



QAA



Institutional audit

De Montfort University

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Preface

The Quality Assurance Agency for Higher Education's (QAA) mission is to safeguard the public interest in sound standards of higher education qualifications and to inform and encourage continuous improvement in the management of the quality of higher education. To this end, QAA carries out Institutional audits of higher education institutions.

In England and Northern Ireland, QAA conducts Institutional audits on behalf of the higher education sector, to provide public information about the maintenance of academic standards and assurance of the quality of learning opportunities provided for students. It also operates under contract to the Higher Education Funding Council in England and the Department for Employment and Learning in Northern Ireland to provide evidence to meet their statutory obligations to assure the quality and standards of academic programmes for which they disburse public funding. The audit method was developed in partnership with the funding councils and the higher education representative bodies and agreed following consultation with higher education institutions and other interested organisations. The method was endorsed by the Department for Innovation, Universities and Skills (now the Department for Business Innovation and Skills). It was revised in 2006 following recommendations from the Quality Assurance Framework Review Group, a representative group established to review the structures and processes of quality assurance in England and Northern Ireland, and evaluate the work of QAA.

Institutional audit is an evidence-based process carried out through peer review. It forms part of the Quality Assurance Framework established in 2002 following revisions to the United Kingdom's approach to external quality assurance. At the centre of the process is an emphasis on students and their learning.

The aim of the revised Institutional audit process is to meet the public interest in knowing that universities and colleges of higher education in England and Northern Ireland have effective means of:

- ensuring that the awards and qualifications in higher education are of an academic standard at least consistent with those referred to in *The framework for higher education qualifications in England, Wales and Northern Ireland* and are, where relevant, exercising their powers as degree-awarding bodies in a proper manner
- providing learning opportunities of a quality that enables students, whether on taught or research programmes, to achieve those higher education awards and qualifications
- enhancing the quality of their educational provision, particularly by building on information gained through monitoring, internal and external reviews, and feedback from stakeholders.

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 academic standards of awards
- the confidence that can reasonably be placed in the soundness of the institution's present and likely future management of the quality of the learning opportunities available to students.

Audit teams also comment specifically on:

- the institution's arrangements for maintaining appropriate academic standards and quality of provision of postgraduate research programmes
- the institution's approach to developing and implementing institutional strategies for enhancing the quality of its educational provision, both taught and by research

- the reliance that can reasonably be placed on the accuracy and completeness of the information that the institution publishes about the quality of its educational provision and the standards of its awards.

If the audit includes the institution's collaborative provision the judgements and comments also apply unless the audit team considers that any of its judgements or comments in respect of the collaborative provision differ from those in respect of the institution's 'home' provision. Any such differences will be reflected in the form of words used to express a judgement or comment on 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.

Explanatory note on the format for the report and the annex

The reports of quality audits have to be useful to several audiences. The revised Institutional audit process makes a clear distinction between that part of the reporting process aimed at an external audience and that aimed at the institution. There are three elements to the reporting:

- the **summary** of the findings of the report, including the judgements, is intended for the wider public, especially potential students
- the **report** is an overview of the findings of the audit for both lay and external professional audiences
- a separate **annex** provides the detail and explanations behind the findings of the audit and is intended to be of practical use to the institution.

The report is as concise as is consistent with providing enough detail for it to make sense to an external audience as a stand-alone document. The summary, the report and the annex are published on QAA's website. The institution will receive the summary, report and annex in hard copy (*Handbook for institutional audit: England and Northern Ireland 2006 - Annexes B and C refer*).

Summary

Introduction

A team of auditors from the Quality Assurance Agency for Higher Education (QAA) visited De Montfort University (the University) from 16 to 20 March 2009 to carry out an Institutional audit. The purpose of the audit was to provide public information on the quality of the learning opportunities available to students and on the academic standards of the awards that the University offers.

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

In Institutional audit, the institution's management of both academic standards and the quality of learning opportunities are audited. The term 'academic standards' is used to describe the level of achievement that a student has to reach to gain an award (for example, a degree). It should be at a similar level across the United Kingdom (UK). The term 'quality of learning opportunities' is used to describe the support provided by an institution to enable students to achieve the awards. It is about the provision of appropriate teaching, support and assessment for the students.

Outcomes of the Institutional audit

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

- confidence can reasonably be placed in the soundness of the institution's present and likely future management of the academic standards of the awards that it offers
- confidence can reasonably be placed in the soundness of the institution's present and likely future management of the quality of the learning opportunities available to students.

Institutional approach to quality enhancement

The University has a strong commitment to ongoing improvement and a key feature highlighted by the University is that priorities for enhancing student learning opportunities are primarily defined at faculty and departmental level.

Postgraduate research students

The University issues its own Code of Practice for research degree programmes readily available in both hard copy and on the website and the audit team found this Code of Practice to be, in the main, clear and comprehensive. In addition to this, each faculty publishes its own handbook for postgraduate research students. There were several points on which the audit team has made recommendations to enable the University to meet the expectations of the *Code of practice for the assurance of academic quality and standards in higher education (Code of practice), Section 1: Postgraduate research programmes*, published by QAA.

Published information

The audit team found that reliance could reasonably be placed on the accuracy and completeness of the information that the University publishes about the quality of its educational provision and the standards of its awards.

Features of good practice

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

- the rigorous approach taken by the University to maintain an institutional overview of its professional body engagements (paragraph 24)

- the positive engagement of the University with the student body and the responsiveness of the institution to the student voice (paragraph 31)
- the integrated and structured student support mechanisms to underpin the student experience (paragraph 50)
- the high level of integration and cooperation with local and regional collaborative partners (paragraph 66).

Recommendations for action

The audit team recommends that the University consider further action in some areas.

