



# **Institutional audit**

**University of Cumbria**

**April 2011**

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## Preface

The Quality Assurance Agency for Higher Education's (QAA's) 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 the assurance of the quality of learning opportunities provided for students. It also operates under contract to the Higher Education Funding Council for 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 then Department for Education 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 to 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 (UK's) approach to external quality assurance. At the centre of the process is an emphasis on students and their learning.

The aim of the 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 on 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 the 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.

## Summary

### Introduction

A team of auditors from the Quality Assurance Agency for Higher Education (QAA) visited the University of Cumbria (the University) from 4 to 8 April 2011 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 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 the University of Cumbria 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 audit team concluded that the University had systems for the identification of enhancement opportunities, and found examples of potential good practice in several areas, but that there were weaknesses in the systems for the dissemination of that practice. In the view of the team, it would be desirable for the institution to fully realise the potential of enhancement opportunities at all levels by developing a more systematic approach to their identification, dissemination and implementation.

### Postgraduate research students

The audit team considered that the University's arrangements, on behalf of Lancaster University as the awarding institution, formed an effective framework for the management of the academic standards of the research awards in question and the quality of learning opportunities available to its research students. In general, those arrangements are aligned with the *Code of practice, Section 1: Postgraduate research programmes*, although the team considers it desirable that the University expedite its action in response to the recommendation of the special review to introduce benchmarking and performance measurements.

## Published information

Taking into account its recommendation (see below), the audit team found that reliance **can** reasonably be placed on the accuracy and completeness of the information the University publishes about the quality of its educational provision and the standards of its awards.

## Recommendations for action

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

The team advises the University to:

- improve the oversight and management of the quality of student learning opportunities and academic standards at all levels of the University to achieve coherence and consistency of practice
- devise, implement and embed an overarching and integrated approach to the communication of accurate, comprehensive and reliable information to prospective and current students
- ensure the effectiveness of planned actions to resolve ongoing capacity issues related to the timely securing of sufficient Education placements
- ensure compliance with HEFCE 2006/45 in making programme specifications publicly available
- engage fully with the precepts relating to the content of the collaborative provision register and information provided to students in the *Code of practice, Section 2: Collaborative provision and flexible and distributed learning (including e-learning)*.

It would be desirable for the University to:

- operate the minor change process in a consistent and timely manner in accordance with the University's published procedure
- develop and implement a procedure on programme closure
- achieve consistency in the operation of the University's processes for managing feedback from students
- strengthen the institutional management of blended learning to achieve the University's strategic objective to provide high-quality distributed learning
- share external examiner reports with student representatives, including those studying through collaborative arrangements
- fully realise the potential of enhancement opportunities at all levels by developing a more systematic approach to their identification, dissemination and implementation
- expedite the recommendation of the QAA special review of research degree programmes (2009) to introduce benchmarking and performance measurement in monitoring the performance of postgraduate research students.

## 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 for the assurance of academic quality and standards in higher education (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 found that the University generally takes due account of the elements of the Academic Infrastructure in its management of academic standards and the quality of learning opportunities available to students. This report will refer in detail to sections one, two and seven of the *Code of practice*.

## Report

1 An institutional audit of the University of Cumbria (the University) was undertaken during the week commencing 4 April 2011. The purpose of the audit was to provide public information on the University's management of the academic standards of the awards that it delivers and of the quality of the learning opportunities available to students.

2 The audit team comprised Dr Sally Bentley, Dr Terence Clifford-Amos, Mr Philip Lloyd, Mr Laurence McNaughton and Mr Alan Weale, auditors, and Ms Helen Uglow, audit secretary. The audit was coordinated for QAA by Ms Fiona Crozier, Assistant Director, Research, Development and Partnerships Group.

### Section 1: Introduction and background

3 The University was formed in 2007 from the amalgamation of St Martin's College, Cumbria Institute of the Arts and the Cumbrian assets of the University of Central Lancashire. Its main campuses are in Carlisle, Lancaster and Penrith (Newton Rigg), Ambleside and London (Tower Hamlets). It has just over 10,000 students, of which 7,471 are full-time. Undergraduate, including Foundation Degree, students make up 76 per cent of the student body, with postgraduate research students making up less than one per cent of that body. The University's mission is to, '...provide excellent and accessible higher education which enhances the lives of individuals and fosters the development of the communities to which we belong.' In line with the aspirations of the Harris Report, the University is focused on the ambitious development of specialist provision, with strong national and regional recruitment, but also on establishing a relevant and accessible offer to students from across Cumbria and the wider region. It is a university of and for Cumbria. Focused on developing strong partnerships and enhancing widening participation, the University aims to combine the campus-focused activity at a number of locations, with innovative learning opportunities at 'Learning Gateway' sites and online. Furthermore, the University maintains, 'close working relationships with key stakeholders in the professional disciplines', and states that this is central to the University's activity in supporting Cumbria's workforce development.

4 The University has gone through a period of significant change since the last audit of one of the predecessor institutions and since the last mid-cycle follow-up in 2008. The present audit team found that the University had responded positively to the recommendations contained in that mid-cycle follow-up report, recognising that it had been described as an institution still in transition following wide-ranging reviews of its governance and strategic planning, and the comprehensive reorganisation of its management, organisation, executive and deliberative structures in 2009-10.

5 The University's quality management framework is described in the Quality Handbook produced by the Academic Quality and Standards Service. The Vice-Chancellor as chief executive is supported by a Senior Management Team. A more broadly based University Management Team includes associate deans and heads of central services. A revised Strategic Plan and supporting strategies are currently under development.

6 Overall responsibility for the academic standards of taught awards and the quality of student learning opportunities rests with the Academic Board. The University does not have research degree awarding powers and delivers research degrees on behalf of Lancaster University. The Board delegates the operational oversight of the management of academic standards, quality and enhancement to the Learning, Teaching and Quality Enhancement Committee and the Research and Enterprise Committee. Various panels and groups report to these committees, including the Academic Collaboration and Partnership Sub-Committee,



the External Examiners Panel and the Graduate School Advisory Group. Faculty committees report directly to their central counterpart committee.

