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

The purpose of institutional audit
The aims of institutional audit are to meet the public interest in knowing that universities and colleges are:
- providing HE, awards and qualifications of an acceptable quality and an appropriate academic standard, and
- exercising their legal powers to award degrees in a proper manner.

Judgements
Institutional audit results in judgements about the institutions being reviewed. Judgements are made about:
- the confidence that can reasonably be placed in the soundness of the institution's present and likely future management of the quality of its programmes and the academic standards of its awards
- the reliance that can reasonably be placed on the accuracy, integrity, completeness and frankness of the information that the institution publishes, and about the quality of its programmes and the standards of its awards.
These judgements are expressed as either broad confidence, limited confidence or no confidence and are accompanied by examples of good practice and recommendations for improvement.

Nationally agreed standards
Institutional audit uses a set of nationally agreed reference points, known as the 'Academic Infrastructure', to consider an institution's standards and quality. These are published by QAA and consist of:
- The framework for higher education qualifications in England, Wales and Northern Ireland (FHEQ), which include descriptions of different HE qualifications
- The Code of practice for the assurance of academic quality and standards in higher education
- subject benchmark statements, which describe the characteristics of degrees in different subjects
- guidelines for preparing programme specifications, which are descriptions of the what is on offer to students in individual programmes of study. They outline the intended knowledge, skills, understanding and attributes of a student completing that programme. They also give details of teaching and assessment methods and link the programme to the FHEQ.
The audit process

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

The main elements of institutional audit are:

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

The evidence for the audit

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

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

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

From 2004, institutions will be required to publish information about the quality and standards of their programmes and awards in a format recommended in document 03/51, Information on quality and standards in higher education: Final guidance, published by the Higher Education Funding Council for England. The audit team reviews progress towards meeting this requirement.
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Summary

Introduction

A team of auditors from the Quality Assurance Agency for Higher Education (QAA) visited the University of Worcester (the University) from 21 to 25 November 2005 to carry out an institutional audit. The purpose of the audit was to provide public information on the quality of the opportunities available to students and on the academic standards of the University's awards. To arrive at its conclusions the audit team spoke to members of staff throughout the University, to current students, and read a wide range of documents relating to the way the University manages the academic aspects of its provision.

The words 'academic standards' are used to describe the level of achievement that a student has to reach to gain an award (for example, a degree). It should be at a similar level across the UK. Academic quality is a way of describing how well the learning opportunities available to students help them to achieve their award. It is about making sure that appropriate teaching, support, assessment and learning opportunities are provided for them.

In institutional audit, both academic standards and academic quality are reviewed. Provision and awards offered by both the University and its collaborative partners were included in the audit.

Outcome of the audit

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

- there can be broad confidence 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
- there can be broad confidence in the University's present and future capacity to manage effectively the academic standards of its awards offered on its behalf by collaborative partners.

Features of good practice

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

- the exemplary institutional self-evaluation document which provided comprehensive, accurate and self-critical reflection of the University's policy, practice and procedures
- the supportive ethos and range of departmental and central services provided to students and staff in support of the University's mission to deliver an excellent inclusive higher education
- the effective way in which the University deploys its financial and physical resources in support of learning and teaching
- the Human Resources Strategy which is well judged to address the University's commitment to learning and teaching and to raising the level of appropriate research, scholarly and professional activity amongst all staff
- the close and productive working relationships with collaborative partners, which are closely integrated into the quality and standards infrastructure at institutional and departmental level
- the use of post-examination board module reviews to enhance the link between learning outcomes, assessment and student achievement.

Recommendations for action

The audit team also recommends that the University consider taking further action in a number of areas to ensure that the academic quality and standards of the awards offered by it and its collaborative partners are maintained.

The team advises the University to:

- review the procedures for writing and approving reports from internal subject reviews to ensure summary reports placed on the Teaching Quality Information website are an accurate reflection of the conclusions of the full reports to which they refer
• review procedures for updating and approving programme specifications to ensure that they are complete, accurate and current

• implement procedures for ensuring that all information made available to students concerning assessment and progression, including that in programme specifications and student handbooks, clearly and accurately reflects current University regulations.

It would also be desirable for the University to:

• expedite the proposed review of the effectiveness of Departmental Quality Assurance Committees

• complete the Undergraduate Modular Scheme review that is currently under way and proceed to a standard set of undergraduate regulations across the University.

Outcomes of discipline audit trails

In the course of the audit, programmes of study leading to academic awards in: business and management, psychology; and sport and exercise science were scrutinised. In each case the audit found that the standard of student achievement in the programmes was appropriate to the titles of the relevant awards and their location within The framework for higher education qualifications in England, Wales and Northern Ireland, and that the quality of learning opportunities available to students was suitable for programmes of study leading to those awards.

