body which cannot be considered as a separate activity. If students do not feel included in the provider's approach to quality and standards then it will not embed properly.

Other stakeholders

Other stakeholder groups will be institution-dependent but could include PSRBs, professions,

civic groups/individuals, local organisations (for example, local health boards, regional development agencies), local industries/employers and the wider public. Where a provider can demonstrate external impact, recognition and acknowledgement that they have a robust enhancement-led quality approach at their heart, that reputation will feed back through the institution and flow outwards to external partners.

As an example, a provider that evidences and embeds quality within its culture will be recognised and appreciated by external employers who will be keen to employ graduates in the knowledge that there is consistency in application of quality and standards and hence in the sustained quality of those graduates. See Key Practice d for more information about communicating the strategic approach.

Reflective questions

1. How do we clearly articulate our strategic approach to managing quality and standards? How do we know the strategic approach is well understood by key stakeholders at all levels across the institution?
2. How do we monitor the governance frameworks and systems that are in place to ensure the continued effectiveness of our approaches to managing quality and standards?
3. How does our governing body understand and articulate the provider's approach to managing quality and standards?
4. How do we ensure that governance systems are responsive to new/unexpected developments?
5. What level of confidence would we place on the institutional approach being embedded across all sites, all modes of delivery and any collaborative partners? If it is less than full confidence in any location/mode then explore further and rectify.
6. What would students say if asked how embedded the culture of quality is across their programme or department within the institution? What does it look like from their perspective? Do they consider themselves partners in developing these approaches and in embedding them in culture and practice?
7. If something went wrong (in relation to managing quality and standards) who would know first and what would they do? Is there a culture where concerns can be raised openly without fear of blame?

Reflective questions to drive enhancement

1. How do our approaches to embedding our quality and standards strategy encourage the sharing of good practice across the institution to foster enhancement?
2. How is enhancement ensured in your collaborative partner institutions?
3. Are staff empowered to talk about areas that could be improved, and lead on solutions?

Scenarios

A provider is approaching a quinquennial external enhancement-based review they are required to demonstrate that their strategic approach to managing quality and standards is embedded in the culture and practice of the institution and the approach is employed wherever and however it is delivered.

Context

A provider is required to demonstrate that their strategic approach to managing quality and standards is embedded in culture and practice, wherever and however their courses are delivered. The provider is peer-reviewed by an external agency, and is required to submit a self-assessment document with a separate or a combined response from the student representative body (SRB) ahead of a visit. Over a four-day period a peer review panel will meet with the Vice-Chancellor, senior team, staff and students.

Prior to the visit, the provider engages with the SRB and decides on a collaborative approach to the pre-submissions, intertwining the narrative from the provider with the student voice. The strategic approach to partnership working in relation to quality and standards is clearly embedded and articulated, which is recognised by the panel.

One area for development arose during preparations for the review. Students articulated differences in practices between schools and programmes, some of which that staff were unaware of. Through the review process the provider learnt that students are excellent monitors of variation in practice across an organisation as they speak to each other more than some academic or professional services staff do.

Considerations

- How can this provider demonstrate that there is an embedded culture of 'quality that is everyone's responsibility'?
- How might this provider address the variations in practices between schools and programmes that students identified?
- What further investigations may be required to establish if this variation affects the quality of provision and experience?



Key Practice c

Alignment of strategic approach to equity, equality, diversity, inclusion and environmental sustainability

Key Practice c

Alignment of strategic approach to equity, equality, diversity, inclusion and environmental sustainability

The strategic approach aligns with providers' policies and practices on equity, equality, diversity and inclusion, and environmental sustainability for students and staff.

Aligning quality assurance with work around equity, equality, diversity and inclusion (EEDI) and environmental sustainability helps to ensure that processes such as curriculum approval, enhancement, recruitment and retention also contribute to this work.

Providers should consider tailored strategic approaches to embed EEDI and environmental sustainability as a key enabler of maintaining standards and enhancing quality within sustainable learning and working environments. This can include:

- having a strategy committing to embedding EEDI and sustainability within the curriculum, learning experience and learner journey, and setting out a framework for how to achieve it
- regular policy reviews for compliance with relevant legislation wherever the provider or its partners operate, such as the Equality Act 2010 as it applies in each UK nation, and environmental standards such as the [UN Sustainable Development Goals \(SDGs\)](#)
- embedding and modelling diverse representation in leadership roles
- mentorship to empower all members of the collaborative partner's community to grow
- engaging students, staff and relevant external stakeholders via, for example, consultations and student partnership work
- training, coaching and creating a culture where feedback is encouraged and acted on using forums and various feedback channels
- dedicated roles and defined responsibilities for leading EEDI and sustainability at key points in management and staff structures, tailored to the size, and
- working towards greater accessibility and removing barriers to participation in higher education.

An everyday approach

Operationally, a strategic approach focuses on integrating EEDI and sustainability into everyday decision-making, creating an inclusive environment that champions both. Practices may be regularly reviewed at a strategic level to ensure they are dynamic and impactful. This can make EEDI and sustainability an intrinsic part of the provider's identity, woven into its DNA.

This helps create a culture where both staff and students actively role-model these principles across the institution, demonstrating and evidencing a commitment to meaningful and systemic

change. Different provider types, such as universities, colleges, and other training providers, will need to tailor their approaches to suit their organisational structures.

Defining and embedding EEDI and sustainability approaches

It is important to clearly define and articulate institutional vision and mission regarding EEDI, and environmental sustainability (see Key Practice b). This will serve as a guiding principle for all strategies and policies that flow from them and enable measurable objectives to be established that align with these core values to ensure accountability.

A further step would be to align other policies which may have an indirect influence on quality - such as Recruitment and Admissions, Staff Development and Continuous Professional Development, Partnerships, Procurement (where subcontracting is required), Student Evaluation - are aligned with their strategies and guidelines on EEDI and environmental sustainability.

Oversight

Providers typically have established committees, staff and student networks, working groups or steering groups which deal with these issues at a strategic level to ensure consistency, coordination and help avoid fragmented approaches. Policy approvals and communications can be checked for consistency in alignment with EEDI and environmental sustainability goals and strategic aims. All providers have a legal requirement to adhere to anti-discrimination legislation (primarily, but not limited to, the Equality Act 2010).

EEDI committees can help quality and course teams identify and address barriers early, and ensure that student feedback on inclusivity and environmental concerns feeds into ongoing quality improvements. To avoid fragmented approaches, committees can also establish and oversees working groups and networks, such as:

- Staff and student networks: spaces and opportunities to create a community which represents diverse views to ensure an inclusive culture which can make recommendations on key issues
- Curriculum enhancement group: ensures inclusive curriculum design, embedding diverse perspectives and empowering students to challenge systemic inequalities
- Sustainability steering group: aligns institutional operations, curriculum, and student engagement with environmental sustainability targets.