7 Structural reorganisation rationalised academic provision into three faculties, each managed by an Executive Dean who appoints associate deans with specific responsibilities. Programmes and their modules are gathered into subject-based Quality Groups. Programme Quality Committees were established across all faculties in 2010-11. A review of the new academic structure is expected to commence in April 2011. The University's framework seeks to balance institutional oversight and responsibility for academic standards with the need to ensure local responsibility for standards at faculty level. Many aspects of the University's framework are so recently introduced that there are insufficient outcomes upon which to base a judgement of their effectiveness, so the next mid-cycle follow-up will wish to consider this. Procedures for the management of the academic standards of awards appear to be generally sound and are developing towards the rigour and robustness the University has set out to achieve, although inconsistencies in the quality of learning opportunities across the University have yet to be fully resolved. The audit team considers it advisable for the University to improve the oversight and management of the quality of student learning opportunities and academic standards at all levels of the University to achieve coherence and consistency of practice (see also paragraphs 17, 38 and 42).

## **Section 2: Institutional management of academic standards**

8 The University's Academic Board is the governing committee in all matters relating to the regulation of academic work including research. It governs the management of academic standards through a deliberative committee structure, which is supported by a central Academic Quality and Standards Service. The newly established Learning, Teaching and Quality Enhancement Committee, which has operational oversight of academic standards and quality enhancement, is complemented by Faculty Learning, Teaching and Quality Enhancement Committees. These supply the Learning, Teaching and Quality Enhancement Committee with reports and data from programmes, sustaining the management of quality and standards at faculty level.

9 Operational responsibility for maintaining the University's quality assurance processes and procedures lies with the Academic Quality and Standards Service, which is responsible for regulations, policies and procedures, information management supporting quality processes and collaborative provision. In addition, the Director of Research and Graduate Studies comes under the Academic Quality and Standards Service.

10 There are a number of other structures that relate to the Academic Quality and Standards Service. Within each faculty there are clusters of Quality Groups. The Quality Groups function as small departments and are responsible for modules and programmes in relation to quality and standards, validation and evaluation. Programme leaders are tasked with delivery and oversight of the student experience. Associate deans have significant inputs into the quality process, liaising with Quality Groups across and within a faculty, and are well positioned to tackle any overarching themes and issues that may arise at programme level. There is a further education strategy and planning committee, a further education quality and standards sub-committee, and a further education sub-committee on learning, teaching and assessment. The University's management of academic standards is supported by SITS, a system managed by the Student and Management Information Service, which takes responsibility for the initialising and maintaining of student records. The audit team found the descriptive and regulatory documents and arrangements comprehensive, clear and appropriate for an institution which regards itself as a distributed university.

11 Programme approval begins with a peer review scrutiny process, which is intended to ensure that academic standards, regulations and the University's threshold criteria are met and that resources are available to ensure delivery. The audit team found that the entire two-stage validation process met the requirements set out in the *Code of practice, Section 7: Programme design, approval, monitoring and review*. The second stage, full validation, comprises a panel whose membership includes internal and external representation and, where appropriate, persons of standing from industry and professional, statutory and regulatory bodies. Students, both past and present, have input roles. Particular conditions may be required before the validation can be formally approved and enhancements may also be recommended. A streamlined validation process is operable for minor awards of 60 credits or less, and there is a procedure for effecting minor changes (see paragraph 25), which also operates for new stand-alone modules. Collaborative validations require experts, or those with considerable experience in partnership programmes. The team was able to confirm that programme approval panels and arrangements functioned appropriately, making effective use of external expertise in securing the academic standards of new programmes.

12 There is a continuous monitoring cycle, which includes contributions by staff, students, partners and a range of external representatives. These routine informal processes are complemented by the formal Annual Evaluatory Review. Evidence is drawn from a range of oral and documentary sources, which form a report drafted by programme leaders for submission to Quality Groups, who write subject-level Annual Evaluatory Reviews for the Faculty Learning, Teaching and Quality Enhancement Committees. Faculty-level Annual Evaluatory Reviews are submitted to Faculty Learning, Teaching and Quality Enhancement Committees for consideration by the Learning, Teaching and Quality Enhancement Committee, and finally a summary of key issues is received by the Academic Board. Sources include a range of data including review information, external examiner reports and performance indicators pertaining to student achievement, student commentaries and overall student satisfaction. There is a careful monitoring of action planning by Faculty Learning, Teaching and Quality Enhancement Committees and by Quality Groups. In future, supportive statistical information will be available in September, to include all resit data.

13 The University's periodic review of programmes, also termed revalidation, operates as a five-year cycle, enabling panels to make recommendations for reapproval. The aims of the periodic review are to ensure that learning opportunities and outcomes, and the currency and validity of the curriculum, meet the standards required by the named award. Students also attend the periodic reviews, although the audit team learnt that attendance was irregular. An annual synopsis of periodic reviews is completed by the Academic Quality and Standards Service and presented to the Learning, Teaching and Quality Enhancement Committee to enable exploration of any overarching themes and features of good practice. Periodic reviews seen by the team were satisfactory in their review detail, although the team observed that some periodic review events and contributions to them did not appear to be compulsory. The team encourages the University in its intention to implement more holistic methods of periodic review at discipline level.

14 The University stated in its Briefing Paper that external examiners are key to assuring the academic standards of its awards. There is a sound system for appointments. Nominations are ultimately overseen by the Chair of the Faculty Learning, Teaching and Quality Enhancement Committee and the respective deans. The criteria for appointment are informed by the *Code of practice, Section 4: External examining*, and the external examiners' panel has the power to vary agreed duties and, in special circumstances, to extend appointments. Successful applicants are invited to attend an induction day and a scrupulously detailed external examiners' handbook is provided. A standard template is issued online for the completion of reports, which are duly considered by faculties, the head of the Academic Quality and Standards Service and executive deans, with an annual

summary report being submitted to the Learning, Teaching and Quality Enhancement Committee. An ongoing dialogue between external examiners and programme leaders is complemented by external examiner attendance at the two-tier assessment boards. The audit team read a range of external examiners' reports and was able to trace how these were being dealt with by the University. Not all responses to these reports were fully commented on in detail, and the arrangements for students to view the reports were not wholly transparent or convincing to the team. However, the team was convinced of the strong and scrupulous use of external examiners in the assurance of academic standards at the University.