National reference points

To provide further evidence to support its findings the audit team also investigated the use made by the University of the Academic Infrastructure which QAA has developed on behalf of the whole of UK higher education. The Academic Infrastructure is a set of nationally agreed reference points that help to define both good practice and academic standards. The findings of the audit suggest that the University’s response to all aspects of the Academic Infrastructure has been timely and appropriate.

From 2005, the published information set will include the recommended summaries of external examiners’ reports and of feedback from current students for each programme. The evidence provided for the audit shows that the University has taken the necessary steps to be able to meet the requirements of the Higher Education Funding Council for England’s document 03/51, Information on quality and standards in higher education: Final guidance.
Main report
Main report

1 An institutional audit of the University of Worcester (the University) was undertaken during the week commencing 21 November 2005. The purpose of the audit was to provide public information on the quality of the University’s programmes of study and on the discharge of its responsibility for its awards.

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

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

Section 1: Introduction: the University of Worcester

The University and its mission

4 The University is the main public provider of higher education in Herefordshire and Worcestershire and currently has a single site on the outskirts of Worcester. Plans are well advanced to develop an additional campus in the centre of the city based on the former site of the Worcestershire Royal Infirmary. This will be a £100 million development and will include an innovative Library and Lifelong Learning Centre using a major grant of £10 million from HEFCE. The overall intention is to provide an additional 5,000 student places by 2012.

5 The origins of the University start with the establishment in 1947 of an emergency training college for teachers and this continued to develop under the direction of the University of Birmingham, Department of Education. By the 1970s, and with diversification, it had developed into the Worcester College of Higher Education with awards validated by the Council for National Academic Awards (CNAA). Validation powers passed to Coventry University in 1992 and significant expansion occurred in 1995 with the absorption of the Herefordshire and Worcestershire College of Nursing and Midwifery. In 1997 the institution gained degree awarding powers for taught courses and it became University College Worcester in 1999. In September 2004 the University College made an application for University Title and, following a period of scrutiny, was awarded the title of the University of Worcester by the Privy Council in September 2005. Research degree awards continue to be accredited by Coventry University with the University of Worcester having full responsibility for the academic and administrative conduct of research degree programmes.

6 At present the University has approximately 7,800 students with the majority, at both undergraduate and postgraduate levels, on full-time awards. Postgraduate students account for about 21 per cent of the total population. The University has higher than
average mature (21 years and older) and female student population with figures of 70 per cent and 80 per cent. Approximately 100 students are registered for research degrees with Coventry University.

7 The majority of undergraduate and postgraduate studies are contained within the Undergraduate Modular Scheme (UMS) and Postgraduate Regulatory Framework (PRF) respectively. In the former there is a wide choice of study options enabling students to tailor their courses to meet their individual career aspirations and interests. The academic structure comprises six units: Department of Applied Sciences, Geography and Archaeology; Department of Arts, Humanities and Social Sciences; Institute of Education; Institute of Health and Social Care; School of Sport and Exercise Science and the Worcester Business School.

Mission statement

8 The University's Strategic Plan 2004-2008 sets out five key ambitions to achieve its mission:
- to be an accessible University of choice
- to provide excellent, inclusive higher education
- to produce highly employable, innovative, professional alumni
- to deliver first class scholarship, applied research and consultancy
- to make an outstanding contribution to the development of the region.

Collaborative provision

9 Currently the University has collaborative agreements with 11 regional further education (FE) colleges: Evesham and Malvern Hills College; Halesowen College; Herefordshire College of Technology; Josiah Mason College; Kidderminster College; North East Worcestershire College; Pershore Group of Colleges; Stourbridge College; Worcester College of Technology; Bourneville College of Further Education; and Dudley College. Collaborative awards offered through the partnerships include sub-degree awards, typically HNC, HND and Foundation Degree programmes, as well as undergraduate degrees. The overall student number on the programmes in 2004-05 was approximately 700 students or around 9 per cent of the total student population for the University. Other collaborative arrangements include Initial Teacher Training programmes with Somerset Local Education Authority and the Devon Secondary Teacher Training Group. At present the only overseas collaboration is with the Högskolen I Halmstad, Sweden which permits advanced entry of Swedish students on to the BA (Hons) Business Management and allows graduates from the University's business courses to enrol for a further year in Sweden and gain a Swedish qualification.

Background information

10 The published information available at the time of audit included:
- information available on the institution's website
- the University prospectus and course information
- QAA Continuation Audit Report of October 2002
- Foundation Degree review: Learning Support (2005)

11 The University also provided QAA with:
- an institutional self-evaluation document (SED)
• discipline SEDs (DSEDs), including programme specifications, for business and management; geography; psychology; and sports and exercise science
• the Strategic Plan 2004-2008
• the Quality Assurance Handbook (QAH) 2005
• follow-up commentaries on the SED and Student Written Submission (SWS)
• a brief guide to the Undergraduate Modular Scheme
• minutes of the meetings of senior committees
• annual review & evaluation reports
• information on staff and student support.

