



# **College of St Mark and St John**

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MAY 2003

## Preface

The Quality Assurance Agency for Higher Education (the Agency) exists to safeguard the public interest in sound standards of higher education (HE) qualifications and to encourage continuous improvement in the management of the quality of HE. To do this the Agency carries out reviews of individual HE institutions (universities and colleges of HE). In England and Northern Ireland this process is known as institutional audit. The Agency operates similar but separate processes in Scotland and Wales.

## The purpose of institutional audit

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

- providing HE, awards and qualifications of an acceptable quality and an appropriate academic standard; and
- exercising their legal powers to award degrees in a proper manner.

## Judgements

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

- the **confidence** that can reasonably be placed in the soundness of the institution's present and likely future management of the quality of its programmes and the academic standards of its awards;
- the **reliance** that can reasonably be placed on the accuracy, integrity, completeness and frankness of the information that the institution publishes, and about the quality of its programmes and the standards of its awards.

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

## Nationally agreed standards

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

- *The framework for higher education qualifications in England, Wales and Northern Ireland (FHEQ)*, which include descriptions of different HE qualifications;
- *The Code of practice for the assurance of academic quality and standards in higher education*;
- subject benchmark statements, which describe the characteristics of degrees in different subjects;
- guidelines for preparing programme specifications, which are descriptions of the what is on offer to students in individual programmes of study. They outline the intended knowledge, skills, understanding and attributes of a student completing that programme. They also give details of teaching and assessment methods and link the programme to the FHEQ.

## The audit process

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

The main elements of institutional audit are:

- a preliminary visit by the Agency to the institution nine months before the audit visit;
- a self-evaluation document submitted by the institution four months before the audit visit;
- a written submission by the student representative body, if they have chosen to do so, four months before the audit visit;
- a detailed briefing visit to the institution by the audit team five weeks before the audit visit;
- the audit visit, which lasts five days;
- the publication of a report on the audit team's judgements and findings 20 weeks after the audit visit.

## The evidence for the audit

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

- reviewing the institution's own internal procedures and documents, such as regulations, policy statements, codes of practice, recruitment publications and minutes of relevant meetings, as well as the self-evaluation document itself;
- reviewing the written submission from students;
- asking questions of relevant staff;
- talking to students about their experiences;
- exploring how the institution uses the academic infrastructure.

The audit team also gathers evidence by focusing on examples of the institution's internal quality assurance processes at work using 'audit trails'. These trails may focus on a particular programme or programmes offered at that institution, when they are known as a 'discipline audit trail'. In addition, the audit team may focus on a particular theme that runs throughout the institution's management of its standards and quality. This is known as a 'thematic enquiry'.

From 2004, institutions will be required to publish information about the quality and standards of their programmes and awards in a format recommended in document 02/15 *Information on quality and standards in higher education* published by the Higher Education Funding Council for England. The audit team reviews progress towards meeting this requirement.

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Institutional audit

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## Summary

### Introduction

A team of auditors from the Quality Assurance Agency for Higher Education (the Agency) visited the College of St Mark and St John (the College) from 12 to 16 May 2003 to carry out an institutional audit. The purpose of the audit was to provide public information on the quality of the opportunities available to students and on the academic standards of the awards for which the College has responsibility.

To arrive at its conclusions the audit team read a wide range of documents relating to the way in which the College manages the academic aspects of its provision. Members of the team also met staff and current students from throughout the College.

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

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

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

### Outcome of the audit

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

- broad confidence can be placed in the soundness of the College's current and likely future management of the quality of its academic programmes and the academic standards of the awards it makes on behalf of the University of Exeter (the University); and
- provided that the College takes timely action to remedy weaknesses in its collaborative provision, it will be possible for there to be broad confidence in that area for the future.

### Features of good practice

The audit team identified the following areas of good practice at the College:

- a distinctive and caring ethos which is an expression of the College's Christian mission and heritage;

- the approach to academic staff development under effective leadership from the Centre for Learning and Teaching;
- the committed and responsive comprehension and appreciation of staff of institutional quality assurance systems and of external developments in the professional area in applied sport science and coaching;
- innovation in the curricula in theology and philosophy, in particular in the MA Applied Theology (Ministry and Mission), the MA Health Care Ethics and in modules on Christian feminism and on theologies of liberation in the BA (Hons) Theology;
- the effective monitoring and development at local level of the central placement element in community and youth studies;
- the centrally-produced handbooks for students;
- support for students with disabilities;
- the arrangements for student induction; and
- the compendium of policy and guidance for staff produced by the Department of Physical Education and Sport Science.

### Recommendations for action

The College has been recommended to consider taking further action in a number of areas to ensure that the academic quality and standards of the awards it offers on behalf of the University are maintained. The audit team advises the College, without delay:

- to refine and extend the current thinking on the College's committee and management structures, with particular reference to the respective roles and responsibilities of the Academic Board, its subcommittees and the Senior Management Team; and
- in the light of the Draft Regulations for Academic Partnerships, to develop and implement a comprehensive taxonomy and rigorous associated procedures for the approval, validation and operation of collaborative arrangements with higher education institutions and other organisations in the UK and overseas.

The team also advises the College to:

- develop and apply a more strategic approach to quality and standards;
- revisit the internal programme of audit and review to achieve a more realistic and focused agenda for monitoring and enhancement activity; and

- re-examine some aspects of the validation process.

The team also found a number of matters where further action was desirable. These matters are:

- formalising and strengthening the approach to peer observation of teaching; and
- devising and implementing a policy on the employment of postgraduate research students as teaching assistants.

### **Applied sport science and coaching; theology and philosophy; community and youth studies**

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

### **National reference points**

To provide further evidence to support its findings, the audit team also investigated the use made by the College of the academic infrastructure which the Agency has developed on behalf of the whole of UK higher education. The academic infrastructure is a set of nationally agreed reference points that help to define both good practice and academic standards. The findings of the audit suggest that the College is making effective use of the *FHEQ*, subject benchmark statements and programme specifications (all elements of the academic infrastructure). The College has audited its practice against the *Code of practice for the assurance of academic quality and standards in higher education (Code of practice)*, published by the Agency; it does not yet fully meet the precepts of the sections of the *Code of practice* on collaborative provision and on placement learning.

From 2004, the audit process will include a check on the reliability of information about academic standards and quality published by institutions in a standard format. At the time of the audit, the College was making appropriate progress towards fulfilling its responsibilities in this area. The information it was publishing about the quality of its programmes and the standards of the awards it makes on behalf of the University was reliable.

# **Main report**

## **Main report**

1 This is a report of an audit of the academic standards and quality of programmes of the College of St Mark and St John (the College). The purpose of the audit was to provide public information on the quality of the opportunities available to students and on the academic standards of the awards that the College offers on behalf of the University of Exeter (the University) which formally awards the degrees.

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

3 The audit checked the effectiveness of the College's procedures for establishing and maintaining the standards of academic awards; for reviewing and enhancing the quality of the programmes of study leading to those awards; for publishing reliable information; and for the discharge of its responsibility for safeguarding the academic standards of awards. As part of the audit process, according to protocols agreed with HEFCE, SCOP and UUK, the audit included consideration of examples of institutional processes at work at the level of the programme through three discipline audit trails (DATs), together with examples of those processes operating at the level of the institution as a whole. The scope of the audit encompassed all the College's provision.

## **Section 1: Introduction: the College of St Mark and St John**

### **The institution and its mission**

4 The College originated in the merger, in 1923, of two nineteenth-century London institutions; the Colleges of St Mark and St John, Church of England foundations offering teacher training to men. Women were first admitted in 1967. In 1973 the College, which then had about 550 students, moved to purpose-built accommodation on its present 20-hectare site near Plymouth. Although the

College has diversified into a wide range of higher education (HE) provision, it retains an Anglican context and a commitment to teacher education.

5 From 1973 to 1991, the College offered programmes of study leading to awards of the University and of the Council for National Academic Awards. Latterly, the College has enjoyed steadily greater autonomy of operation, assuming incremental responsibility for the management of its courses. In 1991, it became an affiliated College of the University which was its sole validating agent and, in 1995, it achieved conditional accredited status, translated into full accreditation in 1997, marked by the signature of an accreditation agreement. The process of accreditation is one by which the University comes to recognise an external institution as able to assume, 'under prescribed conditions, full responsibility and authority for the academic approval and modification of [specified] programmes which lead to awards from the University and for quality assurance and the maintenance of academic standards. The institution has its own quality assurance mechanisms which are policed by the University'. Recognising the achievement of the Marjon Centre for Theology and Philosophy in the 1996 Research Assessment Exercise, the University granted the Centre full responsibility for the supervision of its research students. The College has the aspiration to achieve its own degree awarding powers.

6 In 1997, the College organised its 10 academic departments into a faculty structure, which was modified in 1999 to establish two faculties, Education, Sport and Technology (FEST) and Social Sciences and Humanities, and the Department of International Education which operates outside the faculty structure.

7 The College has accredited status for programmes leading to the awards of BA (single and combined honours), BSc, BEd, MA, PGCE, MPhil and PhD. All taught programmes are modular in structure. The College's portfolio includes the arts, humanities, sport, subjects allied to medicine and to health, speech and language therapy and social sciences, and was under review at the time of the audit. The College also provides core taught modules for the Peninsular Allied Health Collaboration. There is significant Continuing Professional Development (CPD) provision delivered at locations throughout neighbouring counties by the South West Initiative for Training which is a partner of the College, six local education authorities and the University of Plymouth. The College contributes to the delivery of sub-degree

courses in association with a number of other local organisations. In the 2001-02 returns, the College recorded a total student population of 4,193, of whom 2,474 were full-time and a third postgraduates. It is the College's ambition to increase its student numbers.

8 The Senior Management Team (SMT) consists of the Principal, a Senior Assistant Principal who is also the Director of Business and Administration, two Assistant Principals, each of whom also serves as a dean of faculty, the Academic Registrar and the Dean of the Department of International Education. One of the Assistant Principals (the Dean of FEST) is also responsible for learning and teaching, including the Centre for Learning and Teaching (CLT). The Academic Registrar runs the Academic Quality Office, chairs the Academic Audit Committee (AAC), is responsible for the administration of academic programmes (see below, paragraph 26) and is the main point of contact with the University. There have been recent significant changes of personnel in the SMT and further change is imminent: the present Academic Registrar took up his post in October 2002 and one of the Assistant Principals resigned in December 2002 and, at the time of the audit, had not been replaced. The Principal retires in July 2003 when his appointed successor will take office.

9 The College's Mission is:

- to help all its students to reach their full potential by providing intellectually challenging courses within a friendly active community and within a Christian context;
- the College is committed to enabling its students to become highly qualified, creative, constructively critical people, able to contribute to the improvement of the human condition; widening access to HE; achieving excellence in teaching, scholarship and research and in the experience offered to students;
- the College aims to be an open, friendly and active community, taking initiatives to meet changing social and economic needs, locally, nationally and internationally;
- the College, while respecting a diversity of beliefs, affirms its Christian origin, for example, by providing opportunities for service, worship and the serious study of Christianity.