15 External examiners 'play an important role' in assuring the University's 'alignment with the academic infrastructure', being asked to comment on programme alignment with subject benchmarks, programme specifications, *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ) published by QAA and professional, statutory and regulatory body requirements. The University's programme specification template was tracked across several programmes during the audit visit and the audit team's examination of a range of these specifications concluded that they were comprehensive and sound. Through the programme specification template, which details qualification and level descriptors, in line with the FHEQ, the team was able to discern how the FHEQ and benchmarking were being applied to the teaching and learning process, although it would advise the University to ensure compliance with HEFCE 2006/45: *Review of the Quality Assurance Framework: Phase two outcomes* in making programme specifications publicly available. Guidance is given in respect of the FHEQ, and this, together with benchmarking and the relevant sections of the *Code of practice*, is essential to the validation process. The team was satisfied that the University's procedures concerning the Academic Infrastructure were competent and confident.

16 In its Briefing Paper the University detailed a number of external reference points, including participation in QAA's Special Interest Group in flexible and distributed learning, QAA's Integrated quality and enhancement review (IQER) process and a range of professional, statutory and regulatory body negotiations and requirements. That the University is able to demonstrate alignment with the Academic Infrastructure provides a mature basis towards recognising and incorporating appropriate sections of the *Standards and Guidelines for Quality Assurance in the European Higher Education Area*.

17 University policy on assessment is closely guided by its own Guidelines for Good Assessment Practice in Higher Education. In its deliberations the audit team found this document very helpful, although it was less satisfied with progress on the University achieving consistent assessment practice across its programmes, a subject highlighted in the mid-cycle follow-up report of 2008. There is currently a Task and Finish Group working on aspects of assessment practice such as timing of feedback on coursework and anonymous marking. Student responses varied in their views on assessment, with not insignificant numbers stating that they were unaware or unsure of assessment criteria, commenting too that some tutors did not necessarily adhere to the stated practice and policies. Further student views expressed to the team reported assessment feedback as being very similar in construction and brief. The University operates an anonymous marking system but in respect of written examinations only. It also operates a two-tier assessment board system (Module Assessment Boards and University Assessment Boards). The audit team found the assessment procedure as a whole to be rigorous and strong.

18 The University's Academic Regulations are sound and clearly set out. A number of changes had been made in 2009 and further changes were required for undergraduate regulations for 2010, which the University stated 'would not disadvantage students'. There is discretion for examination boards to accommodate the new weighted mean for honours degree classification, and, among other changes, it was explained with good reasoning why

it was inadvisable for there to be simultaneous coordination across faculties of the new arrangements pertaining to summative assessments. While there were briefings for staff in September 2010 on these recent changes to regulations at Lancaster, Fusehill St in Carlisle and Newton Rigg, the audit team did not see evidence to suggest that similar formal processes of communication and briefing had been made available to students.

19 The University's Student and Management Information Service operates across the University, and the Student Data Management Unit works in three areas across the Service: SITS, assessment and business process review, and data quality. The student written submission noted problems with data concerning student demographics, but students interviewed by the audit team were satisfied with the University's interpretation in this area. An annual Student Recruitment, Retention and Achievement Report compiled by the Student Data Management Unit and presented to the Learning, Teaching and Quality Enhancement Committee, which contains data on key trends in student registration, progression and achievement data and variables on ethnicity, age, campus base and disability, is a principal source for informing Annual Evaluatory Reviews, other reports, agreements, reviews and also prospective trends, required by the Vice-Chancellor's Office. The team found the report for 2009-10 particularly detailed and carefully considered and encourages a stronger application of this annual data in Annual Evaluatory Reviews.

20 The audit team found evidence to confirm that the University's management of academic standards is developing towards the rigour and robustness the University has set out to achieve. University regulations and policies and guidance documentation relate to the components upon which the Academic Infrastructure is built. External input relating to the processes of approval and review and use of management information contribute strongly to maintenance of the academic standards of awards. The processes for external examining are transparent and effective, while external examiners' contributions to summative assessments are careful and conscientious. More attention is needed in areas of communication with students, in student assessment and in developing a more mandatory culture for all those involved in periodic reviews. In general, most of the operational practices are appropriate for and contribute to the University's management of the standards of its awards.

### **Section 3: Institutional management of learning opportunities**

21 The University reviews the relationship between its procedures and the *Code of practice* as and when revisions or additions to it are made. Detailed and thorough mapping of University policies and procedures against relevant sections of the *Code of practice* is undertaken and effectively reported through the University's committee structure.

22 The audit team confirmed the University's view that institutional policies and processes have been developed in line with the requirements of the *Code of practice* and subject benchmark aspects of the Academic Infrastructure and contribute to the management of the quality of learning opportunities.

23 The Academic Board has ultimate oversight of student learning opportunities, but operationally this is delegated to be managed by the Learning, Teaching and Quality Enhancement Committee, which manages the development, implementation and review of the Learning, Teaching and Assessment strategy. At the time of the audit, the Centre for the Development and Enhancement of Professional Practice was engaged in revising the Learning, Teaching and Assessment Strategy in order to ensure its alignment with the new University Strategic Plan.

24 Revised processes for approval, monitoring and review of programmes were introduced in 2009-10 and are as described in Section 2 above. Training is provided jointly by the Centre for the Development and Enhancement of Professional Practice and the Academic Quality and Standards Service for those participating as panel members and threshold criteria for use by validation panels direct them to consider matters related to student learning opportunities, including the learning and teaching strategy for the programme, admissions criteria, student support and guidance, and learning resources. Reports of validation and revalidation events seen by the audit team confirmed that the threshold criteria were being effectively addressed in the course approval and revalidation processes. Feedback from students on the quality of their learning experience is incorporated into the evidence considered by validation and review panels.