Implementation and promotion

Many student cohorts are themselves less than ideal in terms of their diversity - STEM subjects, for example. Providers will usually have initiatives in place to address this. Providers can also attempt, where possible, to ensure the diversity of its workforce reflects the diversity of its student body or the diversity it aspires to create. These aspirations could also be reflected in inclusive curriculum design and continuous enhancement, shaping curricula that reflect diverse perspectives and address systemic barriers to ensure all students fulfil their potential and feel a sense of belonging.

This means embracing diverse perspectives and viewpoints and ensuring sufficient diversity in learning, teaching and assessment approaches to meet the needs of the provider's academic, professional and student community. In addition, students should be able to access the curriculum and feel empowered to challenge systemic inequalities. However, the commitment to inclusivity and sustainability should transcend beyond formal learning, in the goals and behaviours modelled throughout the provider's strategic and day-to-day practice.

When implementing a new approach, providers can consider trialling new policies or tools, for example new data management systems and new assessment strategies, in particular programmes or areas before full roll-out.

Ongoing activity

Providers should consider a variety of processes that encourage active, ongoing collaboration across the organisation when shaping and improving quality and standards relating to EEDI and environmental sustainability. Analysing data to inform equality impact improvement, such as outcomes, attainment, retention and attendance can lead to rich discussions between staff and students via focus groups and discussion forums, exploring complex issues, encouraging deeper dialogue and context around feedback themes.

Inviting feedback

In addition to staff and students, it is important to consider employer and industry partner feedback, especially relevant for vocational and apprenticeship training, in ensuring EEDI and environmental sustainability is appropriately designed into the curriculum, assessment briefs and placement support, aligning to real-world expectations. This can be achieved through advisory boards, smaller meetings or surveys. Providers could consider mock inspections and/or external peer reviews to simulate regulatory/professional body or matrix-style inspections which can help benchmark against discipline and sector expectations.

Keeping skills up to date

Regular training and upskilling on EEDI and environmental sustainability ensures a collaborative approach while monitoring, ensuring transparency and progress toward EEDI and the UN SDGs, as well as future generations' agendas across the UK. Providers often integrate environmental sustainability into campus operations, such as energy-efficient buildings, waste reduction, and carbon-neutral strategies - see Principle 3 for more guidance on resourcing.

Embedding in the curriculum

Embedding sustainability into the curriculum raises awareness, responds to student expectations and fosters a culture of responsibility and cooperation, as students are deeply committed to EEDI and environmental sustainability. Partnerships with local and global organisations can encourage community engagement, improve the quality of the learning experience, and promote the ethos of global citizenship. Identifying appropriate partners to work with is especially important, specifically taking into account a potential partner's track record on EEDI and sustainability when deciding whether to enter into an agreement.

In embedding this practice, providers might want to consider the following operational processes that together give a strategic overview:

Table 1 - EEDI activities and ideas for practice

Activity	Ideas for practice
Developing an EDI and Sustainable Development Goals (SDG) student champions model	Empowering student and staff champions to advocate for environment SDGs and EEDI initiatives.
Establish sustainability working groups	Forming groups to drive sustainability initiatives and align efforts across the provider. Primarily staff groups, but inclusion of students will have real benefits.
Establish central and localised EEDI committees	Establishing committees to discuss and oversee matters relating to equity, equality, diversity, and inclusion.
Transparent processes to develop and revise policies	Ensuring institutional policies, procedures, and practices are scrutinised at a strategic level.
Buy-in and collaboration by managers and leaders at all levels within the provider	Gaining commitment from leadership to prioritise EEDI and sustainability.
Clear expectations and transparency in decision-making	Ensuring all decisions are made transparently, embedding EEDI and sustainability at the core.
Resources for additional support	Allocating resources to meet additional support needs for EEDI and sustainability goals. See Principle 3.
Training for curriculum designers and approvers	Those involved in curriculum design and approval receive training around embedding inclusivity and sustainability in the curriculum.
Being visible in demonstrating commitment (actions, not words)	There is clear demonstrable visibility in engagement with initiatives to support inclusivity and sustainability, internally and externally, such as participation in events and activities and providing equitable resourcing.
Analysis of student outcomes and academic integrity	There is ongoing timely monitoring of key performance metrics against EEDI metrics to staff and student outcomes, to identify any disproportionate findings against particular groups of students in AI cases, and take action accordingly.
Implement equality impact assessments	For significant new policies, procedures and regulation, to identify unintended consequences for groups of students.
Achieving and maintaining external accreditation	For instance, Athena Swan Charter to support and transform gender equality.

Reflective questions

1. Do we have an institutional strategy that embeds our aspirations for EDI and sustainability with measurable outcomes?
2. Do our policies and practices for monitoring and evaluating quality and standards embed EDI principles?
3. Which of our processes enable us to measure and enable our progress regarding EDI and environmental sustainability?
4. How do we monitor if there is overrepresentation of certain groups in terms of student outcomes, academic misconduct or quality issues? Do we understand how to report concerns regarding this?
5. Have we reviewed our policies and guidelines to ensure they align with the relevant SDGs?
6. Is governance clear in articulating the roles of key stakeholders in progressing EDI and environmental sustainability and where the overarching responsibility lies?
7. What mechanisms have been implemented to ensure accountability at a strategic level to ensure compliance with anti-discrimination legislation (for example, the Equality Act 2010)?
8. Does the workforce reflect the diversity of the student body, taking into account various characteristics? What strategies can we employ to recruit, retain, and support staff from diverse backgrounds?
9. Are students equipped and able to challenge systemic inequalities, and is there a process for doing this?
10. How are EEDI and environmental sustainability strategically embedded and championed in the everyday practices and decision-making processes of our organisation?
11. How do we strategically identify and address the unique challenges faced by students from diverse and marginalised backgrounds, and to what extent are our current learning and teaching environments and support systems actively enabling their success or reinforcing existing barriers?

Reflective questions to drive enhancement

1. What level of understanding across our provider is there about the tangible outcomes we want to achieve in terms of EEDI? How can we assess progress effectively?

2. How do we challenge bias, stereotyping, and discriminatory behaviour across our organisation? What proactive measures can we take to identify and address issues of bias or exclusion in our organisation's culture? How are we monitoring this?
3. How do we currently address environmental sustainability, and where can it be improved?
4. What sustainable practices are already in place and what requires more attention, monitoring or resource?
5. Is sustainability integrated into our educational curriculum across disciplines?

Scenarios

A provider has set up a centralised EDI and Sustainability Committee to support consistency and uphold quality and standards.

Context

The committee brings together senior leaders, staff (both academic and professional services), and student reps to make sure policies and day-to-day practices reflect the provider's commitments to equality, diversity, inclusion and sustainability. For example, the committee reviews course and assessment approval processes to ensure they consider accessibility and inclusive design.

It also works with quality teams to embed EDI, environmental impact assessments (EIAs), and sustainability checks into policy development, periodic review and validation templates.