The team advises the University to:

- revise its description of collaborative provision to reflect the *Code of practice, Section 2: Collaborative provision and flexible distributed learning (including e-learning)*, and produce a comprehensive list of all collaborative relationships that is publicly available (paragraphs 70, 73)
- put in place and fully operate procedures for the rigorous monitoring of the success of postgraduate research programmes against appropriate internal and/or external indicators and targets (paragraph 78)
- put in place and assure itself that it fully operates and delivers its procedures for postgraduate research programmes which meet the expectations of the precepts of the *Code of practice, Section 1*, relating to the selection, admission and induction of students, supervision, assessment and the development of research and other skills (paragraphs 79, 80, 82, 83).

It would be desirable for the University to:

- review whether Academic Board should play a greater part in determining the priorities for academic staff development (paragraph 52)
- ensure that there is University oversight of its international collaborative provision and places increased focus upon this within annual monitoring and review procedures (paragraphs 68, 73).

Reference points

To provide further evidence to support its findings, the audit team investigated the use made by the University of the Academic Infrastructure, which provides a means of describing academic standards in UK higher education. It allows for diversity and innovation within academic programmes offered by higher education. QAA worked with the higher education sector to establish the various parts of the Academic Infrastructure, which are:

- the *Code of practice*
- the frameworks for higher education qualifications in England, Wales and Northern Ireland, and in Scotland
- subject benchmark statements
- programme specifications.

The audit team found that the University took due account of the elements of the Academic Infrastructure in its management of academic standards and the quality of learning opportunities available to students.

Report

1 An Institutional audit of De Montfort University (the University) was undertaken during the week commencing 16 March 2009. The purpose of the audit was to provide public information on the University's management of the academic standards of the awards and of the quality of the learning opportunities available to students.

2 The audit team comprised Mr Christopher Caine, Professor Ken Hurst, Mr Jon Rowson and Mr John Wakefield, auditors, and Mrs Alison Jones, audit secretary. The audit was coordinated for QAA by Professor Peter Hodson, Assistant Director, Reviews Group.

Section 1: Introduction and background

3 The University is associated with Simon De Montfort, Earl of Leicester, a distinguished figure in English history and widely credited with establishing the first parliament in 1265. Prior to 1992, De Montfort University was known as Leicester Polytechnic and was created in 1969 through the amalgamation of Leicester College of Technology and Leicester College of Art.

4 The University has approximately 19,949 students and 4,058 staff. Its UK operation is based in Leicester and is a nucleus for a network of 15 UK collaborative partner institutions. The University has 10 overseas partner institutions. Following the transfer of the Faculty of Education and Contemporary Studies to the University of Bedfordshire, the University no longer has a campus in Bedford. The University is situated on the City Campus in Leicester, where the majority of its provision is based, and at Charles Frears Campus, where Nursing and some health-related provision is located.

5 The strategic plan of the University identifies seven key objectives: 'develop and promote a distinctive academic portfolio; enhance quality; optimise student profile; strengthen research and regional engagement; maintain financial stability; maintain and develop the quality of our staff; maintain and develop estates infrastructure and the environment'.

6 The previous Institutional audit in March 2005 found that broad confidence could be placed in the soundness of the University's current and likely future management of the quality of its academic programmes and the academic standards of its awards. The audit report contained two recommendations that the University was advised to consider. These concerned guidance on the roles and responsibilities of external examiners and various measures relating to student assessment progression. The audit team saw evidence that the University had seriously considered these recommendations and that it had fully addressed the concerns expressed in them.

7 The 2005 audit report also offered a number of suggestions judged to be desirable for the University to consider. These concerned the production and use of reports from examination boards, increasing employer engagement in quality management arrangements, staff-student consultative committees, the use of planning and management information and second-marking. In general, the audit team considered that these had been addressed satisfactorily but encourages the University to continue to monitor closely its attempts to improve the effectiveness of staff-student consultative committees and the consistent application of its advice on first and second-marking.

8 The 2005 audit report identified a number of areas of good practice, including those relating to the University's support for student representatives and student feedback. The audit team noted the University had taken further measures to build on these by strengthening its support for student representatives in the faculties and further development of systematic ways of obtaining and responding to student feedback. Further key areas of development since the 2005 audit have been the continued expansion of the adoption of computer-based learning tools and the creation of a University staff development policy.

9 Academic Board, chaired by the Vice-Chancellor, is the overarching body responsible for the standards of awards and quality of provision, with a membership including three students, nominated by the Students' Union. Academic authority is devolved to five faculty academic committees and a number of other subcommittees which report to Academic Board.

10 The University Learning and Teaching Committee is responsible for advising Academic Board and the faculties on the development and application of policies relating to learning and teaching, and it has a membership including three student representatives, two of which are nominated by the Students' Union. The Modular Management Group is responsible to Academic Board for the implementation, management and review of the undergraduate award scheme and regulations. The Postgraduate Taught Programmes Committee has a similar remit relating to postgraduate awards.

11 A subcommittee of each faculty academic committee exists for collaborative provision dealing with all aspects of programmes that involve provision being delivered at collaborative partners, both in the UK and overseas. The Academic Quality and Standards Committee is responsible to Academic Board for overseeing quality and maintaining academic standards.

12 The University's approach to the management of academic standards is encapsulated in its Learning, Teaching and Assessment Strategy and a detailed account of the University's processes for managing standards and quality is given in the Department of Academic Quality Guide 1. The audit team found this to be a clear, concise and comprehensive document and that the University's framework for managing academic standards and the quality of learning opportunities was effective and appropriate to its scale and mission.

Section 2: Institutional management of academic standards

13 The University's Quality Policy defines its key principles of standards, ownership, trust, accountability, continuous improvement, responsiveness and resolution and appropriate regulation.