25 Minor changes can be made to programmes or modules in accordance with the University's published Guide to Minor Change Process. The published process states that consideration of a minor change should be completed and approved no later than three weeks before the start date of affected modules. In meetings with students, the audit team was given several examples of changes to modules being introduced after the module had been launched. Students indicated that the late notification of changes had caused some confusion about precise expectations for assessment. In order that students can be kept fully and accurately informed of expectations regarding their learning, it is desirable for the University to operate the minor change process in a consistent and timely manner in accordance with its published procedure.

26 The University uses a process of Annual Evaluatory Review to fulfil its annual monitoring function, and this requires the production of Annual Evaluatory Reviews at Programme, Quality Group and Faculty levels. Each review is required to comment on last year's action plan and to set out an action plan for the forthcoming year. Annual Evaluatory Reviews sampled by the audit team generally showed careful and reflective consideration of student learning opportunities by course teams and action plans were appropriately constructed with the aim of improving the student learning experience. The team agreed with the University's view that the monitoring process provides the University with an effective means of providing assurance that academic standards and quality are appropriately monitored and maintained.

27 The periodic review of programmes takes place through a process of revalidation, which, in most respects, is identical to that of validation, with the exception of the consideration of a Critical Review document that is prepared by course teams prior to the revalidation. Examples of Critical Reviews were made available to the audit team and these were found to be very detailed, thorough and appropriately self-critical. Reports of revalidation events seen by the team provided evidence that University validation panels were scrupulous in their consideration of issues pertaining to the student learning experience.

28 The University's Briefing Paper describes a 'period of intense change' in which the University is focused on the continuous development of its academic offer. To support this development, the University has introduced a new Academic Planning Cycle Process that takes into account matters of programme feasibility. Taking into account the fact that such a process could lead to the withdrawal or closure of programmes, the University was unable to provide evidence that it had in place a specific process for managing the closure of programmes and for protecting and securing the learning opportunities of students enrolled on such programmes. Consequently, the audit team formed the view that it is desirable that the University develop and implement a procedure on programme closure.

29 The audit team concluded that, overall, the University has effective procedures for ensuring the quality of students' learning opportunities through approval, monitoring and review.

30 The Briefing Paper stated that student feedback is regarded as an important component of the University's quality assurance processes. Student feedback is obtained at module and programme level, including through module and programme evaluation questionnaires, Programme Quality Committee meetings, and surveys focusing on specific services such as Learning, Information and Student Services. Revised and updated Guidelines and Processes for Student Evaluative Feedback were introduced in June 2010. Staff met by the audit team demonstrated a sound understanding of their responsibilities with regard to obtaining student feedback and were fully conversant with the University guidelines.

31 Module questionnaires consist of 11 questions specified by the University, with the facility for module leaders to add module-specific questions. A template for the programme-level questionnaire has similarly been agreed and is based upon the National Student Survey questions. At the time of the audit, the programme questionnaires had not yet been distributed as they had only recently been introduced. Both the student written submission and students met by the audit team confirmed that opportunities to complete module and programme evaluations are provided as set out in the University guidelines.

32 The student written submission indicated that the process of closing the quality loop on student feedback was not consistent and often not timely. Students whom the audit team met also endorsed this view. The student written submission indicated that some module staff use a section of the module guide to inform the next year's students about what has been done in response to the previous year's students' feedback, in order to show that student feedback did make a difference. However, this is not consistent practice across all modules and is not a requirement of the university-provided template for Module Guides. The University may wish to consider the usefulness of incorporating this information as part of its Module Guide template.

33 Programme Quality Committees, the membership of which includes student representatives, meet two to three times a year. Student representatives were present at meetings and there was a specific opportunity on the agenda for students to raise issues and to receive feedback on actions taken to address issues they had raised at previous meetings. The audit team concluded that Programme Quality Committees were being used effectively to obtain feedback from students and that feedback was being reflected in the Annual Evaluatory Review process.

34 National Student Survey results are discussed at a range of committees at both the faculty and university levels. The audit team saw evidence of such results under discussion at Faculty and University Learning, Teaching and Quality Enhancement Committees, as well as at the Academic Board. The minutes of the Learning, Teaching and Quality Enhancement Committee and Academic Board demonstrate that the survey, its results and subsequent actions are being discussed with scrupulous attention at the most senior levels of the University. In considering the National Student Survey outcomes, the University acknowledges that specific and clearly communicated actions are required to address the concerns of students, particularly those related to organisation and management. In order to improve students' understanding of how the University is responding to their feedback, a communication campaign has been implemented called 'You said...We did'. While students welcomed this initiative, the student written submission indicates, and students met by the team confirmed, that the University's approach to closing the 'feedback loop' is not yet fully effective. It is, therefore, desirable that the University should achieve consistency in the operation of its processes for managing feedback from students.

35 The audit team found that, although the University made effective use of student feedback to assure and enhance the quality of learning opportunities, action should be taken to further improve the communication to students of the responses it makes to their feedback.

36 The Students' Union submitted a detailed written submission and students who met the audit team said it was a broadly accurate portrayal of the student experience, identifying issues of relevance to the current student body. There is a comprehensive system for student representation on committees and groups. Students also contribute to staff development conferences and are active in working with their peers to help them understand rules and regulations.

37 The University and the Students' Union acknowledge that recruiting, training and monitoring the involvement of such a diverse and dispersed community of students has been challenging and they are working together to achieve more consistent representation through the employment of a member of staff, greater use of the virtual learning environment, liaison over training and joint campaigns to improve consultation and communication. The University acknowledges the need to review the training and support of student representatives for collaborative programmes.

38 Overall, the audit team shares the University's view that there is a secure system of student representation in place for full-time students and those studying on the main campuses. The University has recognised the need to improve representation for part-time and geographically remote learners and is already working with the Students' Union to address this.