Policies are reviewed and approved by the committee to ensure alignment with EDI principles and anti-discrimination laws under the Equality Act 2010. The committee also promotes recruitment initiatives to facilitate and support building a diverse workforce that reflects the diversity of the student body, helping to ensure an inclusive culture. They run student forums to provide opportunities to co-create solutions, helping to make sure all students feel a sense of belonging and can fulfil their potential.

Considerations

- What other functions might the committee oversee?
- How would the provider ensure this committee is effective?
- How would their outcomes be disseminated?



Key Practices

Communicating the strategic approach to maintaining academic standards and quality assurance and the supporting governance framework

Key Practice d

Communicating the strategic approach to maintaining academic standards and quality assurance and the supporting governance framework

The strategic approach to securing academic standards, quality assurance and enhancement is published, communicated clearly and accessible to staff, students and external stakeholders. It is supported by a comprehensive and transparent governance framework.

Providers should communicate their strategic approach within a clear and robust suite of regulations, policies and procedures which describes the mechanisms and processes by which they assure quality, secure academic standards and enhance the student learning experience.

Considering audience needs

When creating, revising and publishing these resources, providers should consider the diverse range of audiences that may have an interest in the quality and standards of its academic programmes and provision. This may include stakeholder groups such as applicants, current students, staff, employers, alumni and the general public. Through clear communication, the provider will ensure that these stakeholder groups understand and have confidence in the integrity of the qualifications they offer, especially if the communications are truly 'two-way'. This means that through direct communication channels, stakeholders can continually feed into the strategic approach, finessing where necessary and informing future iterations.

Providers can ensure that the strategic approach is not only accessible but also meaningful to each audience by tailoring the method and focus of communication to meet the needs of different groups. This might involve the creation of accessible summaries for different audiences, using visual aids, clear and concise language, and providing training and development opportunities to support understanding and engagement. Effective approaches to communication, and recognising the needs of each stakeholder group, are critical in ensuring that the strategic approach is understood by all relevant parties, including international audiences.

Establishing a governance framework to support the strategic approach

Providers should have in place a governance framework that is comprehensive and transparent. It should allow the strategic approach to education enhancement, quality and standards to be implemented across all types of academic provision, and enable key stakeholders to understand how relevant policies and practices have been applied consistently across this provision. Governance arrangements will also provide opportunities for stakeholders such as students, academic and professional staff, and external experts to contribute to the development, review, communication and application of regulations, policies and procedures.

Terms of reference

For each decision-making body, and at all levels, within the provider's governance structure, terms of reference should clearly outline the body's remit and responsibilities related to quality and standards, including any delegated responsibilities. The responsibilities of each board, committee or group should be sufficiently differentiated to ensure that conflicting decisions are not taken by different bodies and that there is reporting accountability to ensure appropriate institutional oversight.

Supporting engagement

The membership of academic boards and committees should have sufficient strength and depth of expertise to enable them to make informed decisions about the provider's approach to quality and standards. This will include representation from key stakeholder groups at each level of the governance structure. Appropriate induction and training should be provided for all members of boards and committees to support effective engagement and contributions.

How can effective governance support clear communication?

Responsibility for strategic oversight of the arrangements for quality and standards sits with a provider's governing body; therefore, at a high level, the governing body will be responsible for ensuring that the strategic approach is effectively communicated.

Responsibility for designing and implementing the specific mechanisms by which quality and standards are monitored, maintained and enhanced is likely to be delegated to academic boards and committees as outlined in governing documents, such as the provider's articles of association and scheme of delegation.

Decisions and actions taken by all deliberative bodies should be shared with stakeholders and interested parties as part of the strategic approach.

Tailoring communication to different stakeholder groups

Different stakeholders will require a more or less detailed understanding of regulations, policies and procedures and therefore the provider may take a differential approach to communicating these. The following table provides some illustrative examples of the different types of stakeholders and the information they may require:

Table 2 - Illustrative examples of the different stakeholders and their required levels of understanding/information relating to quality processes.

Stakeholder	Levels of information/understanding
Students	Need to be aware of the overarching role of quality and enhancement and the role of student feedback and related processes - information should appear within their programme or course handbooks.
Student Representatives	Need to understand their role and its relationship to key quality processes such as programme committees, course monitoring and external examiners and internal reviews - provide further information and support within induction materials.
Academic staff	Good knowledge of key policies and procedures for quality such as course validation, review and amendment, as well as regulations as primary engagement point with students - online and in-person training on processes and regulations is made available.
Programme leaders	Deeper understanding of the processes in place and how they contribute to the provider's confidence in its standards and quality - compulsory training, easily available reference materials.
Deans and heads of departments	Detailed knowledge of the systems in place and how they contribute to the provider's strategic aims - compulsory training, easily available reference materials.
Senior leaders and independent governors	Need to have confidence that the provider meets its regulatory requirements and arrangements support the provider's strategic goals - may receive briefings or reports setting out how the provider's quality assurance and enhancement arrangements enable it.
External stakeholders, for example placement providers or industry partners	May be given specific guidance or training as appropriate to their role in the learning, teaching and assessment process.

Stakeholder responsibilities

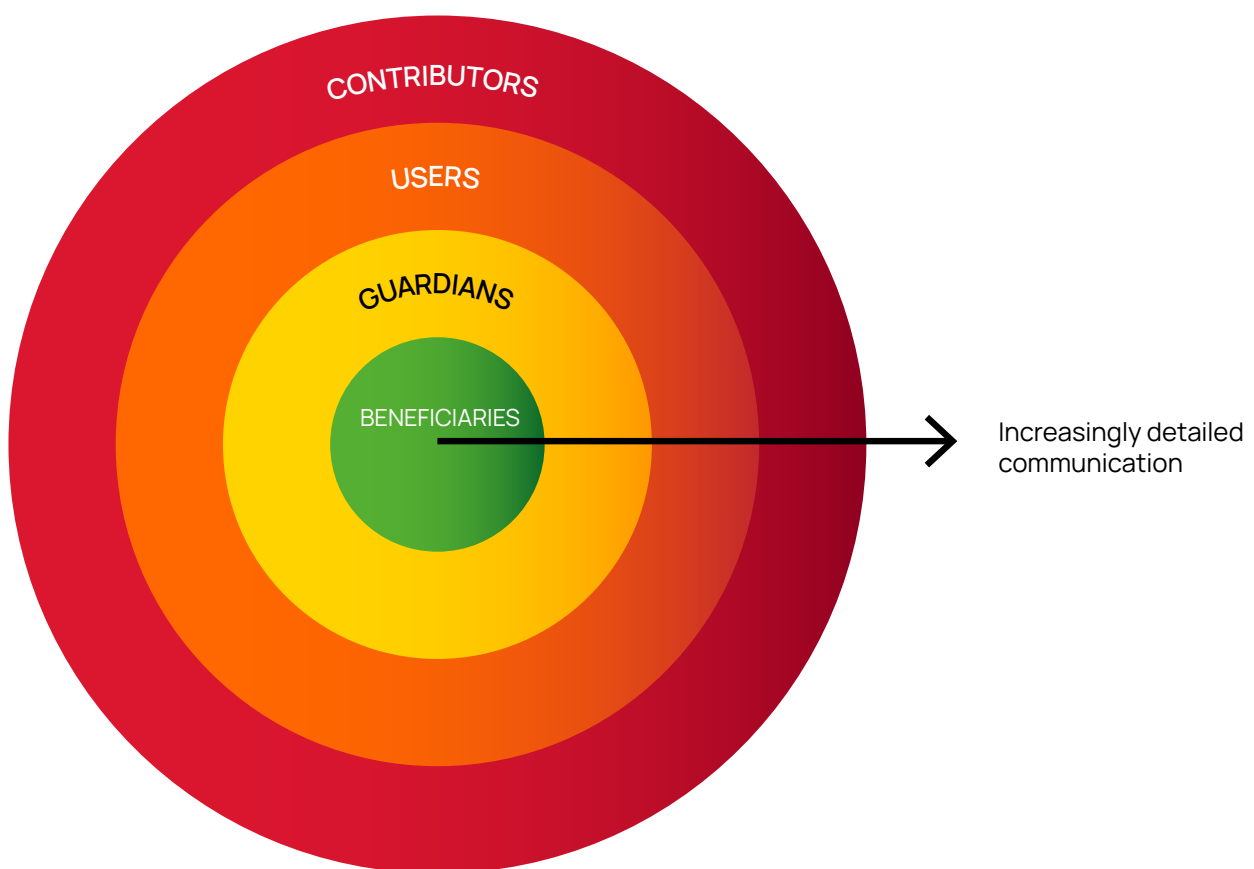
Staff, students and other stakeholders have a responsibility for ensuring that they are familiar with relevant regulations, policies and procedures. This responsibility is often outlined in terms and conditions, contracts, handbooks, agreements and other information underpinning the relationship of these stakeholders with the provider. Providers should consider these requirements or expectations before deciding how to effectively communicate this information through publications, guidance and training.