### Collaborative provision

10 The College has a variety of collaborative arrangements, which include some 24 organisations delivering eight sets of awards, in addition to the major collaboration with the University. Twelve of

the registered partnerships, involving the award of Church College Certificates for which 178 students are currently registered, are not governed by formal agreements with either the Church of England and/or higher education institution (HEI) partners. Students from local authority and NHS employers take a range of the College's collaborative courses. Two of the arrangements involve off-site delivery overseas; for one of these the College is currently in the process of validating a collaborative BED programme in Malaysia to replace an earlier partnership there. The scope of the audit included the College's collaborative arrangements with HEIs and other organisations in the UK and overseas. Further comment on the nature and extent of the College's involvement in collaborative provision is provided below in paragraphs 112 to 117.

### Background information

11 The published information available for this audit included:

- the information on the College's web site;
- the report of a quality audit of the College by the Higher Education Quality Council (HEQC), published in September 1996;
- the reports of HEFCE and Agency reviews of provision at subject level.

12 The College provided the Agency with:

- an institutional self evaluation document (SED) and appendices;
- discipline self-evaluation documents (DSED) for the three areas selected for DATs;
- a Framework for Quality, the 2002 to 2003 edition of the Quality Assurance Handbook;
- the Strategic Plan 2001 to 2004;
- the 2001 to 2004 Strategic Plan Summary;
- the Agreement for the collaborative provision of academic programmes of study between the University and the College.

13 During the briefing and audit visits, the audit team was given ready access to the College's internal documents, both in hard copy and through the intranet, and to a range of documentation relating to the selected DATs; the latter included examples of student work.

### The audit process

14 Following a preliminary meeting at the College in October 2002, the Agency confirmed that three DATs would be conducted during the audit visit.

The Agency received the institutional SED and supporting documentation in January 2003 and the DSEDs in March 2003. The audit team's selection of DATs was Applied Sport Science and Coaching; Theology and Philosophy; Community and Youth Studies. Both the SED and the DSEDs were written specifically for the purposes of the audit.

15 The audit team visited the College on 8 and 9 April 2003 for the purpose of exploring, with the Principal, senior members of staff and student representatives, matters relating to the management of quality and standards raised by the SED and other documentation provided for the team. During this briefing visit, the team signalled a number of themes for the audit visit and developed a programme of meetings which was agreed with the College.

16 At the preliminary meeting for the audit, the students of the College were invited, through the Students' Union, to submit a separate document expressing views on the student experience at the College, and identifying any matters of concern or commendation with respect to the quality of programmes and the standard of awards. They were also invited to give their views on the level of representation afforded to them and on the extent to which those views were taken into account. In January 2003, the Students' Union submitted to the Agency a students' written submission (SWS), compiled by the Union from information gathered through the Students' Union Management Committee and the Students' Union Executive Committee. The Union indicated that the document had been shared with appropriate staff of the College and that there were no matters that would require the audit team to treat it with any level of confidentiality greater than that normally applying to the audit process. The team is grateful to the students for preparing this document to support the audit.

17 The audit visit took place from 12 to 16 May 2003 and included further meetings with staff and students of the College, both at institutional level and in relation to the selected DATs. The audit team was Professor J Bailey, Professor V J Gore, Professor N H Keeble, Dr R Tong, auditors, and Mr D C Attwood, audit secretary. The audit was coordinated for the Agency by Mrs S Patterson, Assistant Director, Reviews Group.

### **Developments since the previous academic quality audit**

18 The report of the HEQC audit in 1996 commended the 'seriousness and rigour' with which the College managed its quality assurance systems,

the 'robust principles' on which these were based, and the fact that they were 'well-understood and increasingly applied by staff'. The SED stated that the College had addressed the recommendations set out in the report, the chief of which were about formalising systems to secure academic standards, reviewing monitoring procedures, clarifying the roles of the assistant principals and ensuring that collaborative activities were properly founded and monitored.

19 Since that report, the College's organisational and committee structure has been substantially revised: the Quality Assurance and Teaching and Learning Committees have been replaced by the Academic Development and Quality Committee (ADQC) and AAC, with the responsibilities for development and quality enhancement and for academic standards clearly separated. The former 10 academic departments have been replaced by a two faculty structure (see above, paragraph 6).

20 In 2000, the College was audited by the University under the terms of the accreditation agreement. The resultant report was very positive, indicating that the University was 'content for the report to be used by the College as it wished' in respect of any future application for degree awarding powers for its taught programmes. It also stated that the College was a 'cohesive and self-critical academic community that demonstrates firm guardianship of its standards', noting that this was one of the criteria for institutions seeking degree awarding powers. The report also recommended closer monitoring of assessment by staff employed in overseas partner institutions. Among the College's responses to its recommendations was the establishment of a Students' Union Academic Forum, the inclusion in ADQC's remit of responsibility for compliance with external quality benchmarks, the addition of student representation on AAC, the production of a postgraduate handbook and the introduction of peer observation of teaching.

21 The College has been subject to eight Agency subject reviews since 1995. In each case, the quality of the provision was 'approved'. In the same period the Initial Teacher Training and CPD provision have received 27 and three inspections respectively. The BA (Hons) Community and Youth Studies was endorsed in June 2001 by the National Youth Agency and the BSc (Hons) Speech and Language Therapy (formerly Human Communication Studies) is accredited by the Royal College of Speech and Language Therapists. The Institute of Public Relations accredited Public Relations within the BA (Hons) programme for five years from September 1998.

22 The College is currently experiencing a period of transition as a consequence of two connected factors: first, the personnel changes in the SMT and, secondly, an extensive programme of internal reviews. The audit team noted that academic structures and the portfolio of subjects were simultaneously under review and that, therefore, future internal arrangements and educational provision might well differ from those examined by the team. Throughout the audit the team was alive to the challenge of this provisionality for the College and in this report it seeks to support the College in its process of reflection and continued development.

## **Section 2: The audit investigations: institutional processes**

### **The institution's view as expressed in the SED**

23 The SED explained that the College secured the academic standards of its awards through:

- a continuous process of internal audit overseen by AAC;
- accreditation by the University and the processes involved in compilation of the Annual College and Accreditation Report;
- annual monitoring and periodic review of courses;
- responsiveness to external examiners' reports;
- scrupulous assessment procedures.

24 It also ensured the quality of its programmes through:

- a rigorous process of programme approval;
- responsiveness to student feedback;
- student representation on relevant committees;
- action taken in response to external examiners' reports;
- the work of the CLT.

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

25 Responsibility for the educational character and mission of the College rests with the Council of Management, the governing body of the College. The Principal is the chief executive of the College, a member of the Council of Management and chair of the Academic Board.

26 The College affirmed in the SED that it had a framework for academic quality that was underpinned 'by principles of collective ownership and responsibility, peer review, clarity of procedures and strategic coherence'. The section of the SED dedicated to the Academic Board under 'institutional processes for the assurance of academic quality and standards', described it as having the 'supervision, maintenance and development of all quality assurance procedures' within its remit, but without explicit mention of any responsibility for academic standards. Elsewhere in the SED, it was stated that 'the Academic Registrar is responsible for the assurance, enhancement and management of quality and standards across the College's provision', but, in meetings with staff, the audit team heard that, subject to the overall responsibility of the Council of Management, the Principal, the SMT and the Academic Board were responsible for quality assurance and the maintenance of academic standards (see also below, paragraph 28).

27 The quality assurance remit is discharged directly through three standing committees of the Academic Board: the ADQC; the AAC; and the Research Committee, of which the two key committees for standards and quality are ADQC and AAC. Cross membership is deliberately restricted to the Academic Registrar and the Academic Quality Officer in order to maintain separation and hence ensure objectivity, a laudable aim. ADQC was described as being responsible for 'the operational implementation of the supervision, maintenance and development of quality procedures', while AAC had the task of 'assuring the rigour and effectiveness of the College's quality assurance procedures'. Both were thus described in terms of quality procedures, one to implement, one to monitor effectiveness. AAC carries out its allotted task through 'an annual, independent, objective quality audit' and part of the resultant report forms the basis of the Annual College and Accreditation Report to the University. The Committee also commissions internal audits on specific themes and issues.

28 The Academic Registrar acts as the main point of contact with the University and is the author of the comprehensive and detailed Annual College and Accreditation Report which effectively serves as the focal point of internal quality and standards monitoring. Staff whom the audit team met perceived that the SMT took quality matters very seriously, intervening quickly when necessary.

29 At the time of the audit, the College was reviewing its management and committee structures and had identified a need to examine the potential

for overlaps between the activities of ADQC and AAC. The audit team concurred that this was timely and potentially valuable. AAC has a programme of internal audits that it has found difficulty in fulfilling in line with the planned timetable and sequence, and the College recognises that this activity needs to be put on a more realistic footing. In addition, the ADQC terms of reference are broad, embracing both enhancement and assurance. The Committee will need to have the opportunity to develop the requisite strategic awareness and institutional overview appropriate to the ambition and maturity of the College if it is to fulfil effectively a 'guardian of standards' role on behalf of the Academic Board and the College in such significant areas as the overview of external examining arrangements, and the security of standards relating to external collaborative arrangements.

30 The audit team considered that a more fundamental review of committee and management structures than the College appeared to envisage would be necessary, extending to the role of the Academic Board and the appropriate balance to be struck between the deliberative and executive functions within the College's governance as a whole. The team therefore believes that it is advisable, without delay, to refine and extend the current thinking on the College's committee and management structures, with particular reference to the respective roles and responsibilities of the Academic Board, its subcommittees and the SMT.

31 In looking at arrangements for the quality and standards of collaborative provision, the audit team concluded that ADQC was not always in a position to discharge fully its responsibilities for the security of standards. More detail on the College's approach to its collaborative provision may be found at paragraphs 53 and 112 to 117.

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

32 In the SED, the College pointed to a Three-Year Quality Assurance Enhancement Plan covering the period 2003 to 2005 as the means by which it would further improve its provision. The plan embraced:

- a programme of internal audits;
- a programme of reviews conducted by the SMT;
- a review of the AAC;
- an extension of student involvement in quality processes;
- a review of information and documentation in the light of HEFCE's document, *Information on quality and standards in higher education* (HEFCE's document 02/15);
- a review of the management structure of the College;
- an academic portfolio review;
- a review of student services.

33 Although in themselves these actions have the potential to contribute to improvements in the College's educational culture, in practice, it appeared to the audit team that, strictly speaking, they did not constitute a coherent plan with strategic objectives but rather a summary of a number of current or planned activities. It was clear from meetings with College staff that the plan did not exist in the form of a single, discrete document. The team formed the view that the College, from the best of intentions, might be setting itself over-ambitious targets and in a format and timescale that might overstretch the resources at its disposal. The team noted, in this context, that the present series of internal audits was behind schedule. In the view of the team, there is a need for a more realistic, considered and phased approach to the development of the College's enhancement activities.

### **Internal approval, monitoring and review processes**

#### **Programme approval**

34 The College is an accredited College of the University and, under the terms of the accreditation agreement, has responsibility for assuring the quality of programmes leading to awards of the University. Procedures for programme approval, monitoring and review are set out in the College's quality assurance handbook, *A Framework for Quality*. A series of appendices in *A Framework for Quality* provide information on procedural and documentary requirements, including approval in detail; programme specifications; checklist of points for validation panels; templates for definitive documentation; and undergraduate and postgraduate module descriptors. Approval processes take due account of the *Code of practice for the assurance of academic quality and standards in higher education (Code of practice)*, published by the Agency, but reference to the sections on collaborative provision and postgraduate research programmes is limited.