39 The University is committed to ensuring that teaching is underpinned by subject and pedagogical research, although it has identified research, scholarship and enterprise as needing a more structured and coordinated approach. A number of improvements are currently being developed, including a strengthening of the performance management of research through appraisal, a new database for research outputs, including those related to higher education teaching, learning and assessment, new Personal Scholarship Plans and individual staff webpages. Sabbaticals, the funding of staff doctorates, Reader and Professorship schemes, a journal and project funding all continue. There are plans to support research only in 'niche' areas, but the above strategies will ensure that all staff undertake scholarly activity, which can then inform the curriculum, as well as teaching and learning strategies.

40 There is clear advice on research-informed teaching for those involved in course development, but validation reports seen by the audit team are variable in their consideration of how staff research informs the curriculum. Criteria for the appointment of staff do not require teaching staff to have or be willing to obtain a higher degree, although it is a desirable criterion for appointment. It is also an essential criterion that for all academic appointments the applicant should have met standard 2 of the UK Professional Standards Framework or be willing to achieve this within three years of appointment.

41 Overall, the University is continuing to strengthen the range of systems it has in place to ensure that research and scholarly activity informs student learning opportunities, although the issue could helpfully receive greater focus during validation and staff appointment processes.

42 A distinctive characteristic of the University is its distributed nature, due to the diverse and disparate student body with its high proportion of part-time and mature students, as well as its multi-campus structure arising from its heritage institutions. The University has

been rapidly developing technology-enhanced learning through investment in the Learning Gateways, the introduction of a range of software packages, funded projects, staff development activities organised through the Centre for the Development and Enhancement of Professional Practice and discussion as part of validation processes. The audit team agrees with the University and its staff and students that there has already been much good work undertaken in this area, but there remained some confusion over the function of the new Learning Gateways and the nature of distributed learning at the University, as well as a significantly variable level of engagement with blended learning strategies at programme level. Given the ambitious and key nature of blended and distributed learning to the University's future, the team recommends as desirable that the University strengthen its management of blended learning to consistently achieve its strategic objective to provide high-quality distributed learning and realise the potential of the investment and good work already underway.

43 Placements are characteristic of many of the University's programmes, not only in the faculties of Education and Health and Wellbeing but also in the faculty of Arts, Business and Science. The University has a wealth of experience in this area and staff and students spoke positively of the way in which it enhances student employability. However, partly because of the University's success with its programmes and partly because of the rural nature of the region, there is an acknowledged and ongoing problem with the capacity to provide placements on Education programmes and, consequently, with their timely organisation. The University is active in trying to address these issues, but it remains a significant ongoing issue and the team recommends as advisable that the University closely monitor the impact of the planned actions to resolve the problem.

44 Overall, the University remains committed to investing in and further developing distributed learning, and the audit team recommends that it strengthen its management of blended learning as part of this strategy and ensure the effectiveness of planned actions to resolve ongoing capacity issues related to the timely securing of sufficient Education placements.

45 Resource allocation is aligned to the Strategic Plan. The University is aware that the distributed nature of its campuses means that careful planning of its learning resources is needed. Some students have expressed concern with recent changes, notably the closure of the Ambleside and Brampton Road libraries, and with the resources available on the Tower Hamlets campus. The University has actively addressed the challenge of delivering library services across the widely distributed campuses by investing in e-resources available to students wherever they are studying. Module guides seen by the team include some guidance on resources, predominantly books, though some have little reference to e-resources.

46 Specialist facilities are generally located on campuses where relevant courses are based, although the University is continuing to address the ongoing concerns of students about the Tower Hamlets site, which has to share facilities with other providers and has, in the students' view, limited dedicated general facilities.

47 Back-room IT systems are currently receiving a significant upgrade and the investment in ICT has resulted in a range of technologies available for supporting teaching and learning, which are fit for purpose.

48 The closure of facilities and the relocation of courses on different campuses have caused the affected students significant concern, although they acknowledge and appreciate that the University has put in place measures to facilitate the transition to new facilities.



49 Overall, although managing distributed physical library holdings within a restricted budget and synthesising the online learning resource systems of the heritage institutions has been challenging, Learning, Information and Student Services has actively managed resources in the best interests of students and has strengthened the e-resource provision in accordance with the University's strategic objective to deliver distributed learning.

50 The University's admissions policy and practice are designed to be fair, consistent and to enable equal opportunity for all. Students planning to study full-time on the main campuses generally find the prospectus clear, although students needed to talk to staff at open days and interview days to get an accurate understanding of the experience on offer.

51 Effective systems were in place for enrolment and induction and students found these processes to be well organised for residential students, but less good for those with other commitments. There is a move to improve enrolment and induction by making them more faculty and programme-based.

52 International students have pre-registration support from the International Recruitment Office, but once at the University they are embraced within mainstream support services, which they report work well.

53 Overall, the University has secure admissions procedures.

54 Working in partnership with the faculties, Learning, Information and Student Services offers an effective one-stop shop for all student support services, including careers, students with a disability and general advice. Students are positive about the service they receive and employment for graduates is good. The University remains committed to monitoring the impact of the recent changes to the structure of its services, but early indications are positive.

55 Students are broadly satisfied with the Personal Academic Tutor system, which is flexible enough to respond to student and course needs, meets minimum institutional requirements and is supplemented through the strong relationships students have with their module tutors. The University is already committed to improving support for part-time and geographically remote students. Personal Development Planning is normally undertaken through the Personal Academic Tutor system, although it is sometimes embedded in the curriculum and some students are trialling an e-portfolio system. There is a well-developed student progress review system, which can be triggered by staff or students and through which an action plan identifying appropriate support will be developed.

56 Students met by the audit team have raised a number of concerns with the University about inconsistencies regarding the timeliness and quality of assessment feedback, although National Student Survey results are better than average in this area. The University is addressing student concerns by reviewing its procedures and supplementing its staff guidance on assessment practice by undertaking further staff development, including the participation of students.