Level of detail

As a general principle, the communication of the strategic approach to managing quality and standards will focus less on technical detail and more on the overall purpose and key principles as the level of stakeholder engagement with the provider decreases. For example, an employer seeking reassurance about how a qualification is quality assured will normally require less detailed technical information than a member of academic staff involved in designing the course leading to that qualification, who will need to fully understand the processes for course approval.

Figure 1 - Types of stakeholders and approaches to communication

Key	Level of Engagement	Types of communication
QA staff, members of academic quality committees and student representatives	Very high	Policy documents, meetings, guidance, committee papers, training sessions
Students, academic staff supporting learning, teaching and assessment partner institutions and placement providers	High	Policy documents, handbooks, tailored guidance documents, training sessions, induction briefings, team meetings, newsletters/feeds
Governors/trustees, directors/evexecutive and external examiners	Moderate	Reports, briefings, presentations, committee sessions, Q&A
Graduates, employers and the public	Low	Overview documents/web pages, news items, strategic statements



[Download the presentation-friendly diagram here](#)

Categorising stakeholder groups

Figure 1 above categorises different stakeholder groups according to their broad relationship with a provider's quality framework. These groups cover a range of different role names that may be in place in different providers.

Those responsible for the design and implementation of this approach are referred to as contributors. Student representatives, staff and others directly involved in the learning experience form the users category. These groups may have expertise in quality and standards and therefore more technical language in communications will be appropriate.

Those who have high-level oversight of the strategic approach are shown as guardians, while those with a broader interest in the quality and standards of a provider's awards are beneficiaries. Individuals may simultaneously hold different roles that place them within multiple categories (for example, a student who is also a member of the governing body). The use of plain English will be especially important for groups that are less familiar with the provider's structure and day-to-day operations, and some terminology may require additional explanation to ensure clarity for wider audiences.

Providers should consider what information is made publicly available as standard and whether its publication scheme aligns with relevant codes of governance and pertinent legislation, for example, requirements within the Freedom of Information Act. In determining its approach to the publication of board and committee minutes and other documents to support transparent governance processes, the provider will consider whether there are any risks to its business operations or other considerations that require the removal or redaction of sensitive information.

Considerations for disseminating information about quality and standards

Regulations, policies and procedures

When new or revised regulations, policies and procedures are introduced, providers should have clear and effective approaches to communicating these changes to all stakeholders and provide appropriate support and guidance as required to ensure their effective implementation. This will be particularly important with committees and working groups reporting back to stakeholder groups. Providers can use one-way communications methods like news feeds or email reminders of key processes at certain times, but also two-way methods like briefing sessions, team meetings, and Q&A sessions - showing that you are listening to any issues (with new regulations, for instance) will help foster a healthy quality culture.

The governing body should have sufficient knowledge and understanding of academic governance to assure itself of the quality and standards of the provider's academic offer. Tailored training for independent governors with limited knowledge of UK higher education may contribute positively to the effectiveness of the governing body.

The way in which regulations, policies and procedures are developed, approved and disseminated should be tailored to suit each provider's size, shape and context. Depending on the information to be shared and the stakeholder groups targeted, elements of the strategic approach may be communicated through internal mechanisms, such as a quality handbook or intranet site, or they may have to be released publicly through a provider's website to comply with legislation or the guidance from the Competition and Markets Authority (CMA), for example. Ensuring a systematic approach to publication is essential in ensuring that all stakeholders are engaging with the most up-to-date information.

Each published document that forms part of a provider's quality framework should include the date it was approved and by which decision-making body. Regulations, policies and procedures should detail the processes through which they are enacted and outline where responsibility for their oversight rests, including arrangements for regular review to ensure that they continue to be effective in supporting the provider's strategic approach.

Training and development

Training and development are important in supporting understanding and engagement with the strategic approach to different audiences, for example support for academic staff taking on new roles and also for student representatives. Core information may be introduced and/or signposted through induction activities and expanded upon later in the academic year. Professional development sessions which focus on key aspects of the strategic approach through workshops, seminars, or webinars can be delivered to address specific areas of quality assurance, enhancement and governance for academic colleagues.

These could also be linked to key quality processes within the internal and external quality review cycle and frameworks such as annual monitoring, revalidation and periodic review to help contextualise engagements to key stakeholders. Sessions tailored towards the needs and interests of student representatives can secure their understanding and engagement with these areas, embracing the notion of working in partnership to improve academic standards and the quality of the learning experience.

Additional guidance and support may be needed to ensure all stakeholders, regardless of their backgrounds or experiences, can fully understand the provider's strategic approach. This may include students or staff who have limited experience of UK-based higher and/or tertiary education, those with diverse learning needs, or individuals who have limited recent experience with education settings. Additionally, opportunities for all stakeholder groups to ask questions of experienced staff will help to secure their understanding.