12 During the audit visit the audit team was provided with access to other internal documentation in hardcopy and through the University’s intranet. The team is grateful to the University for the readiness to provide the information requested.

The audit process

13 Following a meeting at the University in March 2005, QAA confirmed that four DATs would be conducted during the audit visit. The audit team’s final selection of DATs included sub-degree, undergraduate and postgraduate programmes in: business and management; psychology; and sports and exercise science. Review of a fourth DAT area had to be cancelled owing to sudden and unforeseen circumstances leading to an auditor having to withdraw just prior to the commencement of the audit.

14 QAA received the institutional SED and supporting documentation in July 2005 and the DSEDs, accompanied by programme specifications, in September 2005. The SED was compiled specifically for the audit and DSEDs were either compiled specifically for the audit or modified documents from recent internal subject review.

15 The audit team visited the University from 12 to 14 October 2005 for the purpose of exploring, with the Vice Chancellor, senior members of staff with institutional responsibility and student representatives, matters relating to the management of quality and standards raised by the SED and other documentation provided for the team. During this briefing visit, the team identified a number of matters for further consideration during the audit visit. At the close of the briefing visit, a programme of meetings for the audit visit was developed by the team and agreed with the University.

16 At the preliminary meeting for the audit in March 2004, the Students’ Union (SU) officers were invited to submit a SWS expressing views of the student body on their experience at the University and identifying any matters of concern or commendation with respect to the quality of programmes and the standard of awards. They were also invited to give their views on the level of representation afforded to them and on the extent to which their views were taken into account. In July 2005 the student body submitted a detailed document to QAA. The submission had been based largely on the findings from a specifically designed questionnaire and discussion in 14 focus groups representing the breadth of the SU’s constituency. The final version of the SWS was endorsed by the SU Executive Committee. The team is grateful to the students for preparing this valuable document to support the audit.

17 The audit visit took place from 21 to 25 November 2005, and included further meetings with staff and students of the University, who were representative of both institutional constituencies and the selected DATs. The audit team comprised Professor D Webb, Dr C Vielba, Dr R Latto, Dr H Rattle and Dr J Grattan, auditors, and Ms J Greenlees and Mr M Gresson, audit secretaries. The audit was coordinated for QAA by Professor H Colley, Assistant Director, Reviews Group.

Developments since the previous academic quality audit

18 The October 2002 report of the quality audit of November 2001 published by QAA commended a number of aspects of the University’s provision including the institution’s
responsiveness to external developments; the system of quality assurance; staff development in support of quality and standards; collaborative partnership arrangements and the work of the Learning and Teaching Centre and the Equal Opportunities Centre. These remain positive aspects of the University’s approach to managing quality and standards.

19 The report also identified eight recommendations, all of which have been addressed by the University in the intervening period. Two areas gave rise to advisable recommendations. In response to these a Learning Outcomes Policy has been adopted and embedded in validation procedures in response to the perceived disjuncture between learning outcomes and assessment criteria; and the management of collaborative provision has been reviewed and revised in response to the finding that some collaborative provision was not adequately covered by formal agreements.

20 In response to recommendations considered desirable the University has taken a number of actions. The QAH and other documentation has been revised to ensure that policy and guidance are more clearly distinguished. In doing this the operation of examination boards has been clarified. The process for responding to external examiners' comments has remained essentially the same as the examiners appear to be content with these arrangements. Work has continued on the development of the Student Qualities Profile and Personal Development Planning for students at both a central and a departmental level. A number of initiatives have been taken which have helped to free staff time in order to undertake development activities. Lastly, a computerised module selection system has been developed to ensure that students comply with the requirements of their scheme of studies.

21 Since the November 2001 audit a number of significant changes have taken place within the institution. Notable amongst these have been a reorganisation which abolished faculties and created a flatter structure of six departments and central services. At the local level this included the creation of Departmental Quality Assurance Committees (DQACs) which play a key role in the management of quality and standards. The committee structure has also been modified to enhance the role of the Academic Board and to consolidate oversight of groups of programmes through the creation of bodies such as the Board of Undergraduate Studies, the Board of Postgraduate Studies and the Externally Provided Programmes Sub-Committee.

22 A number of other reviews by QAA, the Office for Standards in Education (Ofsted) and professional statutory and/or regulatory bodies (PSRBs) have taken place since the last audit. In each case the outcome of the review has been at least satisfactory. In addition, reviews have raised issues for consideration and development relating to the specific subject area under scrutiny. No significant recurrent issues have been identified.