35 Programme approval is a two-stage process consisting of approval in principle and approval in

detail. At the approval in principle stage the Principal, guided by the SMT, ensures that any new proposals conform with the College's Mission Statement and Strategic Plan, match local, regional or national needs, relate to current academic strengths and potential, allow opportunity for widening access and part-time study, and are financially viable.

36 Detailed approval involves scrutiny by an Internal Scrutiny Panel (ISP) and, subsequently, by a Validation Panel with external participation including, where an award of the University is under discussion, representation from the University. Approval panel membership is approved by ADQC. Submissions for approval in detail must include programme specifications and individual module descriptors. Approval of proposals is reported to the ADQC, the Academic Board and, where relevant, to the University. The normal period for approval is six years but the panel has the discretion to specify a shorter period on particular grounds.

37 Although reports of approval events are approved by ADQC, monitoring to ensure fulfilment of any conditions attached to the approval before the programmes began was not always apparent in the documents seen by the audit team. Some reports were not sufficiently detailed to support appraisal of the rigour of the process, lacking, for example, information about the status of the document, roles and positions of those present at the events, and dates. In some cases reports had been presented to ADQC after the programmes had started.

38 Minor changes to a validated programme can be approved by the Academic Registrar without a validation event, following scrutiny by the relevant Dean and the Director of Information Services.

39 The College claimed that the system of validation for new courses was appropriate and effective in practice, citing accreditation of new courses by professional bodies and the fact that some courses had only been validated subject to several conditions as supporting the claim for a robust validation and approval system.

#### **Annual monitoring**

40 The annual monitoring process is based in the faculties of the College. Faculty summative reports draw on programme/course reports, which take account of external examiners' reports, and are derived from subject and module reports. ADQC considers the faculty summative reports which are also reviewed by the Academic Registrar in his capacity as Head of Quality. Appropriate action plans are developed and implemented at subject

level and the SED stated that the 'action priorities' (summing up action required and prioritising future developments) fed into faculty strategy and that all outcomes were communicated to staff and students. The monitoring process culminates in the Annual College and Accreditation Report, submitted to the Academic Board and to the University, which provides an overview of operation of programmes at the College. The cycle is completed by a response from the College to points in the Annual College and Accreditation Report identified by the University for action or consideration. At the request of the University, the College provides an annual critical self-evaluation of the Annual College and Accreditation Report which has resulted in a reduction in paperwork and the production of a more concise and analytical report.

41 The College perceives the annual monitoring process to be extremely thorough and considers that it has developed a culture of critical reflection. The audit team formed the view that the system was capable of identifying issues impinging on the quality of its provision and ensuring that appropriate action was taken in response. The SED identified some duplication in process, attributable to the hierarchical system.

#### **Periodic review**

42 Periodic review is conducted by a panel convened by ADQC to consider a critical SED for the period of operation of the programme under review. Students are given the opportunity to contribute to the process. A Framework for Quality provides comprehensive guidance on requirements for periodic review documentation, including advice on presentation of contextual information, educational aims of the programmes, programme learning outcomes, curricular and assessment, teaching and learning, student admissions and progression, learning resources, maintenance of standards and quality assurance. The review panel makes recommendations to ADQC on revalidation of the programmes under consideration. The process follows the *Code of practice, Section 7: Programme approval, monitoring and review*.

43 The College perceived periodic review as a valuable aid to ensuring that courses maintain appropriate standards and the timetable for internal periodic review process had been aligned with the high number of external assessments to which the College is subject.

#### **Collaborative provision**

44 Current procedures for assuring the quality of programmes offered by distance-learning and for

other collaborative arrangements are the same as those applying to home provision. At the time of the audit, the College was working on Draft Regulations for Academic Partnerships which would establish processes specific to programmes offered in collaboration with other organisations. Current approaches to the arrangements and responsibilities for the quality assurance of collaborative provision, including the development, approval and ongoing monitoring of programmes, are not always adequate in the contexts of the *Code of practice* and the *Guidelines on the quality assurance of distance learning (the Guidelines)*, published by the Agency, and the current and prospective range of such provision, particularly overseas (see below, paragraph 112).

45 The College judges that its arrangements for assuring quality through periodic review, annual monitoring and continuous audit are generally satisfactory but acknowledges some duplication and ambiguity in responsibilities for action. The audit team shared the College's perception of the effectiveness of its arrangements for assuring the quality of its home provision. Procedures for assuring the quality of collaborative provision were less robust and would benefit from more clarity in the definition of roles, responsibilities and reporting structures.

### **External participation in internal review processes**

46 Peer review, involving external inputs, is one of the fundamental principles set out in A Framework for Quality where it was stated 'participants in peer review processes are drawn from within the College, from other HEIs and from the professions'. The Framework document usefully and explicitly recognises the value and role of persons familiar with the standard and content of similar programmes elsewhere in the sector, and who possess a knowledge of validation and/or, external professional bodies. The principle of peer review, involving external participation, is applied equally to the processes of periodic review and revalidation. Although, as noted by the audit team, neither the SED nor the Framework made this explicit, based on scrutiny of documentation available at the visit and meetings with staff, the team can confirm that the requirements for external participation are met in practice in all internal approval, validation and review processes.

47 Internal, or continuous, audit is another component of the quality systems in place at the College that display an appropriate element of externality. External participants are normally used (as

in, for example, the recent internal audit of external examining) and the Framework extends this to reciprocal audit activities that may be undertaken on a regional basis with other HEIs.

48 Subject teams appear to be appropriately engaged with the relevant external networks and to value external peer review inputs. At College level, as demonstrated in both principle and practice, there is a clear appreciation of the importance of externality. The University provides an important additional dimension through the terms of its accreditation arrangement with the College.

49 The commitment to external participation in internal review processes is, in the view of the audit team, sufficiently strong, in principle and practice, to support a judgement of broad confidence in the soundness of the College's current and future management of the quality of its programmes and the academic standards of its awards.

### **External examiners and their reports**

50 The College derives its approach to external examining arrangements from the University's Code of Good Practice on External Examiners. External examiners for programmes leading to awards of the University are appointed by the University, on the recommendation of the ADQC. Reports are received first by the University, then sent to the Principal, accompanied by a covering letter over the name of the Vice-Chancellor of the University, drawing attention to any issues of concern. The reports are distributed by the Academic Registrar to heads of subject, heads of programme (modular and teacher training), course leaders, the Director of the CLT, the Academic Quality Officer and, where relevant, to the Dean of the Department of International Education. Currently, any serious criticism from an external examiner is immediately reported to the SMT by the Academic Registrar; the audit team heard that in future all external examiner reports would be considered by the SMT.

51 Reports are considered at course and faculty level and reported upon through the annual course review process. Formal responses to external examiners, using the standard College External Examiner Report Response form are a requirement. An analysis and summary of external examiner reports are incorporated in the Annual College and Accreditation Report. The CLT produces, at a later date in the cycle, a summary of generic learning, teaching and assessment issues for ADQC, primarily for the purposes of enhancement and staff development.

52 The findings of a recent internal audit into external examining arrangements were positive overall and confirmed broad alignment with the University's Code and the *Code of practice, Section 4: External examining*. The audit team agreed with the report finding that 'it was difficult to identify which of the College's committees in practice had the key strategic role in managing and monitoring the external examiner system'. In terms of the relative responsibilities of ADQC and AAC, the report also identified a tendency for external examiner reports to get lost in 'the welter of business conducted at the College's ADQC', a matter that the chairs of the committees have been discussing on their own initiative. This is a point that may reinforce the argument that ADQC should, in general, adopt a more focused and strategic approach. It was not clear to the team how introducing the SMT into the already protracted loop of report circulation and responsibilities would necessarily help to speed or simplify the process. The report, still to be formally considered within the College, recommended greater simplicity and effectiveness, and explicitly linked the management and timeliness of responses to external examiners to the imminent review of the committee structure. The team concurred with the analysis that informed these valuable recommendations.

53 External examining arrangements for College collaborative partnerships overseas are the same as for its home provision. In one instance the audit team saw evidence that suggested that an external examiner for an award delivered off-site in Mexico was unclear, some several months after appointment, as to her exact responsibilities, tasks and the associated timetable; improved induction arrangements for external examiners, particularly for overseas partnerships, is a matter the College may wish to consider. Greater clarity in the definition of responsibility for, and internal scrutiny of, external examiner appointments, as recommended by the College's own recent internal audit, should be considered as part of the review of the committee structure.

54 The approach to external examining is judged by the College to be appropriate and effective, and the appointment of a General External Examiner, working college-wide, marks a useful enhancement of the system. The College consciously seeks to adhere to the *Code of practice, Section 4: External examining*. In terms of further improvements, the College is endeavouring to bring greater speed and efficiency to a process that is thorough but complex and elongated by the accreditation relationship. The audit team found that procedures generally worked as described and noted the acute analysis and

promising proposals for change emanating from the recent internal audit findings. Overall, the evidence available to the team indicated appropriate and scrupulous use of external examiners in summative assessment processes.

### External reference points

55 In the SED, the College referred to its engagement with the *Code of practice, The framework for higher education qualifications in England, Wales and Northern Ireland (FHEQ)*, and subject benchmark statements. The DATs undertaken by the audit team, which included discussions with students and staff, furnished further evidence of awareness of these external reference points and of action at the local level.

56 The *Code of practice* has clearly informed a number of developments at the College. The latter has used internal audit, under the auspices of the Academic Registrar and the AAC, as a prime instrument for the purpose of investigation and alignment. Four audits had been completed by the time of the visit: Academic Dishonesty; Extenuating Circumstances; Students with Disabilities; and most recently, External Examiners. These reports provided direct evidence of the value and seriousness which the College places upon meeting the precepts contained within the *Code of practice*. The audits were explicitly focused on establishing how and whether internal practice meets external expectation; they confirmed good practice and identified necessary action points. The inclusion of expert external participants, as in the case of the external examiner's audit, adds a further dimension of externality, rigour and assurance. In addition, the CLT plays a key role in disseminating good practice, responding to the Agency and other external imperatives as appropriate. The College stated that the CLT made a major contribution to moving College assessment policy forward in relation to level and grade descriptors.

57 The audit team noted two instances where the College appeared to be not in full alignment with the *Code of practice*: in relation to the sections on collaborative provision and on placement learning.

58 The perception of the College that its approach to collaborative provision was appropriate and met the precepts of the relevant section of the *Code of practice* was not entirely shared by the audit team. The belief appeared to the team to be based in part on a stipulative definition which would exclude award-bearing courses where these were delivered off-site and overseas as a service to clients by College staff. Yet the *Code of practice* states that

it is concerned 'with collaborative arrangements involving the provision of study and the granting of awards and qualifications'. The *Code of practice* also defines distance-learning as 'a wide range of learning activities' that involve 'some degree of physical separation of the student from the teacher', a point perhaps relevant to some courses currently offered by the College in Mexico.

59 In addition, in the view of the audit team, the College does not hold an appropriate register of collaborative arrangements, asserting that it is the responsibility of the University, as the awarding body, to maintain the register in respect of the College's collaborative arrangements. The team recognised the inevitable constraints as well as the benefits conferred by the accreditation agreement with the University. Nonetheless, the College's response seems to miss the potential utility to the institution itself of keeping such a register, particularly at a time when its UK and overseas collaborative arrangements may increase in complexity and possibly number (see below, paragraph 112).