14 The approval, monitoring and review processes are central to the University's approach to safeguarding the academic standards of its awards. All approvals, monitoring and reviews reflect the relevant aspects of the Academic Infrastructure: *Code of practice, Section 7: Programme design, approval, monitoring and review*; Department of Academic Quality Guide 8: A guide to validations; programme specifications; and against external reference points. Programme specifications are produced to a standard template, which the University considers to be the definitive document for a programme, once validated.

15 The validation approval, monitoring and review policy and procedures are long-standing, but procedural enhancement is ongoing to maintain alignment of the University's management of academic standards to all necessary standards. Reference points such as QAA Institutional audit and former subject reviews; the *Code of practice*; European Quality Assurance Standards; consideration of subject benchmarks; external examiners; professional, statutory and regulatory bodies; periodic review; programme enhancement plans; management information; student feedback; and employment feedback allow the University to confirm the standard of student achievement and have confidence in the robustness of its validation and monitoring systems.

16 All new programme proposals for validation must meet the planning processes outlined in the Curriculum Planning Office's Guide to Programme Planning and the Department of Academic Quality Guide 8: A guide to validations. External scrutiny is utilised in all validations and the University operates a single set of regulations to monitor academic standards regardless of location. These regulations contain information about the conduct, remit and membership of assessment boards, use of external examiners and assessment tariffs, collaborative partners' annual reports monitored by faculty heads of quality to review and monitor student achievement, the extent to which the curriculum is supported and to ensure the currency and parity of the programme. Identical modular learning outcome templates are used at all points of delivery.

17 Periodic review normally takes place every five or six years and considers learning and teaching, assessment, student support, resources, external examiner reports, student feedback and other surrounding issues. A distinctive feature of the University's approach to periodic reviews is to 'look to the future and consider the impact of broader strategic and contextual factors' and the panel membership includes students, staff and external peers. It is designed to safeguard and enhance academic standards and is monitored by the appropriate faculty head of quality, who reports to their Faculty Academic Committee and to the Academic Quality and Standards Committee. Programme enhancement plans have been recently introduced, so their full impact on the management of academic standards has yet to be comprehensively evaluated, but initial responses are positive and the University is progressing its development. These plans include some annual monitoring aspects, but have a strong emphasis on the enhancement process.

18 The Quality Assurance Procedures Audit Group has undertaken audits of professional, statutory and regulatory body protocols, periodic review, curriculum modification process, student feedback and external examiners' Operating Statement to update and align the institutions' management of academic standards. The external examiners' Operating Statement is to ensure that the handling of external examiner reports reflects the *Code of practice, Section 4: External examining*, precepts 14 and 15. The audit team formed the view that the University's management of academic standards is well designed and operates effectively.

19 External examiners are used to ensure that the standards of the University's awards are set and maintained at an appropriate level, and the University closely adheres to the *Code of practice, Section 4: External examining*. New external examiners have to meet agreed criteria before being appointed by the University and are invited to attend a briefing session. External examiners are asked to submit a pro forma report that confirms threshold judgements on academic standards, currency of programme, assessment process, and to add written comment as appropriate. The received reports are circulated to the faculty heads of quality to ensure that they are considered and responded to appropriately. The audit team confirms that the University makes effective use of independent external examiners in summative assessment and feedback.

20 The strategies and policies found in the University's Policy Directory constitute its framework for managing the quality of learning opportunities. The assessment policy is designed to safeguard standards, ensure comparability and enhance the student learning experience. The University's assessment, policies and regulations have undergone a number of recent changes, including the merging of the Subject Authority Board and the Progression and Award Board, minor improvements to the single set of undergraduate award regulations, move to a single-tier examination board structure and the development of 'user-friendly' simplified programme/cohort reports to support the operation of assessment boards. Other enhancements noted by the audit team include the University's concern to disseminate examples of good practice, as set out in its assessment policy. The team considered that the University's assessment policies and regulations are robust and make an effective contribution to its management of academic standards.

21 Information from the University's Strategic Planning Service, commissioned research and the Web Focus Management Information Systems support the management of academic standards. The Department of Academic Quality and the Strategic Planning Service have worked together to review procedures and protocols pertaining to the use of management information-statistics and to review any actions required.

22 The introduction of programme summary 'data sets' that include information on entry tariffs, applications, enrolments, progression data, award and classification data, National Student Survey data and employment indicators is still work in progress, but are valuable in considering programme performance. The audit team concluded that the University made good use of management information-statistics and that confidence could reasonably be placed in the soundness of the University's current and likely future management of the standards of its awards.

Section 3: Institutional management of learning opportunities

23 The University's quality framework is reviewed and updated on a regular basis for implementation at appropriate levels. The departments and schools aim to meet discipline requirements; subject benchmarks; any necessary professional, statutory and regulatory body requirements; and review feedback from employers, to ensure the programmes are appropriate and current.

24 The regulatory compliance audit by the Grant Thornton business consultancy to identify all externally accredited courses and ensure that the requirements of professional bodies are complied with, was viewed as a feature of good practice by the audit team.

25 The Department of Academic Quality Guide 1: A guide to quality management at De Montfort University, outlines the University's approach to quality monitoring of programmes, which has been informed by the *Code of practice, Section 7: Programme design, approval, monitoring and review*. The overall focal point of responsibility for monitoring rests with the University's Department of Academic Quality. The key elements for programme approval monitoring and review are outlined in the previous section of this report 'Institutional management of academic standards'. Other related approval, monitoring and review components include the contributions of internal and external peers, the approach to the embodiment of e-learning, identification of implications for learning resources, professional statutory and regulatory bodies, codes of practice, National Student Survey, management information, and employer and student feedback.

26 Periodic review, validation and curriculum modification policies and procedures are documented, monitored and reviewed and were, in the opinion of the audit team, secure and robust. The team found that the University's arrangements for programme approval, monitoring and review made an effective contribution to its management of the quality of students' learning opportunities.