23 The audit team noted that the University had addressed the specific recommendations made at the last audit and subsequent external reviews thoroughly and in a timely way. This has involved response and action at both a central and a local level led by the Academic Quality and Standards Committee. The audit team also noted that this activity has taken place against a background of strong but differential institutional growth and a change in status of the institution.

Section 2: The audit investigations: institutional processes

The institution's view as expressed in the SED

24 The SED stated that 'the management of quality and standards is realised through clearly defined responsibilities at course, departmental, scheme and institutional levels, within a framework of polices, procedures and regulations'. In addition the University stated that 'we have continually sought to align our processes with external requirements'. Overall responsibility for quality and standards rests
The institution's framework for managing quality and standards, including collaborative provision

25 The strategy for quality is defined by the University as: 'The quality strategy aims to achieve comprehensive coverage by addressing quality across the entire university...course approval and validation, course and departmental annual monitoring, subject review; partnership approval and review; monitoring and review of all service areas including learning support; and monitoring and review of all research and specialist areas'.

26 Operationally, the University's framework for managing quality and standards is clearly and comprehensively set down in the University's QAH. It has not changed radically since the continuation audit in 2001, when the then University College's QAH was regarded with approval by the audit team with the minor desirable recommendation for more clarity between policy and guidance. In the view of this audit team, it continues to offer clear guidance to users on constitutional and procedural mechanisms.

27 The SED points to both the executive and deliberative lines through which quality is assured. The former is vested in two senior executive roles. The Registrar is responsible for the regulatory framework, including admissions, assessment and conferment, and the Director of Quality and Educational Development (DQED) has responsibility for developing and maintaining the quality assurance strategy, policies and procedures.

28 The Head of Quality Assurance (HQA), who reports to the DQED, is responsible for the operations of the Academic Quality Unit (AQU) in administering the University's arrangements for programme approval, review, external examiners and annual monitoring. The SED claimed that the Registrar, DQED and HQA work closely together to ensure an integrated approach to the management of quality and standards and this was confirmed to the audit team's satisfaction during meetings with staff.

29 The Academic Quality and Standards Committee (AQSC) is the key committee for the 'formulation and development, evaluation, and promotion of university-wide quality assurance policies and procedures' and acts as the conduit between a number of sub-committees with responsibilities for specific branches of the University's provision: undergraduate studies; postgraduate studies, externally provided programmes and the University's six DQACs. The business of AQSC is extensive, but from the evidence seen by the audit team, the committee discharges the responsibilities delegated to it by Academic Board. However, with new responsibilities for considering departmental annual reports, and scheme reports for the UMS, higher nationals and Foundation Degrees, the audit team would suggest that the University reflect on the workload of AQSC.

30 The management of the University's collaborative provision has a number of key elements. These include: senior management's scrutiny of strategic fit; validation and review arrangements identical to those for internal provision; departmental support to partners through a link tutor; the newly established Externally Provided Programmes Sub-Committee (EPPSC). As this report notes elsewhere (paragraphs 123-130), the audit team concluded that the University's building of collaborative links founded on strong partnership relationships and careful adherence to the Code of practice for the assurance of academic quality and standards in higher education (Code of practice), published by QAA, is a continuing strength of its approach to quality and standards.

31 In terms of assessment regulations, the majority of taught undergraduate and sub-degree courses sit within the UMS. Four programmes sit outside the UMS regulatory framework - BAs in Social Work; in Primary Initial Teacher Training; and BSc degrees in
Horticulture and in Midwifery. Although these programmes are few in number, they do cover a significant volume of the University's undergraduate provision.

32 There are approved and invariably small variations in the application of UMS regulations to individual programmes. The team also noted in both programme specifications and handbooks instances of apparent variation in the published requirements about the number of modules that needed to be passed (rather than condoned). In addition, some student work in geography and psychology seen by the team was graded with both grade points and a 'literal' (alphanumeric) scheme. The team could see no good reason for two parallel grading schemes and considered that this complexity was not necessarily helpful to students. The team also noted that some course handbooks did not always explain clearly how students could progress, particularly in terms of the application of the regulations about compensation and the condoning of failed modules.

33 In consideration of the uncertainty that these variations might present to students, the audit team considers it advisable for the University to implement procedures for ensuring that all information made available to students concerning assessment and progression, including that in programme specifications and course handbooks, fully and accurately reflects current University regulations.

34 As already noted (in paragraph 31), at the time of the audit the University operated with two sets of undergraduate regulations. The University is aware of the potential difficulties this could be seen to present in assuring comparability in the standards of its awards, and the SED stated that the University is looking to rationalise its assessment regulations to a standardised common framework.

35 The audit team did not see evidence that the University is failing in its intention to achieve consistency across the various schemes for which it has responsibility. However, in the interests of reassuring students and other stakeholders, the audit team would recommend that the University should complete the UMS review that is currently in train, and proceed to a set of standard undergraduate regulations.