60 The audit team learnt that the College did not have in place a policy document to ensure that it met the section of the *Code of practice* on placement learning, since originally all placements were part of teacher training programmes governed by DfES policy. It became clear in speaking to students, confirmed by discussions with staff at institutional and course level, that placement learning had been and was being introduced elsewhere in the academic portfolio. The College was confident that it had developed thorough and established procedures for placement learning, but in the light of this further development, the team welcomed the reassurance that such a document would be drawn up, taking account of the relevant section of the *Code of practice*.

61 In terms of assessment policies there was evidence of effective external referencing in the detailed information provided on the generic level descriptors that the College had based on Agency qualification descriptors. Similarly, the revised undergraduate regulations (also known as Modular Degrees: Regulations) were developed with explicit reference to the then National Qualifications Framework (now the *FHEQ*). The audit team was informed that programme specifications would be in place by the end of the academic year 2002-03 for all awards, following a comprehensive process of revalidation.

### **Programme-level review and accreditation by external agencies**

62 The College views external assessment as a necessary and valuable part of quality assurance and enhancement. In terms of teaching quality assessments and subject reviews, over the period 1995 to 2002, there were seven graded assessments, and all provision was approved. Two low grades were in different subject areas and different aspects, and were duly considered and acted upon by the College in each case. No adverse pattern is indicated therefore and the most recent sequence of four subject reviews has been uniformly very positive.

63 The College readily acknowledged that these reports had prompted innovation and stimulated college-wide developments; for example, level and grade descriptors were developed following the reviews of Public Relations and of Hospitality, Leisure, Recreation, Sport and Tourism. The College stated that Office for Standards in Education (Ofsted) inspections often produced similar benefits.

64 Professional accreditation is another form of external assessment which, in some instances, has been linked to innovative growth areas within the College academic portfolio, for example, speech and language therapy, where the BA (Hons) Communication Studies was placed in the 'good' performance band after a Major Review carried out by the NHS, in November 2001. Other accreditation outcomes have also been positive, such as those in the youth and community area (National Youth Agency).

65 The College appears therefore to respond in an appropriate and timely manner to external reports of all kinds, to take action and to achieve good results in external evaluations of its provision. As it reviews its committee and management structures, particularly the roles of, and relationship between, ADQC and AAC, the College may find it useful to consider whether the institutional overview of external reports could be further strengthened through a clearer division of labour between the two committees and a more explicit reference to professional, statutory or regulatory bodies in their respective terms of reference.

### **Student representation at operational and institutional level**

66 The College views student opinion as 'a valued component of the design and monitoring of academic programmes...'. Students are represented on all senior committees including the Council of Management, the Academic Board, ADQC and the

Appeals Committee and there are Staff/Student Liaison Committees (SSLC), chaired by members of staff, for all subjects. A Student Affairs Council (SAC), reporting to ADQC, was established in 2000 in response to a recommendation in the University audit report; a Representatives' Forum organised by the Students' Union (SURF) is to be disbanded in favour of the SAC.

67 The SWS acknowledged the high level of representation on college committees and indicated that students valued the channels of communication with the College and its support for the Students' Union. The SWS commented on what was sometimes a lengthy process for dealing with issues raised and suggested that a restructuring of committees to permit an increase in the depth and impact of student input would be welcomed. Students met by the audit team confirmed that the opportunities to provide feedback at course level were good and there was evidence of numerous instances of prompt and effective action in response to student feedback, particularly through the SSLCs.

68 The College was confident that it had developed an appropriate range of opportunities for students to express their views. However, it was '...disappointed in the flow of information...' and was concerned to improve student feedback from committees and questionnaires. It had therefore set up a working party of ADQC to consider changes which might be more effective in eliciting student opinion through the more formal mechanisms.

69 The audit team supported the College's view that there were numerous and appropriate opportunities for student representation at both the operational and the institutional level. It was clear that at the course level students use and value SSLCs. The team noted and endorsed the College's inquiry into improved institutional processes for student representation.

### **Feedback from students, graduates and employers**

70 The College relies upon two formal survey mechanisms for individual feedback from students: module evaluation forms, used on all courses and commented on in annual subject reports, and Student Satisfaction Questionnaires, administered by the Student Services Department and the Academic Quality Office, concerned with more general issues in relation to the student experience. Response and report routes for the surveys are specified in A Framework for Quality. The College views these surveys as one form of gauging student opinion to

be interpreted alongside the arrangements for student representation on College committees.

71 There are no formal mechanisms for seeking the views of College graduates; however, it was clear from discussion at the level of the discipline that a Professional Advisory Committee operating locally, with members drawn *inter alia* from employer groups, provided regular and well-informed advice on course operation as well as supporting the development of placements for courses in that area. There is no requirement set by the College on its faculties for the gathering of feedback from employers of the College's own graduates.

72 The overall student view, expressed both in the SWS and in the various meetings with the audit team, was that student opportunities for both feedback and representation worked well in general. An exception to this was the module evaluation form which was not considered to be a useful vehicle for feedback, in comparison with the SSLCs and informal contacts with staff. The approachability and availability of staff to deal with operational issues at the course level mitigated, in the students' view, the need for major reforms in more formal feedback mechanisms. Students met by the team appeared to have little knowledge or understanding of the Student Satisfaction Questionnaire.

73 The College held that it had '...an appropriate range of opportunities and mechanisms for student opinion to influence the academic life of the College...' and it believed that the module evaluation forms '...are used to good effect...'. It was, nonetheless, concerned about low levels of response on the Student Satisfaction Questionnaires and ADQC has the issue under consideration in a working party. The College expressed no view on the potential contribution of employer or graduate feedback to annual monitoring, or enhancement at the subject level.

74 It was clear, notwithstanding the students' misgivings, that module-level questionnaires were useful and effective in many cases. The audit team suggests that the College consider, in its current ADQC inquiry, alternatives to the Student Satisfaction Questionnaire which carries little importance for students, as evidenced in low, sometimes less than 20 per cent, survey response levels; a more directive approach to faculties on gauging employer views on its courses could be adopted, not least by using existing models from the faculties of professional or employer advisory groups, especially in the expanding number of course areas which use placement learning in their curricula.

### **Progression and completion statistics**

75 Aggregate statistics on student performance and progression at institutional level are derived from routine cohort analysis carried out in relation to subjects and programmes. The College stated that it was able to track a given cohort in terms of its year of entry and final degree qualification profile, incorporating failure and other reasons for withdrawal. The main usage of such statistics is on a yearly basis, at programme or course level. Retention and cohort progression statistics form the basis of reports produced by subject heads and programme leaders as part of the annual monitoring process.

76 At the time of the audit, the College was in the process of strengthening the provision of statistical data on student performance with a view to providing additional information to support the annual monitoring process. Ensuring reliable and equitable assessment of students is a key objective for the College and, although the existing systems are thought to be appropriate, the intention is to analyse possible variations in the reliability of different forms of assessment. The results will be shared with heads of programmes, heads of subject and external examiners, including the General External Examiner. Variations between levels of student achievement on different courses and in different subjects in terms of degree classification are a related matter that the College wishes to analyse and review.

77 The SED contained few examples of the use of statistical data or analysis in quality assurance and enhancement. Taken together with the evidence seen and heard by the audit team, this suggested that the College was correct in its view that there was now an opportunity and need to develop further its management information for the purpose of monitoring and evaluating the academic quality and standards of its educational provision. In so doing, it may wish to consider the best location and facilitation of an institutional overview capacity.

### **Assurance of the quality of teaching staff, appointment, appraisal and reward**

78 The College has a full Policy and Guidelines on the Recruitment and Selection of Staff which takes account of relevant legal obligations and the importance of due process. The policy anticipates a gender balance on appointing committees and is sensitive to equal opportunities issues: it cautions against inappropriate language and indirect discrimination. All members of appointing committees receive training in recruitment.

79 The Staff Induction Pack is an attractively presented and informative introduction to management and committee structures, faculties and centres, staff development, administration and other relevant issues. The College operates a probationary scheme of up to one year's duration for new staff. Each probationary member of staff has a mentor and probationary reports from the Dean are expected to identify development needs.

80 The College's Staff Development Policy, which aims 'to increase job satisfaction and support the career development of individual staff', stresses the 'major importance' of staff appraisal in realising this aim. The College runs a scheme of annual staff appraisal for academic and administrative staff: the audit team saw evidence that indicated that, for those at a more advanced stage in their careers, the College's annual appraisal (with line managers as appraisers) was especially effective in identifying staff development needs. Details of identified staff development needs are passed to the College's Staff Training Coordinator for action.

81 The College described itself as a 'teaching-led institution' but does not have any formal processes for identifying and rewarding excellence in teaching. The audit team recognises that for a number of reasons, not least funding levels, opportunities for promotion may arise infrequently, but there may nevertheless be scope for rewarding teaching excellence by other means.

82 The College makes extensive use of a relatively small number of part-time staff (some 200 of them) and, while the engagement in this capacity of research postgraduates as teaching assistants is encouraged informally, there is no formal policy governing their conditions of employment. The College may wish to consider devising and implementing a policy on the employment of postgraduate students as teaching assistants.

### **Assurance of the quality of teaching through staff support and development**

83 The College prides itself on its status as an Investor in People (with successful reassessments of its status in 2000 and 2002), on its Human Resources Strategy, on its Race Equality Policy and on the support it provides for the continuing development of its academic staff whom it regards as its 'most important asset'. This record is testimony to a commitment to good human resource management and to staff development. In the view of the audit team, the College's belief that it fosters an unusually supportive and developmental staff

culture is borne out by its ready responsiveness to staff development needs arising from probationary reports and annual appraisals and the provision of resources to support those identified requirements for staff development.

84 The CLT, established in 1999 in response to the Dearing Report, plays a key role in supporting teaching staff. This includes assistance with applications for membership of the Institute for Learning and Teaching in Higher Education (ILT) and meeting registration and membership fees. Over 90 staff are now ILT members, a high proportion of the College's establishment. In addition, the CLT runs the Staff and Educational Development Association (SEDA) programme for new staff. It is College policy that all staff should achieve a SEDA award and/or ILT membership by August 2005. The CLT holds monthly meetings with representative staff, issues monthly bulletins of staff development possibilities and provides an in-house rolling series of staff development events and issues Staff Guidance Leaflets on a range of topics. In the view of the audit team, this represents an impressive range of activities and the CLT's effective leadership of the College's academic staff development and enterprising contribution to the academic life of the College are particularly worthy of note.

85 Each faculty has a staff development budget, determined by the Faculty Management Team. Each faculty also has a Staff Development Coordinator who is, with the College's Staff Training Coordinator, a member of the Staff Development Subcommittee. The Subcommittee presents to ADQC an annual Staff Development Review which reports on progress against the annual Staff Training Plan, drawn up in the light of the College's other planning statements. The Training Plan for 2002-03 detailed both generic and targeted staff development needs, with specified objectives, planned numbers of participants, methods of delivery and budgets. The audit team was impressed by the coherence and comprehensiveness of this plan, and by the Staff Training Coordinator's detailed annual review of development and training.

86 The audit team concluded that the College had established good communication between academic staff and Personnel, the Staff Training Coordinator and the CLT and, as a result, it was able to respond in a very effective and timely way to staff development needs. Indeed, in its view, the College had a much richer culture of staff development than was evidenced in the SED. The team considered that the College might wish to consider whether engagement with external comparators might

provide a useful additional perspective for the further development of its human resource policy and strategies.