Staff and student induction

Regular induction processes for staff, students and other stakeholders ensures they are aware of key policies and procedures at the appropriate time in the academic session. Providers need mechanisms for identifying the needs of different stakeholders in their induction journey, and clear responsibilities for coordinating and facilitating inductions. Providers should be clear about the resources, training and guidance on offer and how this is communicated. They should take active steps to make stakeholders aware of where to seek advice should they require it and who to contact. Some level of monitoring and feedback will help to ensure that these induction processes are effective and can be enhanced as required.

Communicating arrangements for quality and standards in different contexts

An individual provider's context will influence both its strategic approach and its communication strategy. Small or specialist providers may, for example, rely more strongly on face-to-face methods of communication, whereas larger providers may favour the use of digital platforms, such as portals and apps, to distribute information to different stakeholder groups.

Providers without degree-awarding powers should ensure that their approach to quality assurance and enhancement fulfils the requirements of validating or awarding bodies and any partner institutions. Similarly, providers should ensure, where relevant, that quality processes fulfil requirements of sector agencies, regulators and PSRBs. Information about which regulatory, validating or accrediting bodies work with the provider and the nature of these partnerships should also be documented and communicated clearly to stakeholders.

Providers that operate in different international contexts may have to adapt their approach to quality and standards to meet the requirements of national regulators in the regions where they operate. Where this is the case, they should ensure that any specific exceptions to policies and regulations are based on a clear rationale, are well defined and understood, and do not place the academic standards or quality of the collaborative provision at risk.

The size and complexity of the governance framework may also vary across different types of provider. The provider should ensure that the extent of its quality and governance framework is proportionate to the size and shape of its HE provision and is sufficient to maintain oversight of quality and standards.

Reflective questions

1. Does our approach to managing quality and standards align with our provider's mission and strategic objectives?
2. Who is responsible for articulating, approving, and communicating the strategic approach to different stakeholder audiences?
3. Is our strategic approach articulated clearly in a way which is understood by a wide range of stakeholders, including staff, students, employers, external examiners and the general public?
4. Are our strategies, regulations, policies and procedures developed collaboratively with staff, students and external stakeholders?
5. Are all members of our academic boards and committees (including student members) engaged and able to contribute to discussions about quality and standards?

Reflective questions to drive enhancement

1. Does our strategic approach promote the enhancement of quality and standards beyond baseline measures, taking account of good practice in the wider HE landscape?
2. How are staff inducted and supported in relation to our quality assurance and enhancement arrangements in a way that is relevant to their role?
3. How are student representatives inducted and trained to engage effectively with quality assurance and enhancement arrangements?
4. How do we continue to raise awareness and understanding, and support use of regulations, policies and processes by staff, students and external stakeholders, and what processes do we have in place to monitor this?
5. Are there opportunities for regular two-way communication with students, staff and other stakeholders that might inform the future development of our strategic approach?

Scenarios

A provider reviews its implementation of a new policy

Context

Twelve months ago, a provider completed a redevelopment of its assessment and feedback policy, that resulted in amendments to key processes and regulations. These updated processes and regulations have been live for the past three months. At a recent departmental review, it became clear that some programmes are not following the new policy and regulations, leading to different practices across programmes.

The Quality Team launches a review of the implementation of the new regulations and supporting policies. The review begins by convening a working group that draws together representatives from each of the three faculties that academic departments are arranged into. This working group then talks to department leaders and academics at a series of consultative roundtables to gather information about who is using the old regulations and policies and more importantly why.

The Quality Team understand that the framing of this review is important and centres on consultation and gathering information, rather than an 'investigation'. This is to mitigate a perception of 'the centre' seeking to impose ways of working on local departments and teams.

Through frank and open discussion, it emerges that one department cannot fully use the revised assessment policy as it conflicts with the requirements set by the PSRB that accredits one of their courses. Due to the highly autonomous nature of departments, they sought their own solutions rather than engaging with the project team that changed the regulations a year ago. The project team had assumed that as they had consulted with faculty leaders, all departments were content with the new policies and regulations and were implementing them without issue.

Considerations

- What would you do in this situation?
- What are the risks associated with this scenario and how might you mitigate them?
- Who needs to be aware of this issue and who is responsible for resolving it?
- How would you ensure that identified actions are monitored and evaluated?



Key Practice e

Monitoring and evaluating the
strategic approach

Key Practice e

Monitoring and evaluating the strategic approach

The strategic approach is monitored and evaluated on a regular basis.

The strategic approach taken by providers to securing academic standards and enhancing quality should be regularly monitored to ensure it is being implemented successfully and embedded across the institution. It can also be evaluated on a periodic basis to ensure that it continues to make a positive impact against its aims, which are determined by each provider and/or reflect the requirements of any regulator/funding body.

This process is distinct from the regular or risk-based monitoring and review processes of the provision (see Principle 5 - Monitoring, evaluating and enhancing provision) but there may be scope to include the review of strategy into any larger monitoring and evaluation systems.

The following points might be considered when a provider undertakes this type of monitoring and evaluation:

- any review systems adopted are proportionate to the aim - evaluating the impact of a strategic quality assurance approach - are not burdensome, and are dynamic, fluid, agile and responsive
- deliberate steps are taken to engage and involve students, staff and external expertise in the process. The outcomes and impact of these activities are considered at provider level to drive evaluation and enhancement across the organisation
- relevant qualitative and quantitative data is collated and analysed. This data may look at both the quality of the student experience and the quality of outcomes. See *Principle 4 – Using data to inform and evaluate quality*.
- a similar review is carried out where an provider's strategic approach is also applied to elements of their activities that are subcontracted to or carried out by other partners or organisations. See *Principle 8 - Operating partnerships with other organisations*.
- checking whether the strategic approach reflects the institutional vision and mission and the relationship between research and education to support learning and teaching. See *Principle 11 - Teaching, learning and assessment, Key Practice a*.

Timescales

Evaluation enables a longer-term, retrospective assessment of the outcomes of the strategic approach, which might be conducted internally and/or by external independent evaluators. Evaluation may be carried out periodically as part of a quality cycle or may be initiated in response to factors identified through regular monitoring. The intended impact of any action taken should be monitored and evaluated so that success can be measured, and any interventions adjusted as necessary.

Expected outcomes

By undertaking critical, evidence-based self-evaluation, providers can be confident that they are achieving their aims, driving enhancement, better able to identify and implement appropriate action, and more effective in delivering what students and other stakeholders expect and require, wherever their provision is delivered.

Principles for monitoring and evaluation within your own context

Monitoring and evaluating the strategic approach to quality and standards should reflect the provider's mission and the educational outcomes it sets for its students. In a diverse and dynamic higher education sector, it is important that providers develop and agree principles and processes for monitoring and evaluation that are appropriate for their own context.

Agreed principles for monitoring and evaluation should take account of the organisational structure and size, and type of provision so that processes can be implemented effectively and achieve the desired aims. Relevant factors you might wish to consider include:

- scale of provision (staff and student numbers)
- student characteristics and demographics
- breadth of provision (single/specialist or multi-subject provision)
- location(s) and modes of provision (single site, multi-site, online)
- relevant and proportionate data sources (such as use of virtual learning environments / digital infrastructure, attendance, student characteristics information, and so on)
- levels of provision (pre-first degree, first degree, postgraduate taught and postgraduate research.
- regulatory and accreditation requirements from PSRBs. In these cases, consideration should be given to the interface between the provider's requirements and those of the other bodies, to ensure that these are closely aligned and that either conflict or unnecessary duplication is avoided.