57 Overall, the University, despite undergoing significant structural changes, has generally well-developed systems for student support, which are appreciated by students.

58 The recently formed Centre for the Development and Enhancement of Professional Practice plays a major role in staff development working in partnership with the faculties and acting in both proactive and reactive ways. The centre has responded to some of the concerns expressed by students in surveys about inconsistencies in teaching and assessment practice by running events for staff, sometimes with the involvement of students.

59 There are established appointment, probationary, induction and appraisal systems, although the latter is currently under review. The annual reciprocal peer review is one means by which good practice is disseminated.

60 The University recognises the challenging nature of the scale of change that staff have experienced and has committed itself to supporting them in a variety of ways, including a series of events and resources organised by the Centre for the Development and Enhancement of Professional Practice.

61 Overall, the University has generally well-developed systems for staff support, which it has maintained and strengthened as it has passed through a period of change.

## **Section 4: Institutional approach to quality enhancement**

62 The University has no published or written strategy on enhancement as enhancement is seen as being embedded rather than requiring a separate strategy or policy. A range of processes to support enhancement activity were identified by the University, including engaging in systematic evaluation and programme approval processes and responding to national policy developments and published research on learning, teaching and assessment.

63 The University stated that the 'committee structure provides a clear framework for instigating, monitoring and concluding enhancement activities which may be actioned across any part of the University'. The Learning, Teaching and Quality Enhancement Committee has responsibility for the development, implementation and evaluation of the Learning, Teaching and Assessment Strategy and is also charged with disseminating good practice. The terms of reference for Faculty Learning and Teaching Quality Enhancement Committees include the responsibility for ensuring 'that the Faculty's policies and procedures on academic standards enhance the quality of the student experience, learning, teaching, assessment and employability...' The audit team concluded that, while there were many instances of the committees considering good or best practice, there were few examples of the committees considering what aspects of good practice should be prioritised and how such practice could be disseminated and implemented.

64 The University Learning, Teaching and Quality Enhancement Committee has a strategic overview of annual monitoring. A variety of data is used effectively for analysis, including the programme-level recruitment, progression and achievement data, Annual Evaluatory Reviews, student module evaluations, the National Student Survey, and external examiner reports.

65 Information is also gathered from students from a number of sources with the intention of informing enhancement. Students contribute through the feedback that they give in formal representation on committees and through evaluations of modules and courses. Students confirmed to the audit team that their opinions and views are sought, although they were not always fully aware of how their opinions had influenced the improvement of their learning experience (see Section 3 above).

66 The Centre for the Development and Enhancement of Professional Practice (see paragraph 58) has recently been established to support staff and faculties in the enhancement of quality. It has the aim of supporting excellence in professional practice and acting as a key change agent in quality enhancement. The centre is responsible for ensuring the continuing professional development of University staff and the service directs the Leadership and Management Framework. It has a wide range of downloadable resources

available from their webpages and through StaffNet and also provides staff development courses, which focus on a wide range of topics, including sessions or courses on e-learning, management and leadership, effective doctoral supervision, equality and diversity, professional and personal effectiveness and research training.

67 The Centre for the Development and Enhancement of Professional Practice also manages a number of externally funded projects. The centre bids for projects which relate to University interests. At the time of the audit, the centre was managing five projects, some of which were joint projects with other universities. The University (through the centre) is the lead institution for one of the projects and is undertaking a number of dissemination activities such as seminars and conference presentations both within the University and beyond.

68 Overall, the audit team came to the view that the Centre for the Development and Enhancement of Professional Practice, although only recently formed, was offering a comprehensive programme of staff development and was working with faculties to improve the quality of the student learning experience utilising a range of approaches. Given that in its new format the centre is still clarifying its direction and purpose, the team was, at this juncture, unable to make any evaluation of the overall effectiveness of its work in terms of impact on enhancement.

69 Some examples of good practice were reported to the audit team in meetings with staff. Many related to the projects managed by the Centre for the Development and Enhancement of Professional Practice. The Briefing Paper also drew attention to dissemination activities such as Faculty Away Days, online materials for staff, individual support meetings with centre staff for new members of staff and the University's Learning and Teaching Journal. However, the team found few examples in practice of such dissemination: the main means of disseminating good practice systematically throughout the University appeared to be through professional development courses. Similarly, the team found many examples of opportunities for enhancement being identified, for example through validation, but little evidence that these opportunities are being systematically captured, prioritised and supported through to implementation in a structured and managed way.

70 Overall, the audit team concluded that the University had systems for the identification of enhancement opportunities, and found examples of potential good practice in several areas, but that there were weaknesses in the systems for the dissemination of that practice. In the view of the team, it would be desirable for the University to realise fully the potential of enhancement opportunities at all levels by developing a more systematic approach to their identification, dissemination and implementation.

## **Section 5: Collaborative arrangements**

71 The University considers that engaging in collaborative provision promotes its mission and supports a key aim of its Business Plan (2010-20) 'to be one of the most admired universities in the country for working with partners to regenerate our region and beyond'. The University states that it retains full overall responsibility for the academic standards of its collaborative programmes and awards, which are expected to be the same as those for a corresponding or comparable qualification in the University, should have student learning opportunities that are appropriate and 'broadly consistent' with comparable programmes, and should meet the expectations of the Academic Infrastructure.

72 The University currently has collaborative arrangements with eight associate colleges, seven in the UK and one overseas. Because such activity is relatively new to the University and a potentially high-risk area, it has been decided to focus efforts on embedding

arrangements with current partners and those in development. Approximately five per cent of students (576 out of 10,228) are registered on collaborative programmes. The audit team noted that, of the 71 programmes in approval, the great majority had never run; only 22 (30 per cent) had recruited in 2010-11. The team was informed that this was due to over ambitious plans at the University's foundation and that it is considering how best to rationalise provision to reflect current strategic priorities.