87 Teaching by new staff is routinely monitored. There is an expectation that the teaching of staff who have progressed beyond probation will be observed, but arrangements are owned and managed by the teaching staff. Acknowledging that peer observation was 'growing in importance' in the College, the SED also recognised that 'the informal nature of peer observation [had] caused concern that its potential value was not being fully realised'. The College might wish to consider formalising and strengthening the approach to peer observation of teaching to ensure that the College derives the maximum potential benefit from the scheme in supporting and developing its staff.

88 In the SED, the College judged that it had in place good arrangements for ensuring the quality of its staff and for providing opportunities for development. It pointed in particular to the appraisal scheme, the work of the CLT and the induction process for new staff. It noted that tension over staffing levels and workloads in some areas had yet to be resolved.

89 In the main, the audit team fully endorses the College's assessment of its provision for its staff in the areas of staff support and development. The SED underplayed the work of the CLT and the extent to which the College has in place systems which ensure a timely and effective response to the development needs of staff.

90 The SED claimed that research and scholarly activity were integral to the College's teaching: while this is manifest in the areas of theology and philosophy, it is less readily apparent in other areas of the College's provision. The audit team formed the view that a more overt connection between research and scholarly activity and course delivery was an aspiration to be encouraged for the enhancement of the College's approach to the development of its teaching staff.

### **Assurance of the quality of teaching delivered through distributed and distance methods**

91 The College formally records only its Church Colleges Certificate and the part-time MA in Theology (Church School Education or Religious Education) as distance-learning provision; BEd/MEd provision in Mexico is categorised as off-site delivery by College tutors, although it has some distance and on-line tutorial support elements. The Department of

International Education contributes to the quality assurance for all overseas provision including that with distance-learning elements and, in the case of Mexico, uses electronic support significantly. The largest off-site provision, the CPD contracts with the Teacher Training Agency, has been inspected by Ofsted. Quality assurance procedures for distributed and distance-learning are embedded in the standard College processes and there are no dedicated committees or groups concerned specifically with issues of distance and distributed learning, apart from the Department of International Education's role in reporting on quality-related issues in overseas provision. The SED made no mention of how the College addressed the *Guidelines* published by the Agency.

92 The College declared that '...it has developed a rigorous approach to international collaborative provision...' over the last decade and that it believed that the Department of International Education's oversight provided additional quality assurance arrangements for international provision which '...work well...'. No additional information or evaluation specific to distance learning was provided in the SED.

93 The audit team did not find the College's definitions of distributed and distance learning helpful in appraising the College's practice against the *Guidelines*, or in gauging the extent to which the College sees distance delivery as a significant issue for focused quality assurance scrutiny. The team read carefully the documentation provided on the provision in Mexico and noted appropriate College concern about the operation of the web site which is an important part of the distributed provision there. Some accessibility issues were clearly flagged in student feedback and responded to by the College. External examiner reports were, in general, given appropriate consideration and issues raised were addressed. Module evaluations from students in Mexico and the summative reports to ADQC from the Department of International Education, confirmed that, in many instances, procedures for evaluating quality and standards, common to the College's overall provision, operated effectively for overseas distance learning. More clarity in a common institution-wide approach to the definitions of distributed and distance learning and the establishment of associated policies and procedures, in line with the *Code of practice, Section 2: Collaborative provision* and the *Guidelines* would provide a framework for the College to address the provisions of the *Guidelines* across the apparently wide range of the College's distributed and distance-learning provision (see below, paragraphs 112 to 117).

## Learning support resources

94 The College has a central Learning Resources Centre that includes provision for open-access student computer use. Computer terminals are also provided in a variety of other locations and there has been a very recent increase in the number of new machines provided. There are plans to introduce a college-wide virtual learning environment and to establish email as the main channel of communication with students. Course-based library and information and communication technologies (ICT) development needs are managed through the Director of Information Services. A variety of formal user-group feedback mechanisms in the form of module questionnaires and student satisfaction surveys supplemented by informal processes, at all levels, for evaluating the quality of learning support, is a significant feature. The College expressed confidence in the effectiveness of its monitoring procedures and in its processes for the enhancement of quality in library stock and teaching facilities.

95 In the SWS, computer access, in terms of the number of machines, their open availability in practice and awareness of information technology (IT) support, was signalled as a significant problem. However, in meetings with the students, at both institutional and discipline level, it became clear that there had been substantial expansion in this area since the SWS and the SED were submitted and that a large number of new machines had recently been installed; this was seen by the students as an example of the College's responsiveness to student feedback.

96 Students met by the audit team confirmed that the inclusive ethos of the College reinforced by the availability and caring attitudes of all teaching and support staff, was a highly valued feature of the learning environment. This level of individual learning support helped ease any short-term difficulties with, for example, access to materials by part-time students and those on block placements.

97 The audit team welcomed the recent investment in new computers and the College's ambitions for extending ICT use for learning support. It was clear that access to course materials for students was generally satisfactory, although the procedures for guaranteeing the maintenance of the quality of the book stock through formula funding, and for planning at College level, over time, the extension of computer availability, were less obvious. The recent responsiveness by the College to student requests for improved computer facilities, was noted by the team; however, it was unable to discern how the variety of surveys and reports from students informed the planning process at the institutional

level in support of the strategic enhancement of the quality of learning support.

98 Students spoke very positively of the academic support and guidance they received and the audit team formed the clear view that the staff were fully committed to ensuring that students realised their potential and progressed as smoothly as possible to successful completion of their programmes of study. There was some suggestion that part-time and postgraduate students felt that the usual structures of academic support were not so readily available to them, but they also indicated that they felt confident that any deficiency could be remedied on an individual and personal basis through the staff with whom they came into contact.

### **Academic guidance, support and supervision**

99 Following a report from an ADQC working party in 2000, a system of personal tutors, replacing the existing studies tutor system, was introduced. Students are allocated a member of academic staff as a personal tutor whom they are required to consult each semester to collect and discuss a transcript of their academic achievements and progress. While students seen by the audit team raised some question about the frequency with which, in practice, they saw their personal tutors they nevertheless spoke very positively about the support they received.

100 The availability of academic staff more generally, and their willingness to offer guidance and advice to students on a one-to-one basis, was commented on very appreciatively by students whom the audit team met. It appeared that all staff had advertised office hours, and that many also provided opportunities to schedule additional times to meet students. Meetings with staff confirmed that they saw such support as a key feature of their responsibilities. In the view of the team, there was little doubt that this culture is instrumental in the distinctive and caring ethos of the College, which is an expression of its Christian mission and heritage and contributes to the students' feeling that they are valued and supported.

101 EU, home and overseas students spoke highly of the induction process which clearly succeeds in familiarising students with the College and in ensuring that they find their academic and social bearings. The audit team noted that from the academic year 2003-04 it was planned to introduce at induction an assessment of new students' IT skills and to provide support as appropriate. The high quality of documentation provided, both centrally

produced handbooks and subject and module handbooks, ensures that students are fully aware of relevant regulations and expectations throughout their time at the College; students reported that these publications were both lucid and pertinent. Students seen by the team were confident that they understood the structure of their degree programmes and the possible pathways open to them. Since they received annual transcripts of their progress as a matter of course they also understood how they were performing in relation to expectations. Both the student handbook for new students and the undergraduate programme handbook, which is provided in different editions for new and continuing students, are of very high quality. Each year each student is provided with an updated version of the relevant handbooks.

102 Students seen by the audit team had confidence in the assessment process. They were familiar with the published assessment criteria and had no doubt that these were being applied fairly and consistently. They appreciated the fullness of the feedback on their coursework, though there appeared to be some variability in the length of time it took to return work to students.

103 Within the Student Services Office (see below, paragraph 106) a highly effective Learning Development Unit provides support, chiefly on literacy problems, for students on an individual basis. The College is piloting personal development planning in a number of subjects through an electronic scheme entitled 'My Marjon' which is in its early stages but looks very promising, and is likely to be enhanced by the active incorporation of student suggestions and feedback.

104 In the view of students, SSLCs were very effective: the role of student representatives was well-understood and issues referred to SSLCs were acted upon and minutes were posted on notice-boards. Student Satisfaction Questionnaires were less favourably regarded: as stated previously, the response rate is poor. The College has for some time been exercised by how to improve this and the audit team noted and endorsed the College's commitment to secure innovative solutions to the problem. The data provided by questionnaires, analysed by CLT, are reported through the Annual College and Accreditation Report.

105 In response to a recommendation arising from the audit of the College by the University, the College established a SAC. Both the SAC and the SURF, set up by the Students' Union on its own initiative, have had difficulty in securing adequate student participation. It has been decided that SURF

will be disbanded and that, in future, SAC, chaired jointly by the President of the Students' Union and the Director of Student Services and with all student representatives as members, will be the focus for liaison between students and staff.

### **Personal support and guidance**

106 Arrangements for personal and other forms of support and guidance are located in the Student Services Office. Students spoke very warmly of Student Services and of its Director. They regarded the service as a ready source of advice and guidance on a wide range of matters, emotional, financial and academic. Within Student Services are a health centre, financial and student loans advisers, a careers service, counsellors and a Disability Advice and Support Service (DASS). Members of the Careers Service speak for five or 10 minutes in lecture slots in all subjects and levels, with the aim of addressing all students in the course of an academic year. They speak at induction, have a stall in Freshers' Week and handle over 400 one-to-one sessions each year. The audit team formed the view that this was an active and effective service.

107 Support provided to disabled students is particularly worthy of note. Students are made aware of provision in this area at induction and through centrally produced documentation. DASS offers assistance in completing applications for the Disabled Student Allowance and arranges learning support such as scribing and note taking. Of the 200 or so students currently supported by DASS, over 50 per cent have dyslexia. To meet this need, the College has a dedicated dyslexia adviser, a service which is much appreciated by students. Staff are aware of and responsive to the Special Educational Needs and Disability Act 2001 and the obligations it places on institutions. In the light of these, the CLT has produced a helpful Code of Practice Concerning Special Assessment Arrangements for Disabled Students.

108 The Chaplaincy plays a distinctive part in the life of the College. It provides opportunities for prayer and worship but, beyond that, it is seen as an hospitable and welcoming embodiment of the inclusive and supportive culture of which the College's mission speaks. This culture is recognised by students, whether or not they profess Christianity, as characteristic of the College.

109 In July 2002, the College received the Devon Audit Services report on Counselling, Guidance and Learning Support which recommended that clear targets be set in the area of student support; costs be established and, the College decide what it

considered to be the appropriate limits to set on the support it could provide, especially in counselling. The audit team understands that the College's own planned internal review of Student Services will take account of this report.

110 The Director of Student Services produces an annual report for ADQC. The audit team noted that the report for the academic year 2000-01, which was not produced until February 2002 for consideration by ADQC in May 2002, was rather perfunctory. The 2001-02 report was again late, being completed on 7 May 2003 just prior to the team's visit and, although less cursory, still lacked solid data and analytical content. The College may wish to consider how a more rigorous and structured approach to reporting may assist in monitoring fulfilment of its commitments in the area of personal support and guidance for students.