Provision delivered under collaborative partnership arrangements should also be accounted for in monitoring and evaluation activities - see Principle 8.

Reflective questions

1. What does our strategic approach to quality and standards aim to do? How do we know that we have met these aims? Where does accountability sit within our governance structures?
2. How will we monitor and evaluate our strategic approach to ensure that it meets the changing requirements of the regulatory landscape?
3. How are we addressing the regulatory requirements or guidance of our own UK nation (or nations if we offer provision across more than one part of the UK)?
4. Can we demonstrate which sector guidance or reference points we have taken into account in developing our approach (for example, the UK Quality Code or the European Standards and Guidelines)?
5. Does our method of monitoring and evaluating our strategic approach take account of the context of our institution - its strategy and mission, the characteristics of our student body, and the types of provision delivered (partnerships, apprenticeships, accredited courses, and so on)?
6. How would changes to the context of our institution impact how we would monitor and evaluate our strategic approach. Do we have a schedule for review - is it flexible enough to respond to changes quickly?
7. What are the aims of our approach to monitoring and evaluation, and are they being met by the systems we have in place?
8. Does our approach and the measurement of impact account for internally available data (providing a better reflection of 'real time' activity) versus data from external agencies and/or regulators, for example the Office for Students or funding councils?

Reflective questions to drive enhancement

1. How will we measure and articulate the improvements to our provision as a result of actions prompted by monitoring or evaluation?
2. How can our monitoring and evaluation systems be improved, to better identify good practice and share it throughout our institution?

Scenarios

A provider has in place arrangements to monitor their strategic approach to securing academic standards and assuring and enhancing quality.

Context

The provider has implemented a systematic approach to monitor academic performance through internal audits, quality reviews, and external accreditations. Periodic evaluation of the approach itself is also embedded and takes place directly after each complete review cycle.

Senior leadership and governance structures have ultimate responsibility for the strategic approach. Outcomes from quality assurance activities are reported at an appropriate level into relevant committees and boards across the provider.

Data on student outcomes, feedback, student voice and performance metrics is regularly collected, analysed and used to inform quality improvements identified through monitoring. Students and external stakeholders (for example employers) actively contribute to monitoring and assurance processes, ensuring relevance and rigour. They have outputs from PSRB accreditations built-in to their data collection process.

Considerations

- How does this approach ensure an integrated, coherent and dynamic system of ongoing monitoring? How could it be enhanced?
- What metrics can be used to identify areas of risk and demonstrate the success and impact of their quality initiatives?
- If areas of risk are identified through this approach, who needs to be informed and how might mitigations be monitored and evaluated?



Key Practice f

Utilising external expertise

Key Practice f

Utilising external expertise

External expertise is a key element of the strategic approach to managing quality and standards.

Providers are advised to strategically embed the use of external expertise in relevant assurance and enhancement activities. External expertise gives an independent view of academic standards and alignment with broader practices, sector frameworks and reference points. External expertise helps give assurance with regards to academic quality, the relevance of qualifications to employers and supports providers to enhance practice.

'External expertise' is a deliberately broad term to allow for different types of experts helping providers in different ways. Such experts may include:

- board members
- external examiners
- committee members
- external advisers
- review panel members
- guest speakers
- alumni
- independent assessors
- employer advisers
- industry experts
- accrediting bodies.

Providers ensure that the following are considered when designing external expertise into strategic approaches to managing quality and standards, as depicted in Figure 2.

- **Define purpose, roles and responsibilities**

The roles of those providing external expertise are made clear to students, staff and other stakeholders. Providers consider the range of formal roles that require external expertise and input strategically across a provider (see above/below for a range of examples). External experts are clear on their roles and where to go for information/support.

- **Recruit for expertise and experience**

Providers should make use of a range of external experts appropriate to the provision that is being developed or that is under review. These experts should have the relevant knowledge and experience and be independent and impartial.

- **Appoint**

Providers will have transparent processes for the nomination, approval and engagement of external experts.

- **Train and support**

External experts will need to be supported by the provider to fully understand and appropriately fulfil the role that they are asked to undertake. This may include a range of training and guidance and this may vary depending on previous experience. External experts will need access to a range of evidence to enable them to fulfil their role; providers should be clear on what evidence will be provided and ensure that it is made available in a timely manner in line with the requirements of the experts' responsibilities.

- **Review and respond**

Providers will have effective processes and mechanisms in place to engage with and, where appropriate, appoint external experts to ensure that their input is considered and, where appropriate, actioned. A timely and reasoned response is made to the experts on actions taken or not taken as a consequence.

Figure 2 - The cycle of responsibilities that a provider works through when using external expertise



[Download the presentation-friendly diagram here](#)

Utilising external expertise

External expertise may be used in the following ways:

- programme design, development and approval
- delivery
- monitoring and evaluation, and
- governance and advisory level.

Programme design, development and approval

Programme design, development, approval and internal review processes benefit from the informal input of a range of external experts. This can include academic and professional services staff from other departments of the provider and from other providers. It may also include relevant expertise from employers, industry, community organisations, students and alumni. Providers may choose to specify the nature and extent of informal external expertise required in their processes of course development and design.

External advisers should have sufficient knowledge and experience to contribute effectively to the approval of a new course. In particular, the academic external adviser should be able to provide meaningful comment on the academic standards of the course and their alignment with national qualification frameworks, input which is included in the formal course approval record.

Experts from other departments within the provider are typically used for their familiarity with quality assurance processes, student support services, learning resources, student representatives and any other relevant aspects for the course and the student learning experience.

See *Principle 7 - Designing, developing, modifying and approving programmes*, *Key Practice e* for more advice.

Delivery

External expertise may also be used by providers in delivering teaching and learning, to support and deliver module and programme content and/or complimentary curriculum enrichment activities, act as guest speakers and workplace mentors, ensuring that providers are including relevant and up-to-date content and skills in curricula.

External examiners provide assurance to the provider and other stakeholders that the academic standards and quality achieved are in accordance with national qualification frameworks and requirements. External examiners can also provide impartial and independent confirmation that the processes of the provider have been followed and that the assessment and classification processes are fair, reliable and transparent.

For research degrees, external examiners are a fundamental part of the assessment of the award. They are appointed and engaged for their specialist knowledge; research degree-awarding bodies may have additional criteria to ensure they have relevant qualifications and experience. Please see the [doctoral degree characteristics statement](#) for more information.

Where appropriate, faculty-level, institutional-level or chief external examiners may act in a capacity which provides oversight and advice strategically, advising on judgements of course-level external examiners, trends, themes and overall student outcomes. Their role will involve

giving assurance of the robustness of assessment and external examining processes, and advising on overall areas of good practice and institutional attention.