36 The SED identified post-exam board module moderation as an important additional means of assuring standards and this procedure has recently been included in the University's assessment policy and described in the QAH. In the University's view 'this is a process whereby a departmental or subject group consider a sample of assignments from a selection of modules across courses'. The SED made it clear that 'the purpose is not to alter marks, but to assist in the application of consistent standards across the provision and across the staff group'. The audit team concluded, after review of documentation and meetings with staff, that the University demonstrated good practice in the manner in which this procedure enhances the link between learning outcomes, assessment and student achievement.

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

37 The SED stated that 'Quality enhancement is promoted through annual monitoring, subject and service review and partnership review'. These, together with thematic audits of institution-wide topics, constitute the foundation of the University's commitment to providing 'high quality inclusive learning opportunities'.

38 The University also sees the ongoing revision of its Learning and Teaching Strategy, which awaits approval by Academic Board, as a key driver of quality enhancement. It refers to the continuing importance of the University's values of quality, access, equality and opportunity, with an overarching commitment to perform above benchmarks in terms of widening participation and equal opportunity measures, and in delivering effective academic and personal support and guidance.
39 The University's Learning and Teaching Centre has the lead responsibility for implementing the strategy, and there is a stated commitment to embedding the enhancement of learning and teaching at departmental level. There is also a requirement for departments to report on learning and teaching as part of the annual monitoring process, although, as the new round of annual monitoring had not yet been completed at the time of the audit visit, it was not possible to assess the changes arising from the new template for reporting on teaching and learning.

40 As noted elsewhere in this report, the peer observation scheme and the teaching fellowship scheme are further identified in the QAHE as elements in the Learning and Teaching Centre's means of contributing to the University's enhancement strategy. From the evidence seen by the team, it concluded that the Learning and Teaching Centre is contributing to quality enhancement as described in the SED.

41 The SED stated that thematic audit is a valuable quality enhancement tool. The audit team noted how thematic audit had been used to monitor adherence with the Code of practice, published by QAA. The team also saw the thematic audit of Personal Development Planning (PDP) as indicative of the University's willingness to engage with the implementation of a challenging initiative.

42 The University also expresses confidence in the capacity for enhancement through the reviews of support services, citing examples from the finance and the planning office reviews. The audit team noted the thoroughness of the two reviews in question, with this approach to enhancement providing an additional articulation between the direct concerns of the academic mission of the University and the wider institutional supporting infrastructure. The University's use of service reviews is, in the view of the team, a good way of enhancing the important link between resource allocation and mission objectives.

Internal approval, monitoring and review processes

Programme approval
43 The procedures for internal approval, monitoring and review are set out in the QAHE. The SED described the University's four stage process: (i) an initial phase of planning approval; (ii) the validation of course proposals; (iii) annual monitoring at the level of the course and academic department; and (iv) subject review, which includes the quinquennial revalidation of approved courses.

44 The Planning and Resources Committee (PRC) deals with new course proposals submitted by departments. This allows the PRC to review strategic fit and to consider resource requirements. With an increased articulation between departmental annual planning statements and new course proposals, the University is confident that the planning phase for course development can lead to an improved and more rapid phasing of validation before new courses are advertised and students recruited. In a meeting with staff the team was provided with examples to illustrate this improved system.

45 Validation events are managed by the AQU, with the unit also organising training for chairs of panels. External membership is required and this reflects the University's consistent commitment to gaining an external perspective of its academic activities. The AQSC monitors the validation process through reports provided by the AQU. In considering the role of the AQSC and the AQU and the quality of documentation that it saw, the audit team concluded that the University's approach to validation is robust and fully aligned with expectations within the sector.

46 As with many other aspects of its activity, the University has revised its validation procedures in the light of review, with an emphasis on increasing the various institutional inputs, such as those on the library and information technology (IT), that lead up to the final validation event. At the same time the University has amended its practice of
delegating to chairs of validation panels authority to grant approval, with this now reverting to formal consideration and approval by the AQSC. This brings the University in line with the precepts in the relevant section of the Code of practice.

Annual review and monitoring

47 The SED stated that ‘the purpose of annual monitoring is to provide assurance that the standards and quality of learning opportunities of courses are at least satisfactory, that issues are identified and that action is taken to enhance provision’. The SED identified departments as the key sites for annual monitoring, with the DQACs being responsible for assuring AQSC that monitoring has been carried out effectively. In requiring this responsibility, the University’s intention is to locate good management of academic provision within the department. The University’s expectation is that this good management will extend to any collaborative provision in which the department is engaged.

48 The course annual monitoring report (AMR) is the building block on which a departmental overview report is based. AMRs have a set of specific requirements which include responding to the comments of external examiners. In the course of the audit, the team looked at a number of AMRs and noted broad compliance with University requirements, although there was sometimes variability in the quality, and analysis, of appended statistical data.