27 The University asserts that student feedback is afforded a high priority in its planning and actions. This feedback is analysed and discussed at appropriate points in the validation, monitoring and review processes. Assiduous attention is given to the National Student Survey results by programme teams, faculty and relevant central committees. The results have improved over the current past period and a recent Quality Assurance Procedures audit concluded that there was a considerable amount of good practice evident across the University. The overall satisfaction score from National Student Survey 2008 is 4.1 (up from 3.7 in 2006). The lowest University score is for assessment and feedback at 3.8 (up from 3.4 in 2006). Student satisfaction levels have risen with 2006 recording 70 per cent, 2007 recording 81 per cent, and 2008 at 83 per cent. The International Student Barometer Survey records an overall learning satisfaction for the University in 2008 of 89 per cent. If the National Student Survey scores are low (below 3.5) then action plans are required to address the issue and the results of feedback and actions to be taken are communicated to students. Other sources of student feedback include the university-wide survey, postgraduate annual monitoring reports and research experience survey, non-finalist student survey, module survey and collected views by the University on e-learning, information technology, the library and student placements. There is a widespread and systematic use of student feedback, but some difficulties have arisen with feedback from some groups such as distance-learning, work-based, and part-time students. The University is taking action to address this problem to ensure all communities contribute.

28 Students are formally represented on key university and faculty-level committees including programme management boards. Representatives are recruited through the Student's Union and there is a systematic training system in place. To complement training events, additional materials such as role profiles and guides are made available electronically to representatives. There is an accredited student representative scheme which aims to give formal recognition of the skills acquired as part of the representative role. The audit team found student representatives were

satisfied that training for the role had enabled them to carry out their responsibilities successfully. In meetings with the team, students confirmed that the University is attentive and responsive to student feedback.

29 In addition to other less formal means of representation, students and staff meet in staff-student consultative committees which are faculty-based and fall outside the academic committee structure. The University has monitored the operation of these committees and has concluded that there is some variability in their operations. This view is shared by students who have raised it as an area for improvement. The audit team found that the University has developed a good understanding of the strengths and weaknesses of the staff-student consultative committees and encourages it to continue its work in furtherance of their operational effectiveness, with particular regard to student report back mechanisms.

30 Students are nominated through the Student Union as full members of periodic review panels. While the University and students acknowledge some variability in the operation of the system, there is general agreement that the scheme is valuable. Improvement measures have been put into place and the audit team supports the University's commitment to the scheme as a potential tool for enhancement.

31 Overall, the audit team found that the University has well-developed structures for incorporating the student voice into its academic systems. It has effective and responsive systems for monitoring feedback systems, and has a proactive approach to their development and enhancement. The team concluded that the positive engagement with the student body and responsiveness of the institution to the student voice is a feature of good practice.

32 The University learning and teaching strategy, the e-learning strategy and the research strategy are key tools with respect to embedding research into learning and teaching. Each strategy outlines key principles linking research to the University's learning and teaching ethos. Role profiles of the academic staff give clear definitions of expectations for both research and teaching staff. The University's appraisal system is directly linked to role profiles and gives the opportunity for staff to reflect upon achievements for each element of the role. The University operates University and faculty research informed teaching awards. These are specifically designed to promote the process of linking research and scholarly activity to programme design, and the audit team found that members of staff considered the scheme to operate effectively. Overall, the team concluded that the University has effective systems in place to oversee, monitor and develop the effectiveness of links between scholarly activity and learning opportunities. It considered the benchmarking according to role profile, and the relationship between these and the achievement development and review process, to be particularly promising in terms of enhancement of the links between research and scholarly activity

33 The University has significant provision for distance and work-based learners. For example, recent approval has been given for an additional non-traditional mode of learning, the University Certificate of Professional Development scheme, which is targeted at widening access, continuous professional development and employer engagement. Central support for such programmes includes the University publication of a validation and programme design checklist relevant to work based learning and distance learning. There is also a framework for work-based learning in the Academic Quality Handbook. The handbook describes generic types of work-based learning and gives guidance in relation to credit, non-credit bearing placements, certification and awards. The handbook appendix sets out guidelines on accreditation and the use of the *Code of practice*. The e-learning strategy is also in part designed to support distance and work-based learners.

34 The audit team noted how the work-based learning provision was recently audited against the revised *Code of practice, Section 9: Work-based learning* precepts. The University will be conducting a further audit of work-based learning practice to inform the next edition of the University's Work-Based Learning Handbook. The team found that the student representatives on work-based and distance-learning programmes were satisfied with the academic provision and

learning support offered by the University. The team concluded that the University gives satisfactory consideration to the QAA precepts for programmes that involve other modes of study, that its oversight of programmes is robust and that it takes appropriate measures to support its students.

35 The University's admissions policy sets out its approach in this area. One of the key principles is that the University seeks to promote participation and completion in further and higher education while enhancing educational standards. It seeks to provide students with the best opportunities possible to take advantage of the learning process, free from discrimination or prejudice.

36 Other key features relating to admissions within the policy include the equal opportunities framework and appeals. The University has clear protocols for the accreditation of prior or experiential learning of applicants. The University offers special support for students from 'low participation' rate neighbourhoods and the disabled, to partake fully of the learning opportunities offered by the University.

37 Oversight of admissions is achieved through the Admissions Committee and the Academic Registrar is responsible for the overall implementation of related policies and procedures. The University delegates the implementation of the admissions policy to faculties to cater for subject-specific requirements. The audit team noted that there had been an internal audit of procedures under the oversight of the Admissions Committee. The team also saw evidence of a comprehensive training programme and noted that training is a requirement for all new members of staff who deal with admissions, with refresher and update programmes for existing staff.