Further advance and guidance on engaging and supporting external examiners can be found in the [External Examining Principles](#) on the QAA website.

Monitoring and evaluation

Degree-awarding bodies should undertake substantive evaluation of their whole provision. The manner in which this is done is up to the provider - it can be a large-scale review carried out on a periodic basis or ongoing monitoring using live information and risk analysis. Monitoring and evaluation will benefit from the input of independent and impartial external experts who can use their professional experience and knowledge to identify good practice and recommend enhancements.

These experts may include:

- employers, through employer advisory groups or organisations in the communities with which the provider works
- students' union officers, students studying in similar areas, or former students
- external experts involved in quality assurance processes, including expertise in working with partners for those involved in partner review
- students' union officers, students studying in similar areas, or former students
- external experts involved in quality assurance processes, including expertise in working with partners for those involved in partner review
- external subject experts (professional and/or academic), to provide impartial and independent advice during a review of all provision that leads to the award of credit or a qualification. Examples include:
 - academic staff with expertise in appropriate subjects
 - experts from relevant sector networks, such as those concerned with developments in pedagogy, quality assurance or technology-enhanced learning
 - representatives of PSRBs
 - employers
 - other QA/partnership experts.

Where degree-awarding bodies work with another provider, the periodic review may be combined with a review of the partnership as a whole. Degree-awarding bodies may also combine their periodic review of provision with the review of a professional body, if appropriate, or try to align the information requirements, as they can often overlap.

Further advance and guidance on engaging in periodic and partnership reviews can be found in *Principle 8 - Operating partnerships with other organisations*.

Partnership reviews take place where a provider works in partnership with other organisations. There should be effective arrangements in place to ensure that the standards of its awards are credible and secure irrespective of where or how courses are delivered or who delivers them.

In practice, this means that the external examiner role for provision in partnership with other organisations is consistent with the degree-awarding body's approved practices and, where

appropriate, consideration is given to comparison of cohorts across location and provider.

Governance and advisory level

Membership of governing bodies may include external experts, contracted to sit on governing bodies, for example Academic Council or Boards of Governors. Senior academics and industry representatives at this level can use their expertise to help providers plan strategically and monitor the overall performance of the provider, including academic quality and standards.

Membership of committees may include external experts, contracted to sit on institution-wide committees or advisory boards often known as Senate, Academic Boards, employers on Industrial and Career Advisory Boards, Learning and Teaching committees and Quality committees, and Partnership Review groups. Members of these committees provide expertise which goes beyond one subject area and advice and guidance is used across providers. These institution-level groups will often be reflected at faculty and/or departmental level where external input also features in the advisory and governance process.

Roles of external expertise across a provider

Table 3 below highlights the different levels of external expertise that may operate within a provider.

Table 3 - Roles of external expertise

Role	Description	Examples
Strategic governance level	Membership on governing bodies	Academic Council member; Board of Governors
Senior advisory level	Membership on institution-wide advisory boards	Senate; Academic Board; employers on Industrial and Career Advisory Boards; membership of Learning and Teaching committees and Quality committees; Chief External Examiners; Partnership reviews
College/ faculty level	Members providing external expertise across an area beyond individual subject areas	Periodic reviewers; PSRBs, membership and accrediting bodies; senior external examiners; membership of faculty governance committees
Department/ school level	Members providing external expertise across a subject area	Professional and industrial liaison; periodic reviewers; senior external examiners; guest speakers and visiting academics
Course level	Providing subject specific external expertise and advice on design, teaching, learning, assessment	Module, course/qualification/programme-level external examiners and advisers; guest speakers and visiting academics; periodic reviewers; PSRBs, membership and accrediting bodies; research external examiners
Assessment level		External examiners; apprenticeship independent assessors

Engaging with sector expertise	AdvanceHE; GuildHE; QAA; Association of Colleges; Society for Education and Training; United Nations Sustainable Development Group (UNSDGs); Universities UK, Universities Scotland, Universities Wales and other relevant mission groups
Engaging in sector accreditation, review, inspection and regulation	Ofsted; Office for Students; Medr; Skills England; QAA; SFC

Reflective questions

1. Do we have the relevant strategic approach to train, mentor and support external experts to carry out their role successfully?
2. Are there external experts who are members of governance committees? How is their contribution monitored and evaluated?
3. Do we use external advisers, external examiners and industry/skills experts to contribute to design, approval and review?
4. Do we use external expertise to help share good practice, drive enhancements, and to give assurance on academic quality to governing bodies, reflecting on relevant national requirements and frameworks?
5. Do our external experts comment on the consistency of quality, standards and achievements across different cohorts and delivery providers and locations to enable a provider-wide view of the consistency of standards?
6. What processes do we have in place to manage disagreements between external examiners and programme teams on matters of standards?

Reflective questions to drive enhancement

1. At a senior committee level, how are themes and recurring recommendations from external experts' reports considered to ensure that they are fully addressed?
2. How do we utilise external expertise to identify good practice and enhancement recommendations during review activities (including for any partnerships)?
3. What is our systematic approach to considering and sharing good practice and recommended enhancements identified by a range of external experts to inform practice and drive enhancement across a provider?

Scenarios

A new external examiner raises a concern with a Programme Team about marking standards in the programme that they moderate early in the academic year.

Context

The Programme Team does not entirely agree with the external examiner's perspective and is satisfied that its internal marking and moderation processes have already addressed any discrepancies with student marks. At the end of the academic year, the external examiner does not believe that the Programme Team has taken their concern seriously and that issues remain in relation to marking standards.

The external examiner raises this in their annual report to the provider and responds 'no' to a key checklist question about marking standards being comparable to marking standards at other providers. This is the only external examiner who has answered 'no' to this question in their annual report.

The Programme Team responds formally to the external examiner's annual report, again challenging the concern about marking standards. The relationship between the Programme Team and external examiner has now deteriorated to the point that the external examiner has informed the provider's Quality Assurance Office that they are considering early resignation one year into their appointment.

The external examiner's response in their annual report is highlighted in the provider's annual report to its internal committees and the governing body. The governing body is concerned about the response and asks how the Programme Team is addressing the external examiner's response.

The governing body states that it is unhappy with the approach of the Programme Team highlighting this is not an acceptable way for the provider to manage a key concern about academic standards. It sets an action for the Quality Assurance Team to facilitate a discussion between the external examiner and the Programme Team with the aim of ensuring that the external examiner's concern is addressed more thoroughly.

Considerations

- What happens next?
- What is the mechanism for ensuring the outcome of the discussion reaches the governing body?
- Where are the successes and failures in this scenario?
- How could the provider have resolved this matter before the governing body's intervention?
- Given this is a new external examiner - how might the Quality Assurance Team assure the governing body that the external examining system across the institution is providing appropriate challenge?

Terminology

Degree-awarding bodies

Organisations empowered to award higher education awards under relevant UK statutes.