49 Course AMRs are summarised by the Head of Department in conjunction with the DQAC in order to produce an overall report for ASQC on the quality and standards of departmental provision. The SED noted that until 2003-04 Academic Board received these reports rather than AQSC. The change to AQSC occurred because the volume of the reports had made it difficult for the Board to identify generic issues or to deliberate on quality and standards. Given the recent nature of the change the audit team was only able to track one cycle of the consideration by AQSC of departmental annual reports.

50 In addition to the departmental annual reports, ASQC receives the minutes of the DQACs. There is limited evidence of AQSC reporting back to the DQACs, or that AQSC necessarily sets a demanding set of compliancy deadlines for DQACs to address the matters that have been identified in departmental annual reports. The annual monitoring cycle is completed through a report from AQSC to Academic Board, which is prepared on behalf of the AQSC by the Director of Quality and Educational Development. This report summarises departmental AMRs, collaborative provision reports, and scheme annual monitoring. By this means Academic Board is informed of the progress on actions that have earlier been identified as necessary by the various deliberative committees that have responsibility for the overseeing of quality and standards. The team noted the comprehensive nature of the AQSC reports which provide the Academic Board with a clear picture of monitoring quality and standards of provision across the institution.

51 Subject to the condition that the audit team was only able to see one cycle of the University’s current means of handling departmental annual reports, the team noted that at the moment course-level annual monitoring identifies progress on the previous year’s action list with timescales set for forthcoming objectives. At the same time, there is evidence that updating of programme specifications, as outlined by the QAH, does not always appear to happen. Examples of omissions in the DQAC signing off procedures has led to what the team concluded are inaccuracies in some of the University’s publicly available information. In connection with this, the team noted the University’s intention to undertake an effectiveness review of the DQAC. It is the team’s view that the University should expedite the proposed review of the effectiveness of the DQAC as soon as possible.

52 The SED stated that ‘monitoring takes place at course, department and scheme levels’. The audit team saw evidence of course and departmental monitoring and noted the
change to procedures for scheme reports. These are now considered in detail by the Board of Undergraduate Studies and made available to Academic Board as appendices to the AQSC report on annual monitoring. This was introduced in 2005 and the University may wish to reflect on the effectiveness of the new arrangement.

**Periodic review**

53 The University has in place a system of quinquennial subject reviews, the purpose of which is to 'evaluate the operation of the subject within the department and to review and revalidate all courses in the subject unit'. The review, and accompanying responses by the Head of Department, is considered by AQSC. The team was able to consider periodic subject reviews in Psychology and Geography carried out in 2003-04 and concluded that the process was consistent with the claims in the SED.

54 The University believes that repeated external review of its processes for approval, monitoring and review have confirmed that it has reason to feel confident with the contribution that these make to setting and maintaining standards and assuring the quality of the student experience. While the team has noted the desirability for review of DQACs (paragraph 51), overall the team shares the University's confidence in its approach to course approval, monitoring and review.

**External participation in internal review process**

55 All validation panels, and periodic subject reviews, include at least one, and usually two external experts, and the external examiner is involved when minor course modifications are being proposed. The audit team noted that the briefing papers produced by the University for validation events provide appropriate information for external panel members who might be less familiar with the practices of higher education.

56 The AQU monitors the institutions from which external panel members are drawn. There is an increasing reliance on membership being drawn from outside higher education which the University has identified as a positive element it wishes to develop further. The SED stated that the University has revised certain aspects of its validation and periodic review processes to reflect comments made by external participants.

57 The SED also stated that 'UCW regards external involvement in internal quality processes as pivotal in setting and maintaining academic standards, and in benchmarking the quality of our provision'. From its review of validation documentation carried out in the course of the DATs, the audit team concluded that this is a commitment that the University demonstrates in practice, and reflects a wider and serious readiness to take into account external views when monitoring the quality and standards of its provision.

**External examiners and their reports**

58 External examiners are appointed for all internal and collaborative courses at Worcester; for the modular schemes, which operate two-tier examination boards, an independent Chief Examiner attends the scheme board and reports to Academic Board. Heads of department propose examiners for appointment, and a subgroup of AQSC scrutinises appointment forms and curricula vitae prior to discussion and, if appropriate, approval of the nomination on behalf of Academic Board. The audit team noted that due consideration is given to prior experience and potential conflicts of interest. The audit team was told that in 2005 some courses had difficulty in finding suitable examiners and some were appointed only shortly before taking up their duties; as a consequence AQSC is reviewing the appointment process to ensure timely nominations. Following appointment, external examiners are provided with a briefing pack and are invited to an induction meeting.