111 In the view of the audit team, through its Student Services Office the College is able to provide comprehensive support for students. It is particularly well-equipped to respond positively to disabled students and to those with special learning and study needs, and the degree to which students felt that support, advice and guidance was available to them in academic, financial and emotional matters was very striking. This included positive testimony from international students; in the SED the College flagged up support for international students as an area in which it was continuing to make improvements.

### **Collaborative provision**

112 The College has a variety of partnership arrangements including some 24 organisations delivering eight sets of awards, in addition to the major collaboration with the University under the accreditation agreement. Twelve of the registered partnerships, involving the award of Church College Certificates for which 178 students are currently registered, are not governed by formal agreements with either Church of England and/or HEI partners. Students employed by local authorities and the NHS take a range of the College's courses offered through collaborative ventures. Two of the College's collaborative arrangements involve off-site, overseas delivery and for one of these the College is currently proposing to validate a BEd programme in Malaysia to replace a partnership which is no longer in operation. A distinction between 'partner' and 'client' collaborations is made by the College but the audit team was not persuaded that this was a particularly useful distinction, neither to the College for its own purposes, nor for demonstrating full alignment with

the section of the *Code of practice, Section 2: Collaborative provision*, particularly with reference to the scope and use of a Register of Partnerships. In view of the variety of categories of collaborative relationship operated by the College, the range of actual and planned provision and the uncertainty in recording student numbers across the categories, the College is advised to develop promptly a comprehensive taxonomy for the approval, validation and operation of collaborative arrangements.

113 The SED stated that procedures for reporting on quality and standards issues for approval, monitoring and review in all collaborative delivery, were identical to those for non-collaborative provision save that the Department of International Education was responsible for reporting to ADQC on all overseas quality and standards matters in addition to the faculties. The Department is represented on ADQC and on AAC, and the Dean of the Department is a member of the SMT. The extent to which standard College quality assurance procedures applied in practice was unclear to the audit team, particularly as far as the involvement of the faculties was concerned. It appeared to the team that, in practice, responsibility for quality assurance in overseas collaborative provision was shared between the faculties and the Department and that this had contributed to some difficulties in assuring clear and appropriate operational responses to quality assurance requirements in the two major areas of the College's overseas provision.

114 The College was advised in the report of the HEQC audit of 1996 to implement promptly formal guidelines on overseas collaborations. The College believes that its current partnership arrangements 'take account of' the section of the *Code of practice, Section 2: Collaborative provision*, with the SMT overseeing compliance with College policies and procedures. At the time of the audit, new Draft Regulations for the Approval of Academic Partnerships were under consideration, with the support of the University, and in the context of what both institutions see as the developing maturity in their relationship. The most recent summative quality assurance report on international collaborative courses to ADQC from the Department of International Education was thorough and practical, although at the time of the audit it was too soon to assess the impact of new action plans proposed in the report.

115 The audit team explored the management of quality and standards of the BEd for Serving Teachers English Language Teaching, and the MEd English Language Teaching, both delivered as forms of off-

site delivery in Mexico. College staff conduct most of the teaching on these courses through intensive block teaching, with local tutors providing assistance, including dissertation support, for students. This is not seen as distance learning by the College and there was little evidence of appropriate mechanisms to allow support for and monitoring of what are, in the view of the team, effectively local tutors whose help in dissertation projects might conceivably assume an academic character close to teaching regardless of College definitions in this area. There was evidence of collection of monitoring information from the external examiners and from the students on these courses to support the College's processes for judging both quality and standards. However, the familiarity of the external examiner with the structure of the programme and the scheduling of assessments in her first year was unclear, and the precise job description and line management of the local tutors were not sufficiently clear to the team. Progression and award data are collected and reported by the Department of International Education and by the faculties but there was no apparent use of longitudinal data to monitor the operation of the programmes over time.

116 Malaysia is the College's other major area for overseas collaboration, the first phase of which ended in 2002. A partnership with a new collaborating institution is about to be validated with a first intake planned for early in 2004. This would extend the previous arrangement into a consortium involving universities from Australia and New Zealand in delivering elements of the proposed programme. The audit team reviewed the range of reports on the predecessor arrangement and was confident in the overall provision and use of information gathered on quality and standards of the previous programme delivered in Malaysia.

117 The audit team was told that the College proposed to validate the new partnership in Malaysia under new Draft Regulations for the Approval of Academic Partnerships which had not yet been formally approved either by the College's Academic Board or by the University. The team considered that the concurrent timetables of the visit of inspection to Malaysia, and of the drafting and approval of new regulations governing such visits and associated validation procedures in general, carried the significant risk of compromising confidence in the process of validation of the new Malaysian programme. The College is advised to develop without delay rigorous procedures for the approval, validation and operation of collaborative arrangements with HEIs and other organisations in the UK and overseas.

### **Section 3: The audit investigations: the discipline audit trails**

#### **Discipline audit trails**

118 In each of the selected DATs, members of the audit team met staff and students to discuss the provision, studied a sample of assessed student work, saw examples of learning resource materials, and studied internal review and other relevant documentation. The team's findings are as follows:

##### **Applied sport science and coaching**

119 The BA (Hons) Applied Sport Science and Coaching is located within the Department of Physical Education Sport Sciences (PESS) in the FEST. The programme is available as major, minor and joint honours options within the College's combined honours modular degree programme. The DSED which had been produced for the purposes of the audit was evaluative and well-written, clearly identifying how standards and quality of the subject provision were maintained.

120 The programme specification was informed by the *Subject benchmark statements* for hospitality, leisure, sport and tourism and by the *FHEQ*. The addition of opportunities to gain vocationally relevant qualifications as part of the course was valued by the students. External reference points were evidenced in the documentation and staff were familiar with relevant sections of the *Code of practice*.

121 A comprehensive compendium of PESS policies and staffing guidance ensures that all staff understand the quality management systems in the subject group. Staff were knowledgeable about their role in quality assurance and appreciated institutional quality assurance procedures. Staff have extensive and praiseworthy involvement in external professional organisations, particularly in coaching.

122 Progression and completion data were used in producing the annual subject report but it was not clear how these data were analysed or if they were used to monitor quality and standards on a systematic basis at the local level.

123 External examiners' reports were considered and responses and action plans were produced in a timely manner. The audit team reviewed a range of student work: it was satisfied that the nature of the assessment and the standard of student achievement met the expectations of the programme specification and the *Subject benchmark statements* and was appropriate to the awards and their location within the *FHEQ*. There was evidence of effective feedback in relation to coursework,

which students confirmed was timely and relevant for subsequent assessment. The range of assessment utilised was appropriate to the nature of the degree and the applied vocational relevance of some work was exemplary.

124 Students confirmed that all students received a College student handbook, an undergraduate programmes handbook and a course handbook, all of which were informative and accurate. The course and programme handbooks included the programme's intended learning outcomes, criteria against which work was marked and complaints and appeal procedures. Additional module details are provided both electronically and in paper format and further material was provided on the intranet to support most of the modules on the programme.

125 Staff and students confirmed that the learning resources for the programmes were fit for purpose. The practical facilities and a new sports science laboratory provided the opportunity for students to establish and demonstrate links between theory and practice. ASC makes good use of the College intranet with a member of staff identified as being responsible for coordinating the use of the intranet. With the exception of poor email provision, students had ready access to supporting material from the intranet.

126 Students who were elected representatives on the SSLC reported that the meetings were constructive and gave examples of issues which they considered had been addressed appropriately. The minutes of these meetings and details of subsequent action were posted on student notice-boards.

127 The audit team was satisfied that the quality of the learning opportunities available to students was suitable to the award of BA (Hons) Applied Sport Science and Coaching.

##### **Theology and philosophy**

128 The DSED was produced for the purposes of the audit. The programme specifications attached to the DSED (some in draft) were fully and accurately descriptive, and appropriately presented, with due reference to the *FHEQ*. The programmes were consistent with the relevant benchmark statement, with which staff were entirely familiar.

129 The DSED described the subject area of theology and philosophy in the College as being 'in a unique position to contribute to the overt religious and moral aims of the College' since its own aims derive explicitly from the College's Christian mission statement. This gives to the work of the Centre for Theology and Philosophy a distinctive character, but it does not result in a narrow focus to that work. There is engagement with the contemporary world

and contemporary issues, most notably in the BA (Hons) Theology modules on Christian feminism and theologies of liberation. A similarly innovative approach is evident in postgraduate programmes such as the MA Health Care Ethics and the forthcoming MA Applied Theology (Ministry and Mission). There is little doubt that this intellectually challenging and exciting aspect to the curriculum derives from the active research interests of the staff, to a degree unusual in the College.

130 Undergraduate students combine core modules with a series of option modules. This combination of the obligatory and the optional works well, allowing students to pursue particular topics of interest and to give their degrees an individual bias while ensuring that they are grounded in essential knowledge and skills. A carefully planned two-year sequence of module availability ensures that students can plan ahead with confidence and that their progress is not jeopardised. Students reported no anxiety or uncertainty about identifying appropriate pathways. As the DSED described it, 'flexibility and integrity' are the key features of the undergraduate programmes. These 'flexible yet coherent curricula' were commended in the last Agency subject review report (2000).

131 At postgraduate level, programmes are designed to meet the needs (and particularly the professional needs) of specific groups of students and stakeholders. The MA Theology (Church School Education/Religious Education), for example, developed in association with all the Anglican Church Colleges, meets the needs of teachers. The MA Health Care Ethics is for medical and health service practitioners. The MA Applied Theology (Ministry and Mission) was developed in response to the Church of England Hind Report. This responsiveness to a range of social needs is a real strength of the Centre and its provision.

132 The programmes of study run by the Centre are delivered in the main through lectures, seminars and tutorials, although there is some distance learning on the MA Theology (Church School Education or Religious Education), the Church Colleges' Certificate programmes and the Postgraduate Certificate in Adult Theological Education. Use of ICT in teaching is limited, although there is an intention to develop mixed-mode delivery.

133 Staff were familiar with relevant central College committees, and recognised the role of ADQC, but they were not otherwise always confident about their remits and relationships with the central structures. Their interaction with the College appeared to be chiefly through direct contact with the Dean. The various stages of course monitoring,

through module reports, subject reports and faculty reports, were understood, but felt by some to be rather cumbersome.

134 Students felt that the support they received from academic staff was excellent. Staff were readily available, not only during office hours, to give advice and guidance. Students also reported that the SSLC worked effectively.

135 The documentation they received was thought by students to be full, accurate and clear. They reported no difficulties in understanding their programmes of study or what was expected of them. From module information they were familiar with the concept of learning outcomes.

136 The Agency subject review report recommended that the absence of clear and specific assessment criteria should be addressed. Assessment criteria are now well-understood and students expressed confidence in the fair application of these criteria and in the conscientiousness with which their work is marked. They spoke very highly of the quality of the feedback they received, and of the speed with which work was returned to them. The assessed work seen by the audit team bore out this positive view, as did comments in the external examiners' reports. The team was satisfied that the nature of the assessment and the standard of student achievement met the expectations of the programme specifications and the *Subject benchmark statement* for theology and religious studies, and was appropriate to the awards and their location within the *FHEQ*.

137 Students had a high opinion of the learning resources provided by the College, particularly the IT provision, while looking forward to the introduction of a more effective email facility. The DSED spoke appreciatively of the benefits deriving from new accommodation occupied in November 2001 where all rooms are fitted with the latest technology.