Employers and other external stakeholders

Providers are encouraged (and sometimes there may be mandatory external requirement) to involve and engage with employers and other external stakeholders at all stages of course design, approval and review to ensure that their courses continue to be relevant and fit for purpose in line with employer needs. There may be specific groups with whom education providers are required to engage, for example, user groups for courses in, and related to, health and employers for apprenticeships.

Enhancement

The deliberate and systematic improvement in the quality of provision and the ways in which students' learning is supported, involving the active engagement of students and staff. Enhancement has different interpretations across the UK with some UK nations having an 'enhancement-led' regulatory framework.

Evaluation

The retrospective assessment of the provider's strategic approach, conducted internally and/or by external independent evaluators, on a periodic basis. Evaluation considers the outcomes of monitoring activity, plus other quantitative and qualitative data. It is undertaken to measure the impact of the approach on the provider's academic standards and quality and inform its revision for future cycles. Evaluation may also be initiated outside of the normal timeframe in response to factors identified through monitoring.

Evidence Based Approach

An evidence-based approach is characterised by the use of best available, objective and independent evidence to analysing the performance of policies, projects and programmes. The evidence should be gathered through predetermined processes that remain consistent over time and draw on a range of sources and stakeholders to give a multifaceted and triangulated overview that has face validity to an independent observer. The utilisation of such evidence avoids judgements being based on intuition and bias, avoids missing key indicators and mitigates poor decision-making.

External advisors

Used to provide academic and professional expertise. They can be called upon to provide academic, professional and industry/employer/business expertise to inform course design, development and validation.

External contributors

Used to provide academic and professional expertise by contributing to teaching or its development cycle at the provider or in a professional setting.

External examiners	External examiners are individuals who are not directly involved in any capacity with a provider (usually over a specified time period such as five years), and will have sufficient standing, credibility and breadth of experience within the discipline, including experience of relevant national frameworks. They provide impartial and independent advice, as well as informative comment on the degree-awarding body's standards and on student achievement in relation to those standards and to be able to command the respect of academic peers. External examiners confirm that the provider consistently and fairly implements their own policies and procedures to ensure the integrity and rigour of degree outcomes and assessment practices. They may also comment on the quality and standards of the courses in relation to the national standards and frameworks, where relevant including PSRB requirements, and comment on the reasonable comparability of standards achieved at other UK providers with whom the examiner has experience. External examiners also highlight good practice and make recommendations for enhancement. Institutional-level external examiners (sometimes called Chief External Examiners) may act in a capacity which provides oversight and advice at a strategic level, advising on judgements of external examiners, trends, themes and overall student outcomes.
External expertise	External experts are individuals who are not directly employed by a provider and who can provide independent and impartial contributions to academic assurance and enhancement in, for example, course design, management, monitoring, evaluation and review. External experts will provide a level of independence that is important in decision-making and ensuring that quality and standards are met.
External stakeholder	Stakeholders such as external advisers, external contributors, external examiners, guest speakers, visiting academics, and independent assessors providing expertise to institutions.
Governing body	The formal, controlling body that has responsibility for the management of a provider, often referred to as the Board of Governors/Trustees.
Governance framework	The rules, practices and structures that ensure effective oversight and management of a provider's operations, including academic, financial and strategic matters. These systems enable the governing body.
Guest speakers and visiting academics	Providers can promote a wider engagement with guest speakers and visiting academics to support and enhance the overall student learning experience. This type of external expertise can provide students and staff with first-hand experience in a specialist area and facilitate students' motivation. It can also help to promote opportunities for networking and improve community relations and connections between the higher education sector, industry and businesses.

Independent assessor (apprenticeships)	An independent assessor is an expert independent from the teaching and learning of apprentices who judges whether an apprentice has met the apprenticeship standard in the end point assessment.
Monitoring	The ongoing and routine collection and analysis of information relating to the provider's strategic approach to standards and quality, undertaken while those processes are ongoing. The focus is on the operation and implementation of processes, and how well they are embedded across the organisation. It is undertaken to inform decision-making, and to identify issues with processes to enable adjustments to be made as needed.
Professional, statutory and regulatory bodies (PSRBs)	PSRBs are a varied group of bodies, regulators and those with statutory authority over a profession or group of professionals. PSRBs may provide membership services and accredit or approve courses as confirmation that the courses meet their standards and expectations. PSRBs are recognised by employers; achievement of a PSRB-recognised course can be an essential requirement for entry to a particular role/occupation or to be professionally registered with them.
Providers	Any organisation involved in the provision of higher education to students and apprentices.
Quality	Refers to how well providers support students to consistently achieve positive outcomes in learning, personal development and career advancement, while meeting the reasonable expectations of those students, employers, government and society in general.
Quality assurance	The systematic monitoring and evaluation of learning and teaching, and the processes that support them, to make sure that the standards of academic awards meet the Expectations set out in the Quality Code, and that the quality of the student learning experience is being safeguarded and improved.
Quality framework	A coherent expression of the provider's expectations on quality, as well as a description of the systems they employ to assure their stakeholders that these are being met.
Risk-based approach	A risk-based approach (RBA) is a methodology that involves identifying, assessing, and understanding risks, and then taking appropriate action to mitigate them. An RBA approach helps ensure that limited financial and other resources are targeted at those issues that pose the greatest threat to the institution, whether that is in terms of quality of provision, regulatory, financial or reputational.
Standards/academic standards	These are the standards that degree-awarding bodies set and maintain for the award of academic credit or qualifications. Degree-awarding bodies are responsible for defining their own academic standards by setting the pass marks and determining the grading/marking schemes and any criteria for classification of qualifications that differentiate between levels of student achievement above and below the threshold academic standards. These individual standards align to national qualifications and credit frameworks and/or The Framework of Qualifications for the European Higher Education Area .

Strategic approach

A clearly articulated approach to managing quality and standards as part of a provider's education strategy, with comprehensive and effective governance and decision-making structures reaching up to governing bodies and including operational levels. Governance, and governance frameworks, refers in this context to processes and systems that define and govern institutional decision-making.

Students and alumni

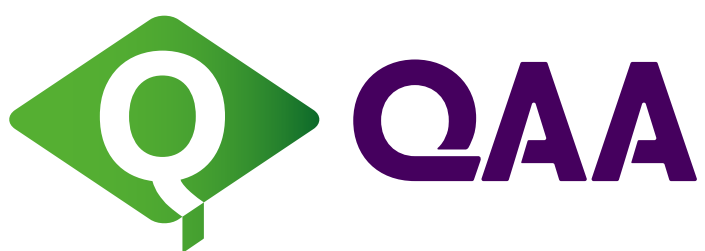
Students and alumni from similar, and different, courses can provide useful input to course development, evaluation and review. They can also be invited to meet with applicants and new students to share their experiences and manage expectations. (See Student Engagement Theme for information on how students can be engaged, as partners, in their courses and other quality activities).

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Published – 16 July 2025

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Registered charity numbers 1062746 and SC037786

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