73 Central oversight is the responsibility of the Academic Collaboration and Partnership Sub-Committee and support shared between the Academic Quality and Standards Service and an Academic Partnerships Team based in External Relations. Roles and responsibilities of key central and faculty staff are specified in the Collaborative Provision Policy, Procedures and Processes, which includes a typology of activity including articulation, accreditation, shared programmes and offsite delivery. The majority of programmes in approval are validated Foundation Degrees, with a small number of franchised arrangements. The Academic Quality and Standards Service maintains the collaborative provision register. The publicly available version on the University's website lists the names of associate partners but does not include the collaborative programmes operated through those partnerships. This does not fully engage with the Section 2 of the *Code of practice*. The Collaborative Provision Policy, Procedures and Processes specifies separate procedures for the approval and review of institutional partnerships and for collaborative programme delivery. The audit team scrutinised examples provided by the University and found the processes for partner and collaborative programme approval to be thorough and well managed.

74 Once approved, collaborative programmes are managed at faculty level and are the formal responsibility of the Executive Dean. A University Programme Leader and a Partner Programme Leader are jointly responsible for day-to-day management. The Annual Evaluatory Review process mirrors that for the University's home provision, with variations specified in the Collaborative Provision Policy, Procedures and Processes. The University is aware of the need to develop its management of information for collaborative activities as the provision grows. From 2010-11, the University has introduced Annual Partnership Review. Detailed criteria are used to scrutinise the qualifications and experience of partner staff CVs at validation, and the University Programme Leader is responsible for approving any subsequent changes. The audit team found that partners were aware of, and valued, the good level of staff development support provided by the University.

75 Assessment must comply with the University's Academic Regulations, Procedures and Processes. Standard processes apply for the appointment, role and responsibilities of external examiners, with the same examiners used for franchise and home programmes. As with its home provision, the University was unable to satisfy the audit team that external examiner reports are routinely shared with student representatives. The University is advised to ensure compliance with HEFCE 06/45 by sharing external examiner reports with student representatives, including those studying through collaborative arrangements. The formal consideration of assessment and its outcomes for collaborative provision is the responsibility of the University's Module Assessment Boards and its University Assessment Board, following standard regulations and procedures, including chairing and servicing arrangements. All certificates and transcripts are issued by the University.

76 The partner must issue students with a programme handbook, the programme specification and module guides, each following the standard template, and submit updated versions to the University annually. The audit team scrutinised an example of a collaborative programme handbook and found it to be comprehensive, incorporating information about the relationship with the University and complaints, appeals, and academic malpractice procedures. Learning and support resources are provided by the partner and/or the University in accordance with the arrangements agreed at institutional approval and

programme validation. Partner programmes are required to establish appropriate forum(s) for programme-level discussion that include student representation and evaluative feedback. In all cases, these report to the relevant University Programme Quality Committee.

77 Collaborative provision is not included in the University prospectus or online All Courses search engine. The audit team noted a number of cases where programme details published on partner sites were at variance with the authoritative record held by the University, which does not engage with the *Code of practice, Section 2: Collaborative provision and flexible and distributed learning (including e-learning)*. The University confirmed that collaborative programme specifications are not currently published either on its own or its partners' websites, which also does not engage with Section 2 of the *Code of practice*. The team advises the University to engage fully with the precepts in Section 2 of the *Code of practice* relating to the content of its publicly available register of collaborative provision and the information and publicity provided to students.

78 With the exceptions noted in paragraph 77, the audit team considered that the University has robust and effective procedures in place to manage its collaborative provision. The management in this area has been enhanced by the recently revised Collaborative Provision Policy, Procedures and Processes, for example through the introduction of Annual Partnership Review at partner level. The University will no doubt wish to keep its monitoring processes under review, particularly to ensure that the discrete but interlinked functions of the Academic Partnerships Team and Academic Quality and Standards Service remain well coordinated and that, as the provision expands, clear and effective liaison and communication with all partners are retained.

## **Section 6: Institutional arrangements for postgraduate research students**

79 Through a formal agreement with Lancaster University, the University of Cumbria offers research degree programmes leading to the awards of MPhil and PhD. Arrangements are a composite of Lancaster University regulations and procedures supplemented by additional University of Cumbria regulations and practices. As these complement, rather than replace, awarding body requirements, they are not approved by Lancaster University. The University of Cumbria annually reviews alignment with the *Code of practice, Section 1: Postgraduate research programmes*. The judgement of the 2009 QAA special review of research degree programmes at the University was that, overall, the University's ability to secure and enhance the quality and standards of its provision was appropriate and satisfactory. The University's research degree provision is centrally managed through the Graduate School headed by the Director of Research and Graduate Studies. All research students are members of the School. The Research and Enterprise Committee delegates operational responsibilities to the Graduate School Advisory Group, which produces the research degree programme Annual Evaluatory Review, which also acts as the annual institutional reporting mechanism to Lancaster University. The audit team heard that the two universities are currently considering how to formalise the response to the Annual Evaluatory Review.

80 Seventy postgraduate research students are registered in 2010-11; 80 per cent study part-time and 30 per cent are University of Cumbria staff. The audit team learned that the University is prioritising research capacity building among its staff. The Research, Scholarship and Academic Enterprise Strategy aims to promote more research degree programmes undertaken by University staff and to concentrate research in designated 'niche' areas. All applications for postgraduate research degrees are considered by an admissions panel. Successful applicants are admitted by Lancaster University, with registration either in October or April. A supervisory team normally comprises up to three

staff, with the main supervisor as the primary point of contact. One member of the supervisory team is identified as a support tutor. New supervisors are mentored and apprenticed to ensure they develop appropriate expertise.

81 The University's code of practice specifies the requirements for progress and review, in compliance with Lancaster University regulations. A full-time student is entitled to supervision of at least one hour a fortnight, part-time to at least an hour a month, supplemented by online and telephone support. An initial draft programme, based on the research proposal, is drawn up and approved by the supervisory team. Progress is annually assessed, with a major review to consider a student's transfer from MPhil to PhD or from probationary to confirmed PhD status. All arrangements and regulations for the assessment of research students, including the criteria for awards; preparation for, and administration of, the process; and the appointment of external examiners are determined and/or approved by Lancaster University.