138 The highest density of research postgraduate students within the College is found in this subject area and, exceptionally, the Centre of Theology and Philosophy has been given full authority by the University to manage their supervision and progress. Joint supervision of a minority of research students continues with the University, but in the main the Centre is now solely responsible for ensuring that students attain appropriate levels of achievement. The DSED said little about research students but as far as it was able to judge, the audit team formed the view that the Centre provides appropriate support and guidance.

139 The audit team was satisfied that the quality of learning opportunities available to students was

suitable for courses of study leading to the awards of BA (Hons) combined: Theology and Philosophy; MA Applied Theology; MA Theology (Church School Education)/(Religious Education); MA Health Care Ethics. The team was also satisfied that the quality of learning opportunities for research students was appropriate.

#### **Community and youth studies**

140 The DAT covered a cluster of courses in community and youth studies: Postgraduate Diploma (PgDip)/MA Youth and Community Work; BA (Hons) Community Studies; BA (Hons) Community and Youth Studies (Youth and Community Work after September 2003); BA (Hons) Community Work. The DSED was an internal report with programme specifications for all the relevant courses attached. This group of courses is an important and distinctive regional provision in the South West. The DSED was brief and descriptive rather than evaluative or reflective.

141 The programme specifications made reference to the most appropriate *Subject benchmark statements* for social policy and administration and social work and for education studies, the National Youth Agency and the England Standards Board for Community Work as the relevant accrediting professional bodies for two of the programmes and the section of the *Code of practice* on placement learning. An additional external reference point was embodied in the programmes' Professional Advisory Group members who were youth and community work professionals and employers.

142 Progression and award data over a two year entry cohort, together with very full information on recruitment characteristics, were available and used through the programme and subject reports, although more longitudinal data were not routinely and formally available as management information for the course team or for the College. Professional accreditation by the National Youth Agency has required annual reports to and periodic reviews of the operation of the relevant programmes with strong endorsements from the National Youth Agency. There is thus a strong basis for internal monitoring and review which works well.

143 Conventional external examination is augmented by a set of Placement Moderators who write extensive and detailed reports on the substantial placement learning elements in the appropriate courses. Both external examiners' and the moderators' reports and the actions as responses are formally tracked and checked. A good example of the effectiveness of this approach was the extension of individual fieldwork supervision by the course team following criticisms in a moderator's report.

144 The audit team sampled assessed student work from all programmes, including the assessed placement elements, and was satisfied that the standard and content of the work was appropriate to the titles of the awards and their locations within the *FHEQ*. A clear and distinctive level of challenge was made at masters level.

145 The students who met the audit team, all of whom were mature and with experience of public sector social welfare service organisations, were laudatory concerning all three kinds of handbook they were issued - the induction book, the programme handbooks for both new and continuing students and the module guides. These provided essential and constantly referred to information. Library and ICT resources were regarded as appropriate although there was a need for more flexible access to learning materials for part-time postgraduate students who often had to travel considerable distances to attend the only masters programme of its kind in the Southwest. These students looked forward to the introduction of more internet-based support for learning and teaching.

146 SSLCs were regarded as valuable and practical by both the students and the staff seen by the audit team. An example of the effectiveness of the SSLC was the introduction of training for placement supervisors, which the audit team regarded as responsive and timely. Module Evaluation Forms were not seen as useful by students, but the informal accessibility of individual staff was praised as a major avenue for dealing with problems on programmes. The students did have anxieties about the promptness of feedback on assessed work, but the quality of that feedback was regarded by the students and the team, having sampled the assessments, as very high.

147 One comment made in the meetings with the students and staff in the DAT was that 'quality issues are to do with the quality of relationships'. There is little doubt that provision in community and youth studies is significantly underwritten by such high-quality interaction between students and staff. Procedures for delivering and assuring the quality and standards of provision rest upon this but are, nonetheless, clear, understood, shared and effective. They allow the close matching of professional and academic requirements, and they also provide a basis for addressing the considerable challenge of developing placement learning and the appropriate use of ICT, both of which were recognised as important issues by the staff in their meeting with the audit team.

148 The audit team was satisfied that the quality of learning opportunities available to students was suitable for courses of study leading to the awards of PgDip/MA Youth and Community Work; BA (Hons) Community Studies; BA (Hons) Community and Youth Studies; BA (Hons) Community Work).

#### **Section 4: The audit investigations: published information**

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

149 The SED summarised the College's arrangements for providing information for students and prospective students. The audit team gathered information from students during DATs and meetings with student representatives on their experience of the information available to them, both published and that forming part of the programme documentation. Students were generally aware of the College Mission Statement and knew how and where to access information on College regulations and policies, although they had, in some cases, been unaware of these until they had needed to refer to them for specific guidance.

150 Students explained that the major sources of information were the student handbooks, the undergraduate programmes handbooks and the module handbooks. The centrally produced handbooks were written in a user-friendly manner and included relevant regulations and policies, complaints and appeals procedures and other information potentially useful to students of the College. While programme handbooks were more variable in content, they all contained programme learning outcomes, assessment guidelines and a detailed description of the structure of the programmes. Most module leaders issued handbooks at the beginning of the teaching period although the assessment details were not always provided to students at the same time. The quality of module handbooks varied between disciplines and students highlighted these inconsistencies when comparing their major and minor subjects. The overall accuracy of the information provided to students was confirmed.

151 The accuracy of the prospectuses and of internet-based material is confirmed by deans, the relevant programme leaders and the Academic Registrar. The Director of Information Services is responsible for all the information on the College web site. The web site is a Triple A site, with a commendation from the Royal National Institute for the Blind. It is managed by a

Webmaster assisted by the Web Advisory Group which includes student representation.

152 The College is satisfied that its procedures for ensuring the accuracy of qualitative information in its prospectus and on the web site, and in all other publications are secure. Many of the statements used in the prospectuses have been taken from Agency subject reports, Higher Education Statistics Agency publications or other publications from other external agencies.

153 The Information Task Group is responsible for ensuring that all published information is not only complete and accurate, but it is also considering the range and format of material that the College should publish.

154 Students considered that they were provided with adequate accurate information in a timely manner, despite discrepancies between the quality and amount of the information provided between different subject areas. Some areas utilised the internet fully as an additional information system providing lecture notes and useful web site addresses, in contrast to other disciplines that were not yet using the intranet in this way.

##### **Reliability, accuracy and completeness of published information**

155 The audit process included consideration of the reliability of information published by the College. While the College is not yet required to have in place the full data set specified by HEFCE's document 02/15, it is making appropriate progress towards meeting those requirements. The College Information Task Group is currently examining the implementation of the recommendations contained in HEFCE's document 02/15 and is confident it can meet these by the due dates. The remit of the Task Group includes the planning, collection, collation, evaluation and coordination of the institution's quantitative and qualitative data and information. The Group is also considering the requirements of the Freedom of Information Act (2000) and the Data Protection Act (1998). Summaries of the external examiners' reports are presented in the Annual College and Accreditation Report. The audit team compared the summary against a sample of external examiners' reports and found it to be reliable and accurate. Summary results of recent Agency subject reviews and Ofsted inspections were accurately reported.

156 Overall, the audit team was satisfied that the information that the College was publishing currently about the quality of its programmes and the standards of its awards was reliable.



## Findings

## Findings

157 An institutional audit of the College was undertaken during the week 12 to 16 May 2003. The purpose of the audit was to provide public information on the quality of the College's programmes of study and on the discharge of its responsibility as a UK HEI with responsibilities for safeguarding the academic standards of awards. As part of the audit process, according to protocols agreed with HEFCE, SCOP and UUK, three DATs were selected for scrutiny. This section of the report of the audit summarises the findings of the audit. It concludes by identifying features of good practice that emerged from the audit, and recommendations to the College for enhancing current practice.

### The effectiveness of institutional procedures for assuring the quality of programmes

158 The College is an accredited College of the University and, under the terms of the accreditation agreement, has responsibility for assuring the quality of programmes leading to awards of the University. Procedures for programme approval, monitoring and review are set out in the College's quality assurance handbook, A Framework for Quality.

159 Programme approval is a two-stage process consisting of approval in principle followed by approval in detail. Approval in principle is given by the Principal acting through the SMT; detailed approval involves scrutiny by an ISP and subsequently by a Validation Panel with external participation, including, where an award of the University is under discussion, representation from the University. Approval of proposals is reported to the ADQC, the Academic Board and, where relevant, to the University. The normal period for validation is six years.

160 Periodic review is conducted by a panel convened by ADQC to consider a critical SED for the period of operation of the programme under review. Students and all relevant subject staff are given the opportunity to contribute to the process. The review panel makes recommendations to ADQC on revalidation.

161 The annual monitoring process is based in the faculties of the College. Faculty summative reports draw on programme/course reports, which take account of external examiners' reports, and are derived from subject and module reports. ADQC considers the faculty summative reports which are also reviewed by the Academic Registrar in his capacity as Head of Quality. The process culminates in an Annual College and Accreditation Report, submitted to the Academic Board and to the

University, which provides an overview of the operation of programmes at the College.

162 The views of current students are elicited through module evaluation questionnaires, the results of which are collated in module reports, and thereby feed into the subject, course and Faculty reports. Students met by the audit team confirmed that their views were noted and taken account of by the College through both formal and informal mechanisms. SSLCs are an effective channel for communication between the student body and the College. Students are also represented on all major committees and thereby have the opportunity to participate in debate at the institutional level.

163 There is an annual Student Satisfaction Questionnaire but low, sometimes below 20 per cent, return rates limit its utility. The results are analysed by the CLT, and are reported in the Annual College and Accreditation Report to the University. The College is considering ways to improve the rate of return.

164 The audit team found that there was a range of opportunities for student representation and for the expression of student opinion. The College values student opinion and takes it into account in the management, design and delivery of programmes. There are no systematic, college-wide arrangements for gathering feedback from former students or from employers.

165 Current procedures for assuring the quality of programmes offered by distance learning and other collaborative arrangements are the same as those applying to home provision. At the time of the audit, the College was in the process of approving Draft Regulations for Academic Partnerships which would establish processes specific to programmes offered in collaboration with other organisations. Current approaches to the arrangements and responsibilities for the quality assurance of collaborative provision, including the development, approval and ongoing monitoring of programmes, are not always adequate in the contexts of the *Code of practice* and the *Guidelines* published by the Agency and the current and prospective range of such provision, particularly overseas.

166 The College judges that its arrangements for assuring quality through periodic review, annual monitoring and continuous audit are generally satisfactory but acknowledges some duplication of process and ambiguity in responsibilities for action.

167 The audit team shared the College's perception of the effectiveness of its arrangements for assuring the

quality of its home provision. Procedures for assuring the quality of collaborative provision were less robust and would benefit from more clarity in the definition of roles, responsibilities and reporting structures.

### **The effectiveness of institutional procedures for securing the standards of awards**

168 The College secures standards through the accreditation agreement with the validating university and compliance with its requirements, documented and demonstrated through an extensive annual report; the operation of internal systems for the approval, validation, review and monitoring of courses, and informed by external examiners and, where applicable, professional body reports; the reflective use of management information and other statistical data relating to student performance. All these activities are overseen by the Academic Board and verified through an internal audit system focused on alignment with external benchmarks and the *Code of practice*.

169 The College judges these arrangements to be appropriate and effective but is seeking, on the basis of an ongoing process of self-critical review and stimulated by the findings of internal audit, to introduce further enhancements. The latter include a review of management and committee structures in pursuit of greater simplicity, effectiveness, speed and efficiency in regard to the external examiner process. The audit team found that systems in place were generally fit for purpose, operating as described and supportive of a finding of broad confidence.