38 Admissions responsibilities with respect to collaborative provision are outlined explicitly in University guides and the University makes provision for training in respect of partner institutions on an annual basis. Using its monitoring processes the University has established that the operation of the admission process in partner institutions is not consistent and the audit team saw evidence that the University is working to improve this aspect of its procedures.

39 In a meeting with students, the audit team learnt that students understood the admissions process and felt they had been well supported. Particular commendation was given for the support for international students. Overall, the team found that the procedures for admissions to undergraduate and taught postgraduate University programmes are explicit and robust. The team encourages the University to continue to enhance its procedures with respect to collaborative provision.

40 The control over large capital expenditure including estates rests with the Capital Planning Group and the overview of budgetary planning for departments is the responsibility of the Operations Review Group. Provision of and support for learning resources are primarily the responsibility of two central departments: library services, and information services and systems. Both departments are represented on the main academic committees of the University.

41 The library provides access to a full range of learning materials in both print and electronic form, study places, open access PC workstations, and a range of study environments. Many resources and services are available continuously throughout the year online, and the main Kimberlin library is open 24 hours per day during each term-time, working week. Special support arrangements are in place to meet the needs of distance and part-time learners. The University is prioritising use of new learning resources such as the learning zone and there has been significant investment in similar capital projects in recent years. The audit team heard that students considered the new learning zones to be a positive enhancement.

42 Information services and systems is responsible for the maintenance and development of the information technology infrastructure, including all associated student support resources and learning tools. They provide a single point of access to University core e-services. The audit team learnt that the University had engaged positively with students in the development of e-learning tools through focus groups and students expressed familiarity and satisfaction with the electronic

resources available to them. However students and staff indicated that the use made by staff of e-learning tools was not always consistent. The team noted the roles of the revised e-learning strategy, e-learning champions and the pathfinder project in respect of embedding e-learning into learning and teaching at the University. The team concluded that despite some variability in the take-up and application of e-learning resources, the University is taking reasonable proactive steps to embed emergent e-technologies into the curriculum.

43 University academic and executive committees maintain oversight of learning resources and evidence is gleaned from a range of internal and external sources such as user surveys, the National Student Survey data and internal programme and faculty monitoring procedures. Using its monitoring mechanisms, the University has concluded that student perceptions are generally very positive with respect to both the library and information services and systems, and it reports high satisfaction scores for learning resources in the National Student Survey. This satisfaction was confirmed to the audit team in meetings with student representatives and the learning zone was highly commended by both staff and students. The team concluded that the University has strong mechanisms for university-level strategic development and management of its learning resources and that the students are well supported in this respect.

44 The University has a multifocused approach to student support. A number of University policies articulate strategic curricular direction and priorities, including the University Learning Teaching and Assessment Strategy; the retention and progression policy; the student feedback policy; and the e-learning strategy. The audit team found evidence that the priorities articulated within strategies and policies are discussed and effectively promulgated across the various strata of the University.

45 Guidance and support is available to students through a range of services both at university and faculty levels. Mechanisms for publicising student support facilities include module and programme handbooks, the 'Ask Here' rapid response unit, and online resources such the 'Ask Gateway'.

46 The Student Services Department operating under a set of guiding principles offers a range of support mechanisms. It has three main branches: student support and transition; careers and employability; and facilities and directorate services. Employability is embedded within the University's Learning, Teaching and Assessment Strategy and the Student Services Department collaborates with faculties and university-level committees to provide expertise and inform the University Employability Strategy. The audit team found that students consider their courses as good preparation for employment and were satisfied with the careers advice and services available to them.

47 Student Services coordinates specific support for international students, students with disabilities and students with mental health-related issues. In each case there are designated officers within the department and the audit team found that the University employs systematic measures to embed and enhance support measures. Measures are also in place to develop support for ethnic minority groups. The library is the central point of academic support and integrates the Centre for Learning and Study Support, the Maths Learning Centre and information technology training. There is support for students to assess their skills base along with help for students who experience difficulty with academic writing. The library also provides specific help for students with disabilities.

48 Personal development planning is embedded within the personal tutor system and is optional for all students except those that require it for professional practice. It has recently been introduced for research degree students, again as an option. The audit team found that students were aware of both the personal tutor system and personal development planning and noted that take-up by students is variable. Recent additional support mechanisms include the appointment of joint programme leaders, personal tutors for students on joint courses and the institution of academic practice officers, so as to improve the consistency in dealings with academic offences.

49 The arrangements for, and responsibilities in, respect of student support for UK collaborative programmes are clearly defined in the University's operational guides and the audit team found that there are efficient systems in place to enable the appropriate level of liaison, advice and training.

50 Overall, the audit team found that the University provides a coherent and systematic framework for the support of students. There is evidence that systems enable initiatives to become embedded at all levels of the University and there is a clear volition to maximise the chances of student success and the overall student experience. The team found the integrated and structured support mechanisms underpinning the student experience to be a feature of good practice.

51 University staff support policies include the recruitment and selection policy and the staff development policy. The recruitment and selection policy governs the appointment of new staff and details the principles, process and management guidelines pertaining to appointments. The staff development policy contains comprehensive guidelines for academic and support staff including specific guidance for part-time academic staff.

52 The Staff Development Steering Group holds university-level strategic overview of staff induction, training, professional and leadership development priorities and their alignment with the University's objectives. The Staff Development Steering Group receives the annual staff development report, presented by the Director of Human Resources. This report details activity that is curriculum related; for example, the training of programme and academic leaders which is a strategic priority for 2008-09. Given the obvious synergy that exists between academic staff development and curricular initiatives, the audit team concluded that there was a case for Academic Board having greater input into the priorities for academic staff development, albeit, in line with the University's strategic plan. The team therefore considers it desirable that the University review whether Academic Board should play a greater part in determining the priorities for academic staff development.