82 The University expects research students to undertake an appropriate range of generic and transferable skills training selected in consultation with their supervisory team, and to be trained before undertaking any teaching activities. Both universities utilise formal feedback mechanisms, primarily through the annual review and mid-year questionnaire, with outcomes analysed in the Annual Evaluatory Review. The University also participates in the national Postgraduate Research Experience Survey, achieving very positive results, and undertakes internal surveys to monitor the quality of provision. Research students are represented on the Research and Enterprise Committee and the Graduate School Advisory Group. A formal complaints procedure is available for issues that cannot be resolved informally. Appeal against a final examination decision falls within the remit of Lancaster University's regulations.

83 Students who met the audit team confirmed that what was expected of them was clear, and were satisfied with the information, supervision, training and learning resources provided for their support. The team considered that the University's arrangements, on behalf of Lancaster University as the awarding institution, formed an effective framework for the management of the academic standards of the research awards in question and the quality of learning opportunities available to its research students. In general, those arrangements are aligned with the *Code of practice, Section 1: Postgraduate research programmes*, although the team considers it desirable that the University expedite its action in response to the recommendation of the 2009 special review to introduce benchmarking and performance measurements in the near future.

## Section 7: Published information

84 The Vice-Chancellor's Office has ultimate responsibility for all corporate information, both internal and external. The External Relations Office is responsible for all other published information, including the website and prospectuses. It is responsible for liaising with faculties so as to assemble and disseminate all relevant programme information. Programme specifications are written for prospective students, although the audit team would advise compliance with HEFCE 2006/45 to ensure that programme specifications are made publicly available. The External Relations Office is also responsible for overseeing the information published on the websites of the University's collaborative partners. The team saw evidence to suggest that not all of this information adheres to Section 2 of the *Code of practice* (see Section 5).

85 The University stated that the website is a critical means of communication, both internally and externally, and is working on further enhancement of the site. A two-phase project is in place, commencing in spring 2011, to update the current website and then to

improve accessibility for all stakeholders. The new website is to be launched in May 2011. Global emails are used to inform staff and students about a variety of University activities and news. However, the audit team found no evidence of a clear remit for these emails. Information is also provided to staff through StaffNet and to students via the respective faculty's virtual learning environment, although students told the team that this information varied between faculties.

86 Staff and students indicated that the information, ranging from the prospectus through to module guides, provided by the University was accurate and reliable. However, despite the various strategies that are in place, the audit team was unable to find a clear, cohesive strategy for communicating information (see also paragraphs 18 and 50). It therefore advises the University to devise, implement and embed an overarching and integrated approach to the communication of accurate, comprehensive and reliable information to prospective and current students.

87 With the exception of the recommendation above, the audit team found that reliance can reasonably be placed on the accuracy and completeness of the information the University publishes about the quality of its educational provision and the standards of its awards.

## Section 8: Features of good practice and recommendations

### Recommendations for action

88 Recommendations for action that is advisable:

- improve the oversight and management of the quality of student learning opportunities and academic standards at all levels of the University to achieve coherence and consistency of practice (paragraph 7)
- devise, implement and embed an overarching and integrated approach to the communication of accurate, comprehensive and reliable information to prospective and current students (paragraphs 50, 86)
- ensure the effectiveness of planned actions to resolve ongoing capacity issues related to the timely securing of sufficient Education placements (paragraphs 43, 44)
- ensure compliance with HEFCE 2006/45 in making programme specifications publicly available (paragraphs 15, 75, 84)
- engage fully with the precepts relating to the content of the collaborative provision register and information provided to students in the *Code of practice, Section 2: Collaborative provision and flexible and distributed learning (including e-learning)* (paragraph 77).

89 Recommendations for action that is desirable:

- operate the minor change process in a consistent and timely manner in accordance with the University's published procedure (paragraph 25)
- develop and implement a procedure on programme closure (paragraph 28)
- achieve consistency in the operation of the University's processes for managing feedback from students (paragraphs 32, 34, 35, 65)
- strengthen the institutional management of blended learning to achieve the University's strategic objective to provide high-quality distributed learning (paragraphs 42, 44)
- share external examiner reports with student representatives, including those studying through collaborative arrangements (paragraphs 14, 75)

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- fully realise the potential of enhancement opportunities at all levels by developing a more systematic approach to their identification, dissemination and implementation (paragraphs 69, 70)
- expedite the recommendation of the QAA special review of research degree programmes (2009) to introduce benchmarking and performance measurement in monitoring the performance of postgraduate research students (paragraph 83).



## Appendix

### **The University of Cumbria's response to the Institutional audit report**

The University of Cumbria welcomes the QAA audit team's judgements of confidence in the present and future management of the academic standards of our awards and in the quality of the learning opportunities offered to our students.

The University is pleased to note that the report also identified that there is an effective framework for the management of the academic standards of our research degrees (validated by Lancaster University) and the quality of learning opportunities available to our research students.

We note with satisfaction the conclusion that reliance can reasonably be placed on the accuracy and completeness of the information we publish about our provision but we note also the need to continue to take steps to improve the quality and dissemination of this information for both prospective and current students.

As a University committed to providing and promoting excellent and accessible higher education we are working positively and constructively to systematically address the recommendations contained in the report. We are pleased that the audit team recognised areas of potential good practice relating to opportunities for quality enhancement, and note the need for an improved approach to dissemination and wider implementation.

The University has already initiated a number of actions in response to the audit, for example, the development of a Student Communications Strategy and the introduction of a University-wide panel to consider minor changes to programmes. All other recommendations from the audit team will be similarly addressed and embedded in our committee structures and working practices.

Being committed to the continuous improvement of all of our activities, we would like to thank the QAA audit team for providing us with an excellent opportunity to review all elements of our provision, and for providing a very clear set of recommendations for future attention. We are committed to high quality and we will continue to keep the student experience at Cumbria at the heart of all that we do.

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