### **The effectiveness of institutional procedures for supporting learning**

170 The College's centralised Learning Resources Centre and a range of open-access computer terminals are key elements for the provision of learning support. Evaluation of these services draws on information from a range of sources: student feedback, module/course evaluation and ADQC. The College considers its procedures in this area to be appropriate.

171 The audit team found that library and IT provision in support of student learning was, in practice, both appropriate and adequate to student requirements. The supportive and caring approach of staff in this area makes a significant contribution to reinforcement of this provision. Very recent investment in new computers and plans in progress to extend the use of IT in learning and teaching and student support in general are welcomed. However, there are opportunities to improve the contribution of student survey-based information into the

planning of provision, and also to enhance the current procedures, at College level, for planning, announcing and distributing Learning Resource Centre and IT support improvements for students.

172 The induction process is effective in familiarising students with the College and its academic and social life. All students are allocated a personal tutor who they are required to meet each semester to discuss their academic progress. Staff consider student support to be one of their key responsibilities and operate advertised office hours, but are also willing to meet students at additional times if necessary. Students requiring additional learning support have access to the necessary advice and guidance.

173 The College has a Christian Chaplaincy which takes an inclusive approach and offers effective support to students irrespective of their faith or other allegiances.

174 The College considers that, through an increasing level of investment in student support services, 'high quality is being maintained' in this area. The audit team found that the effective academic and personal support provided to students combined to provide a distinctive and caring ethos in keeping with the College's Christian mission and heritage.

175 The College has a commitment to the continuous development of its staff as demonstrated by its status as an Investor in People and its Human Resource Strategy. The CLT plays a key role in supporting teaching staff, including assistance with applications for membership of the ILT, operating the SEDA programme for new staff, guidance leaflets on a range of topics and a rolling programme of staff development. Academic and support staff are subject to annual appraisal which is used to identify staff development needs.

176 The College considers that its procedures for 'ensuring the quality of staffing for teaching and to promote effective learning are generally good'. The audit team endorsed and amplified the College's assessment of provision in this area, finding that the College had in place well-managed systems which promoted timely identification and fulfilment of staff development needs in support of student learning.

## **Outcomes of discipline audit trails**

### **Applied sport science and coaching**

177 From its study of assessed work, and from discussions with students and staff, the audit team formed the view that the standard of student achievement was appropriate to the title of the award and its location within the *FHEQ*.

Student evaluation of the programme was broadly positive, with the quality of the information, including assessment criteria, provided to students being identified for particular positive comment. The programme specification identified the programme aims and outcomes, structure, assessment regulations and how academic quality and standards are maintained. The quality of the learning opportunities was suitable for programmes of study leading to the award.

#### **Theology and philosophy**

178 The DAT in theology and philosophy included consideration of the learning opportunities and support provided for research students. The institutional audit process does not include consideration of samples of the work of research students.

179 From its study of assessed work, and from discussions with students and staff, the audit team formed the view that the standard of student achievement was appropriate to the titles of the awards and their location within the *FHEQ*. Student evaluation of the programmes was positive. Programme specifications are clear, consistent and appropriate, and take account of the relevant benchmarks. The team concluded that the standard of learning opportunities available to students was appropriate to the programmes of study.

#### **Community and youth studies**

180 From its study of assessed work, and from discussions with students and staff, the audit team formed the view that the standard of student achievement was appropriate to the titles of the awards and their location within the *FHEQ*. Student evaluation of the programmes was positive. Programme specifications are in place in accordance with the College's standard template. The team concluded that the standard of learning opportunities available to students was appropriate to the programmes of study.

#### **The use made by the institution of the academic infrastructure**

181 The SED made reference in several instances to the College's engagement with the *Code of practice*, the *FHEQ* and subject benchmark statements. The College's undergraduate provision was revalidated in March 2002 to a revised framework in alignment with the *FHEQ*. Requirements for initial approval and for periodic review, which draw on the *Code of practice*, particularly the section on programme approval, monitoring and review are set out in the College's A Framework for Quality document; both processes stipulate that the documentation include

reference to subject benchmark statements and other relevant external reference points. The College requires that programme specifications to a standard template be in place for all of its provision by the end of the academic year 2002-03. The DATs undertaken by the audit team, which included discussions with students and staff, furnished evidence of awareness and action at the local level in response to the academic infrastructure.

182 The *Code of practice* has clearly informed a number of developments at the College, particularly the process of internal audit which has been a prime instrument for investigation and alignment. Reports from internal audit demonstrate the value and seriousness which the College places upon meeting the precepts of the *Code of practice*. The audit team considered that College processes were not yet in full alignment with the sections of the *Code of practice* on collaborative provision and on placement learning.

183 Overall, the audit team considered that the College's response to the academic infrastructure had been both considered and systematic and that the elements were used effectively to set the standards of the awards at the appropriate level and to provide pertinent points of reference in programme specifications.

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

184 The SED was comprehensive and open, providing a clear account of the College's procedures and practices for the maintenance of standards and for the assurance and enhancement of quality. Although in some instances it gave the impression of a more strategic and coherent approach to these areas than, in the event, the audit team found to be entirely justified, it nevertheless engaged honestly with matters of current debate and identified areas where the College believed that it needed to take action. The team considered that the document provided them with a secure foundation for the audit and made possible a constructive dialogue with the College.

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

185 In the SED, the College pointed to a Three-Year Quality Assurance Enhancement Plan covering the period 2003 to 2005 as the means by which it would further improve its provision, embracing a programme of internal audits; a programme of

reviews conducted by the SMT; reviews of: the AAC; information and documentation in the light of HEFCE's document 02/15; the management structure of the College; the academic portfolio; student services; and an extension of student involvement in quality processes.

186 Although these actions had the potential to contribute to enhancement of the College's educational capacity, it appeared that, in practice, they did not constitute a coherent plan with strategic objectives, but rather a summary of a number of current or planned activities. Confirmation from meetings with staff that the plan did not exist in the form of a single, discrete document reinforced this perception. The audit team formed the view that the College, from the best of intentions, might be setting itself over-ambitious targets in the number and scale of intended reviews that might stretch the resources at its disposal and noted, in this context, that the current series of internal audits was behind schedule. The team considered that in the interests of the College, there was a need for a more realistic, considered and phased approach in this area.

### Reliability of information

187 From 2004, the audit process will include a check on the reliability of the information set published by institutions in the format recommended in HEFCE's document 02/15. The College Information Task Group is currently examining the implementation of the recommendations contained in HEFCE's document 02/15 and is confident it can meet these within the required implementation schedule. The remit of the Task Group includes the planning, collection, collation, evaluation and coordination of the College's quantitative and qualitative data and information.

188 The audit team was satisfied that the information that the College was publishing currently about the quality of its programmes and the standards of its awards was reliable.

### Features of good practice

189 The following features of good practice were noted:

- i. the approach to academic staff development, under effective leadership from the CLT, which is responsive both to external imperatives and to individual needs (paragraph 84);
- ii. a distinctive and caring ethos which is an expression of the College's Christian mission and heritage and contributes to the students' feeling that they are valued and supported (paragraph 100);
- iii. the arrangements for student induction (paragraph 101);
- iv. the approach to support for students with disabilities, which includes measures to raise awareness across the College and to promote dissemination of good practice (paragraph 107);
- v. the compendium of policy and guidance for staff produced by PESS (paragraph 121);
- vi. the committed and responsive comprehension and appreciation of staff of institutional quality assurance systems and of external developments in the professional area in ASC (paragraph 121);
- vii. innovation in the curricula in theology and philosophy, in particular, in the MA Applied Theology (Ministry and Mission), the MA Health Care Ethics and in modules on Christian feminism and on theologies of liberation in the BA (Hons) Theology (paragraph 129);
- viii. the effective monitoring and development at local level of the central placement element in community and youth studies (paragraph 147);
- ix. the accessibility, clarity, currency and comprehensive nature of the centrally produced handbooks for students (paragraph 150).

### Recommendations for action

190 Recommendations for action that are advisable:

- i. develop and apply a more strategic approach to quality and standards (paragraph 29);
- ii. without delay, refine and extend the current thinking on the College's committee and management structures, with particular reference to the respective roles and responsibilities of the Academic Board, its subcommittees and the SMT (paragraph 30);
- iii. revisit the internal programme of audit and review to achieve a more realistic and focused agenda for monitoring and enhancement activity (paragraph 33);
- iv. review the operation of the validation process including the documentary requirements and the timeliness of ADQC consideration and endorsement of panel reports (paragraph 37);
- v. without delay, in the light of the Draft Regulations for Academic Partnerships, develop and implement a comprehensive taxonomy and rigorous associated procedures for the operation of collaborative arrangements with HEIs and other organisations in the UK and overseas (paragraph 112).

191 Recommendations for action that are desirable:

- vi. devise and implement a policy on the employment of postgraduate research students as teaching assistants (paragraph 82);
- vii. formalise and strengthen the approach to peer observation of teaching (paragraph 87).

## Appendix

### The College's response to the audit report

The College welcomes the expression of broad confidence in the current and likely future management of the quality of its academic programmes and the academic standards of its awards, and is grateful for the detailed hard work that the auditors clearly put into the visit and the compilation of the report. We are obviously very pleased with the indications of good practice and in particular the provisions for both staff and students which led to the audit team's recognition of the distinctive and caring ethos of the College's Christian mission and heritage during their visit. The confidence placed in the College's systems and management is particularly welcome during a year when the College was subject to significant changes of personnel in its Senior Management.

Indeed, the College prides itself in its ability to look forwards and to act proactively, as evidenced by the fact that most of the recommendations of the audit team had been recognised in the College's own Self-Evaluation Document and remedial action had commenced even before the team's visit.

Extensive work to review the committee structure of the Academic Board has been underway during the past six months. The new Principal, who took up post in July 2003, is currently engaged in a total restructuring of the management and academic structure of the College following a period of extensive consultation with all College staff, which commenced in early 2003. During the coming session a review of the College's academic portfolio will take place that will permit the finalisation of the overall structural redesign.

The College has confidence in its assurance of quality and standards in its collaborative provision. This is demonstrated by its long-standing successful history of collaboration overseas, noted by the auditors. As recommended in the report, the College is now putting in place rigorous procedures to underpin its practice, has already approved and implemented its Regulations for Academic Partnerships, and is currently developing a strategy on programmes of study by distance learning (with specific associated policy for assuring the quality and academic standards of the education that the College provides at a distance). Work is already advanced on the production of a full taxonomy of collaborative provision.

It is perhaps indicative of the College's constant striving for improvement that the audit team has advised a more realistic agenda for monitoring and enhancement. The Academic Audit Committee has already determined a programme of internal audit which it now believes to be achievable and will focus upon ensuring continued compliance with the *Code of practice*, and the recent detailed internal audit of the College's external examining arrangements has provided a firm basis from which the College can formulate ways forward to strengthen the areas highlighted in the internal audit report and subsequently confirmed by the Institutional Review. Additionally greater flexibility in handling external examiner reports is being positively supported by the University of Exeter.

The new academic session will provide opportunity for the College to complete the work it had already begun on addressing issues raised and to continue to build on the many exemplars of good practice commended in the report.