53 The annual staff development report is the principle mechanism for evaluating activities carried out during the year. In terms of the provision itself, the audit team found that it is available from a number of sources including the Academic Professional Development Unit, faculties, the library, Department of Academic Quality and information services and systems. There is a planned linkage between staff development and the strategic priorities of the University. Similarly, staff development may also be linked with the University appraisal system Achievement Development and Review. Members of staff expressed broad satisfaction with the wide range of staff development opportunities available to them.

54 Achievement development and review is a reflective process that requires members of staff to consider their achievements in relation to their role profile. Training is given to both reviewers and reviewees. In a meeting with staff, the audit team learnt that the achievement development and review was considered to be a robust process that empowered the reviewee to reflect and contribute to appraisal more fully. Overall, the team found the aims of the achievement development and review process to be well considered and forward thinking. On the basis of the evidence provided, the team concluded that the scheme is proving to be a rigorous and successful example of staff appraisal systems.

55 The University has recently instigated a peer observation scheme with the aims of disseminating good practice and meeting staff development needs. The audit team saw evidence that the scheme is subject to systematic monitoring at university level and that consideration is being given to its further development and improving its implementation.

56 Other staff support and development mechanisms include the PGCert HE, required for all new academic staff with less than three years higher education teaching experience, the Teacher Fellow scheme and University and faculty research informed teaching awards. The latter are designed to enhance the linkage between research, scholarly activity and programme design.

With respect to partner institutions, the audit team saw evidence of a substantial and systematic network of opportunities provided by the University. It found evidence of significant take-up of this provision by members of staff in partner institutions.

57 Notwithstanding the recommendation above in relation to the oversight of academic staff development, and in consideration of all the evidence, the audit team concluded that the University has put into effect strong and effective staff support and development systems.

Section 4: Institutional approach to quality enhancement

58 The University's approach to quality enhancement is assurance-based, with measures to promote systematic enhancement being embedded within the quality management framework. This is described fully in the Department of Academic Quality Guide 1 which the audit team found to contain a consistent, ongoing focus on enhancement.

59 A key feature highlighted by the University is that priorities for enhancing student learning opportunities are primarily defined at faculty and departmental level, with the Department of Academic Quality Guide laying out the principles to be pursued. This is exemplified in the University's Learning, Teaching and Assessment Strategy, which includes a requirement for each faculty to decide upon a planned set of priorities each year that they wish to develop or investigate. Programme enhancement plans are a further example of this devolvement of responsibility for enhancement, this time at the departmental level. Programme enhancement plans require programme teams to identify annually the areas of focus they intend to concentrate on in the coming year. Faculty academic committees take an overview of all their programme enhancement plans each year and either confirm the suggested priorities or propose adjustments. Another aspect of the introduction of programme enhancement plans that was identified by the audit team is the positive reaction that academic staff have reportedly had towards their use. One contribution to this noted by the team is the very helpful and clear guidance on programme enhancement plans produced by the Department of Academic Quality. The team encourages the University to continue to develop the use of programme enhancement plans and considers that they have the potential to develop into an area of good practice when they have become more fully embedded in the annual monitoring programme review process, and an evaluation of their role and effectiveness has taken place.

60 At a wider level, the Quality Assurance Procedures Group carries out internal audits across the institution on selected themes. These both assess existing processes and identify points of good practice for wider dissemination. Recent areas that have been audited in this way include the periodic review process, the curriculum modification process, professional statutory and regulatory body protocols and student feedback mechanisms.

61 There are a number of further areas where the University was seen by the audit team to have taken deliberate steps to promote quality enhancement, including the restructuring of the University Learning and Teaching Committee, the maintenance of a 'good practice' library, the improved use of performance monitoring information and cross-university enhancement projects on formative assessment, e-learning and the retention of ethnic minority students.

Section 5: Collaborative arrangements

62 The previous Collaborative audit report in May 2006 found that broad confidence could be placed in the soundness of the University's present and likely future management of the quality of the academic standards of its awards made through collaborative arrangements; furthermore, that broad confidence can reasonably be placed in the present and likely future capacity of the University to satisfy itself that the learning opportunities offered to students through its collaborative arrangements are managed effectively and meet its requirements.

63 The 2006 Collaborative audit team identified a number of areas of good practice. These related to the enhancing of the experience of students and the facilitation of effective relationships with staff in partner organisations. The current audit team found that these areas of good practice have been further developed, particularly in local and regional collaboration.

64 The 2006 collaborative audit report contained four recommendations that the University was advised to consider. These concerned clarity regarding the relationship between faculty-based groups and the recently established International Strategic Development Committee, and clarity concerning the Committee's relationship with the University's executive and deliberative arrangements; clarity of role responsibilities in relation to the management of the quality and standards of collaborative provision; the appropriateness of its distinction between progression and articulation; and the use of journals in the monitoring process. It also reported that it was desirable that the University continues to examine ways of enhancing the participation of students in partner organisations in student representation activities and adopts a more rigorous approach to its systems for gathering end-of-module feedback.

65 The Briefing Paper makes little reference to the 2006 Collaborative audit but does state that measures to simplify arrangements for gaining feedback via partner institutions had been explored following the earlier QAA Collaborative provision audit. The current audit team gathered evidence that supported the conclusion that the University had responded to all recommendations in some measure, particularly for local and regional provision.

66 At the time of the current Institutional audit, the University had a large number of local and regional partnerships, mainly comprising validated courses and progression agreements, including Foundation Degrees, HNC/D's and honours degrees in a wide variety of subjects, and also has 10 international partnerships. The University considers that its UK collaborative provision is an important feature of its mission and commitment to the key values, particularly with respect to the wider regional community and widening participation. The University has developed a new UK collaborative partnerships framework and the central Department of Academic Quality Guide 10: A Guide to Managing Collaborative Provision at De Montfort University. A feature of good practice is the high level of integration and cooperation with local and regional collaborative partners.