59 The role, rights and expectations of external examiners are clearly set out in the QAH. Examiners are required to inspect assessment materials and student work, meet with students, attend subject-level boards and
60 Reports are submitted electronically and are considered at several levels. At department level, the external examiner's report is a key feature of both course and DQAC annual monitoring, and action plans are constructed to address any issues raised. Any comments on individual modules may also be considered at a post-examination module review meeting. The finalised AMR and action plan are then fed back to the examiner in November, although some course teams communicate directly with examiners earlier than this. At institutional level all external examiner reports are read by the DQED who writes a summary and commentary for AQSC to identify trends and highlight matters that may require institutional attention. This summary report is also circulated to all external examiners. External examiner comments in the minutes of examination boards are analysed by the Registrar as part of an annual report to AQSC on the effectiveness of central support and servicing and the general conduct of boards.

61 The audit team explored the claims of the SED through meetings and by reading documentation. Implementation of institutional policy was evident in external examiner reports, in examples of AMRs seen during DATs, in the minutes of DQAC meetings, and in the institution-level analysis of examiner reports and response to them. Departmental staff confirmed in DAT meetings that they understood and followed the processes. The audit team concluded that strong and scrupulous use is made of the external examiner system. External examiner reports seen by the team confirmed that the standards of the programmes of the University are appropriate to level and subject discipline, that assessment processes are appropriate, and that examination boards are well managed.

External reference points

62 The 2001 audit of the institution commended it on the care and thoroughness with which it had responded to external developments such as the Code of practice and subject benchmark statements. The SED set out the University's approach to engagement with a range of external reference points. It uses the Academic Infrastructure as a key reference point when amending and developing policy. Checking the use of the Academic Infrastructure and adherence to it are required as part of the validation, review of programmes and annual monitoring.

63 Responsibility for ensuring that the provisions of the Code of practice are covered is with AQSC. An exception to this is that the Research Degrees Committee oversees compliance with the section of the Code relating to postgraduate research programmes. In 2003, in the light of revisions to the Code, AQSC decided to undertake a review of policies and procedures to ascertain whether the University still met all the precepts fully. As a result of this review a number of changes were made such as those relating to the management of collaborative provision.

64 The SED noted several occasions where The framework for higher education qualifications in England, Wales and Northern Ireland (FHEQ) had been used as a key tool in reviewing programmes. It explained that changes have been made to the UMS to bring it in line with the three levels identified in the FHEQ. In addition, a common Pass mark of 50 per cent as set out in the framework has been introduced for postgraduate programmes.

65 Subject benchmark statements are used within validation and review as a tool for evaluating the appropriateness of the curriculum of proposed and continuing programmes. The University has developed its Foundation Degrees in the light of the draft statement and a review has been initiated in the light of the publication of the agreed Foundation Degree qualification benchmark.

66 The SED outlined the development of programme specifications and the intention to expand their use. Previously programme specifications have been seen primarily as helpful summary documents for prospective and
current students. Specifications have previously been included as supporting documents in validation and review but in future they will be the key document in validation.

67 The QAH contains a template for the writing of programme specifications. The programme specifications seen by the audit team used the template in various ways and not all documents provided the full range of information indicated in the template. Programme specifications are intended to be updated annually through the annual monitoring process. This is now checked at the DQAC meeting that considers the annual report. The team noted that the processes currently operating did not always result in effective updating of the programme specification, and further, that there was a time lag between updating of specifications and their publication.

68 The audit team concurred with the view expressed in the SED that the University has taken ‘a careful and thorough approach to the use of external reference points, and have been systematic in auditing provision against benchmark statements and the Code of Practice’. The University has identified programme specifications as key documents in future validation and review. The audit team endorses the appropriateness of this approach and would advise the University of the importance of ensuring that programme specifications are consistent, complete and current.

Programme-level review and accreditation by external agencies

69 The University has participated in six QAA reviews since 2000. The two subject reviews of Sport and Business in 2001 both received positive outcomes. The pilot Major review of healthcare in 2002 was also very positive with one ‘exemplary’ judgement. There were two developmental engagements, History in 2003 and Computing in 2004, both of which confirmed the institution’s quality assurance procedures. In 2005, there was a review of the Foundation Degree in Learning Support which the University delivers with five partners. The outcome was largely very positive, confirming the University’s ability to deliver this kind of collaborative provision which is an important part of its portfolio.

70 These engagements are coordinated by the AQU, and AQSC receives the reports together with the departmental response and action plan. There is a further formal departmental report to AQSC after one year to summarise progress in achieving the action plans. In addition, in May 2005, AQSC did a global review and analysis of QAA engagements since 2001 to identify cross-institutional themes. The audit team found good evidence of a careful and thorough tracking of responses over time and, where appropriate, developing an institutional response to recommendations.