67 The University had an International Strategy 2006-08 and is in the process of developing a new version. The University's strategic plan includes an intention that international partnerships become more focused. The number of international partnerships has been reduced with the aim of establishing a strong basis for the development of new partnerships which, at the time of the audit, were at differing stages of development.

68 The Department of Academic Quality recently reviewed the University's procedures for approval of new partner institutions and the process was amended and is detailed in the Department of Academic Quality Guide 10. Academic Board approves strategic key areas of focus and the granting of approval in principle to collaborate is via the Vice-Chancellor's Group which constitutes the executive process for new partnerships before the deliberative mechanisms are implemented. The University may wish to consider whether wider communication of this decision-making process, perhaps through recording of key points, might aid broader understanding of the University international collaboration strategy.

69 The responsibilities of the University and each partner institution are specified in a collaborative contract. Documentation draws on the *Code of practice* and is clear, simple and accessible in hard copy and on the University intranet for partner institutions. The Department of Academic Quality uses the same 'event' system that is employed for any validation. Faculties have responsibility for monitoring and managing collaborative provision, and documents provided including programme management board and external examiner reports, confirmed this to be a thorough and reflective process. Reports of partner institution approval and review and subsequent six-month follow-up activities are presented to the Academic Quality and Standards Committee. Following initial approval, there is systematic formal review of the collaborative

arrangements. Reports of these are presented to the Academic Quality and Standards Committee, and the Department for Academic Quality fulfils a monitoring role.

70 The University defines collaborative provision in a narrower way than the definition in the *Code of practice, Section 2: Collaborative provision and flexible and distributed learning (including e-learning)*. The University maintains a list of validated and franchised partnerships but the list does not include other arrangements, such as exchanges, articulation and joint awards. The audit team considered it advisable that the University revise its definition of collaborative partnerships in line with that in the *Code of practice, Section 2* and ensures that a comprehensive list of collaborative provision and partnerships is publicly available.

71 Collaborative provision is integrated fully into academic departments and faculties and is subject to the same processes as campus-based provision. External examining arrangements match those of the main campus provision. There is scope for the external examiner, annual monitoring and review reporting arrangements to make more explicit comment on collaborative provision.

72 Provision of learning resources in partner institutions is governed by the collaborative operational procedures, which set out clearly the respective responsibilities of each institution. The partner institution is the primary provider of essential resources, but students have full access to the resources and facilities of the University. The operational procedures ensure that there are sufficiently robust liaison and communication mechanisms to permit full consideration of resource related matters at key points such as validations. The audit team concluded that the University's arrangements for the management of learning resources in respect of collaborative provision are appropriate.

73 The University has undertaken considerable development to strengthen its local and regional partnerships and implement systems to strengthen oversight. The mechanisms that ensure operational oversight at faculty level show evidence of working well. There are also effective mechanisms in place for the approval of new partnerships, good liaison and examination arrangements and evidence of good staff support and development in partner institutions. The quality of the student learning experience in collaborative provision might be enhanced further by reflection on whether key academic committees are effective in maintaining oversight of its international collaboration in particular. This would ensure all liaison arrangements are implemented systematically and that the public register of collaborative provision provides an accurate record of all collaborative provision covered by the *Code of practice*.

74 The University has made considerable efforts to put in place systems which ensure that standards of awards offered through collaborative arrangements are secure and equivalent to those offered directly by the University

Section 6: Institutional arrangements for postgraduate research students

75 Quality management for research degree programmes is the responsibility of the Higher Degrees Committee subject to the approval of Academic Board. In turn, the Higher Degrees Committee uses its authority to delegate some operational processes to faculty research degree committees. There are student representatives on the central committees.

76 Research degree programmes are managed through liaison between the central research degrees office and faculty postgraduate and research offices. The research degrees office coordinates research student quality assurance and the research student training programme, which combines generic skills training that is provided centrally with discipline specific skills training provided within each faculty.

77 The University issues a Code of Practice for research degree programmes readily available in both hard copy and on the website. The audit team found this Code of Practice to be, in the main, clear and comprehensive. In addition to this, each faculty publishes its own handbook for postgraduate research students.

78 The audit team examined a wide range of documents for evidence of systematic monitoring and analysis of the performance of research degree programmes. In the absence of any clear statements on performance indicators or targets, associated with the lack of transparent data on completion rates within and across the institution, the team formed the view that currently the institution was failing to monitor adequately the performance of its research degree programmes. Combined with the low completion rates reported by the University, this led the team to judge that academic standards and the quality of learning opportunities relating to research degree programmes are potentially at risk. The team advises the University to introduce and fully operate procedures for the rigorous monitoring of research degree programmes against appropriate indicators and targets.

79 All admission decisions for research students involve the judgement of at least two academic staff with relevant expertise. All selectors are trained during the mandatory Certificate in Research Supervision course. The University's standard minimum entry qualifications for the MPhil/PhD degree programme include the possession of a 'good' UK honours degree or equivalent. Applicants without such qualifications are considered for registration on the basis of additional evidence concerning the applicant's academic ability and fitness to conduct research. The audit team noted that a number of students with non-standard qualifications had been admitted who, in the team's view, were unlikely to have had sufficient opportunity to have gained the requisite experience that would normally be considered necessary to undertake a research degree programme successfully. The team advises the University to assure itself that it is fully operating and delivering its own procedures relating to selection and admissions which, as given, are in alignment with the *Code of practice, Section 1: Postgraduates research programmes*.

80 All supervisors are required to attend and complete the Certificate in Research Supervision course and subsequently to attend refresher courses annually. This requirement was cited as an example of good practice in the QAA Review of research degree programmes held in July 2006. The normal maximum load for supervisors is six research students, although higher loads of up to 15 students and more can be approved exceptionally. However, the audit team saw evidence of this exceptional supervisory load being exceeded and the team advises the University to assure itself that it is fully operating and delivering its own procedures relating to supervision. The team would also advise the University to consider whether a supervisory load of 15 students, as allowed by current University regulations, is too high.

81 The progress of all research students is monitored on a regular basis. 'Record of discussion' forms are used to record formally the contents of supervision meetings and the University makes an annual audit of these. The audit team saw evidence that low return rates of these forms are a significant and ongoing problem across the University. In addition, each student is subject to an annual review panel meeting. Also the student and their first supervisor are expected to complete and return an annual monitoring questionnaire relating to progress. Each faculty research office produces an annual summary of these reports for central monitoring. Again, the University reports in its Briefing Paper that the response rate from both supervisors and students has been disappointing. The team suggests the University consider how they might improve all aspects of the operation of the monitoring process.

82 All research students are expected to participate throughout their studies in various generic skills training courses run by the research degrees office, as well as in discipline-specific courses provided by their faculty or research centre. The audit team found the range of training courses to be comprehensive and the organisation of training by the research degrees office was exemplary. However, the team noted that the University Code of Practice states that the training programme is not currently compulsory for students based overseas and registered under its 'six weeks rule'. The team advises the University to ensure all research students undergo all parts of the training required to undertake their research programme successfully.

83 The assessment of research degrees involves two examiners, including at least one external examiner independent of the University and any collaborating establishment, and an internal examiner who is a member of the staff of the University. The audit team noted that in special circumstances the student's supervisor is allowed to act as internal examiner, in which case, a third, additional examiner is also appointed. This regulation is out of alignment with the *Code of practice, Section 1: Postgraduate research programmes* and the team advises the University to amend its regulations accordingly, and also to ensure that they are consistent and unambiguous.

Section 7: Published information

84 The University publishes a wide range of material for the use of staff, current and prospective students and partners both in hard copy and via the website, the myDMU portal and the virtual learning environment. Published material and the evidence in documents of the protocols and procedures employed by the University to maintain the quality of its published information, both in terms of accuracy and as a reflection of what is distinctive about the University, demonstrate that the mechanisms to ensure its accuracy, usefulness and currency are robust and effective. There is a process by which the University manages collaborative partner publications. Evidence from students confirmed that the material that they received, both prior to admission and throughout their programmes of study, was comprehensive and provided the information needed to understand the requirements to qualify for the award for which they were registered. Students are involved in ensuring the accuracy of information through surveys, focus groups and the new entrants study. The University conversion strategy helps match students to the appropriate programme.

85 The University is making the information detailed and suggested in Annex F of HEFCE 06/45, *Review of the Quality Assurance Framework: Phase two outcomes*, publicly available and contributes appropriate data for compilation on the Unistats website. The University is also undertaking a thorough review of the main website, informed by comment from all stakeholders. The audit team found that reliance could reasonably be placed on the accuracy and completeness of the information that the University publishes about the quality of its educational provision and the standards of its awards.

Section 8: Features of good practice and recommendations

Features of good practice

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

- the rigorous approach taken by the University to maintain an institutional overview of its professional body engagements (paragraph 24)
- the positive engagement of the University with the student body and the responsiveness of the institution to the student voice (paragraph 31)
- the integrated and structured student support mechanisms to underpin the student experience (paragraph 50)
- the high level of integration and cooperation with local and regional collaborative partners (paragraph 66).

Recommendations for action

87 Recommendations for action that is advisable:

- the University puts in place and fully operates procedures for the rigorous monitoring of the success of postgraduate research programmes against appropriate internal and/or external indicators and targets (paragraph 78)

- the University puts in place and assures itself that it fully operates and delivers its procedures for postgraduate research programmes that meet the expectations of the precepts of the *Code of practice, Section 1: Postgraduate research programmes* relating to the selection, admission and induction of students, supervision, assessment and the development of research and other skills (paragraphs 79, 80, 82, 83)
- the University revises its description of collaborative provision to reflect the *Code of practice Section 2: Collaborative provision and flexible and distributed learning (including e-learning)*, and produce a comprehensive list of all collaborative relationships that is publicly available (paragraphs 70, 73).

88 Recommendations for action that is desirable:

- the University review whether Academic Board should play a greater part in determining the priorities for academic staff development (paragraph 52)
- the University ensures that there is University oversight of its international collaborative provision and places increased focus upon this within annual monitoring and review procedures (paragraphs 68, 73).

Appendix

De Montfort University's response to the Institutional audit report

De Montfort University welcomes the findings of this Institutional audit and it appreciates the hard work undertaken by the audit team. The University takes great satisfaction in the recognition given by the audit team to the identified good practice. These four areas; professional body engagement, responsiveness to the student voice, student support and regional collaboration are fundamental to the University's core business, and it is deeply gratifying to have these achievements recognised. The audit team's assessment of the institutional approach to quality enhancement is also well judged and welcome, as it gives due recognition to the importance of promoting enhancement in the University's processes.

The University accepts the five recommendations in the report, and they will be addressed in a timely way. Whilst the University remains confident in the quality of experience of its postgraduate research students, it notes that there is scope to improve research programme monitoring and operational procedures. Measures are being debated and will be implemented. Work is also underway to review the description of collaborative provision and update the collaborative register. The remit of Academic Board in determining priorities for staff development is under discussion. Finally, arrangements for the monitoring of overseas collaborative provision will be reviewed and strengthened.

In summary, the institution values the audit process, welcomes the outcomes and views this as an opportunity to further enhance the experience of its students.

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