71 The University has also been subject to a number of other recent external reviews. The Ofsted inspections of its teacher education programmes produced a range of outcomes. These included some programmes rated at the highest grade and none were less than the minimum acceptable grade. The psychology programmes were successfully reaccredited by the British Psychological Society in May 2005. The accreditation report was generally positive, identifying only minor areas needing attention. The audit team saw evidence that these were all being addressed at the appropriate level.

72 The SED provided a full summary of these external reviews and a detailed analysis of their results which, together with the supporting documentation, demonstrated that the University has effective procedures in place for initiating and monitoring responses to their recommendations.

Student representation at operational and institutional level

73 At institutional level there is widespread student representation. SU officers are members of the Board of Governors, Academic Board, AQSC, Learning and Teaching Committee, the Student Affairs Committee, and the Graduate School Committee. Both the Board of Postgraduate Studies and the Board of
Undergraduate Studies also have student representatives, as do ad hoc working parties addressing student matters. The audit team found from reading the documentation and from talking to SU officers that relations between the officers and the central administration of the University was both close and effective.

74 At departmental level the primary representation and consultation vehicle in the University is now the discipline-based Course Committee linked to particular programmes. Examples seen by the audit team indicated that these had full representation from a wide range of students and discussed operational as well as quality issues. Departmental staff-student consultative committees were abolished in 2004-05 and there is not normally student representation on departmental committees. However, course committees are attended by Information and Learning Services (ILS) liaison staff and their minutes are widely circulated and form part of the annual monitoring procedure. The audit team saw evidence that the course committees did influence operational procedures.

75 Support and training of student representatives is the responsibility of the SU. A Student Development Officer runs training courses and there is a Student Course Representative Handbook and a Course Representatives Guide for Academic Staff. The SU also offers an accredited Course Representative Certificate.

76 The SED noted that student representation is strong and well developed, particularly at institutional and course committee level. Both the SED and the SU officers the audit team met recognised that representation from part-time and off-site students, a substantial part of the student body at the University, was more difficult to organise and support and was currently rather variable. However, the team noted that both the University and the SU are working on ways of strengthening this. As student numbers increase, the audit team would encourage the University to extend representation on departmental committees in order to strengthen student input into operational decisions at this level. Overall, the team found that, in line with the University’s view, mechanisms for student representation at operational level were generally comprehensive and effective.

Feedback from students, graduates and employers

77 The SED described two principal routes for obtaining feedback from students. Course committees, described above, normally meet twice a year and provide a forum for student representatives to raise issues which they have identified. The audit team saw evidence in the DATs that these were working well, with changes being effected and information being fed back to students on these changes. In some instances, student representatives were given time in lectures to raise matters and were also allocated an area on the virtual learning environment (VLE) for discussing issues; these are examples of good practice which could be more widely disseminated.

78 The second route for obtaining feedback is through more direct module evaluation organised by the tutor delivering the module. The SED stated that these evaluations are a formal requirement but the exact procedures are flexible to reflect the diversity of provision. Module tutors are required to complete a form for their Head of Department on how module evaluations were carried out and to summarise the outcomes. The audit team saw evidence in the DATs of complete module evaluation. A typical pattern included informal mid-module evaluation followed by a formal, anonymous questionnaire-based evaluation at the end. The students seen by the team confirmed that these processes were effective in producing changes and that information on outcomes was widely circulated.

79 Feedback at programme and University level has been obtained by a student satisfaction survey which was piloted in 2002-03 and run fully in 2003-04. The results of this have been fully discussed by the Student Affairs Committee (SAC) and the AQSC and a number
of issues have been identified and progressed. The 2005 National Student Survey (NSS) supplied additional programme and discipline level information. Initial analysis of this by the University has identified similar areas of concern to those found in the earlier student satisfaction surveys. For example, there were relatively low scores on learning resources and the promptness of feedback on work, issues that are already being addressed. In the expectation that the NSS will be repeated, the University is currently reviewing its procedures for obtaining a full range of feedback without unnecessary duplication.

Feedback from graduates is obtained at institutional level. In addition to the annual First Destination Survey prepared for the Higher Education Statistics Agency (HESA), the Careers Advisory Service surveys students’ careers four years after graduation. Information from this is reported to the Academic Board, circulated to departments and course teams and incorporated into advice given to current students.

Obtaining input from employers is primarily the responsibility of the departments and divisions and is very variable, partly because of the diverse needs and opportunities of different disciplines. The audit team saw examples of active and effective liaison panels in some areas. In others there was little or no contact with employers or reliance on input from professional bodies during accreditation procedures. Nevertheless, in meetings with staff it was apparent that the University sees the importance of developing these links and is actively exploring ways of doing this.

Overall, the audit team found that the University’s arrangements for gathering feedback from students, graduates and employers were broadly sound. Module-level feedback was particularly thorough and effective. Procedures in place for obtaining higher level feedback and input from employers, while still developing, demonstrate a high level of commitment to these activities.

Progression and completion statistics

The SED stated that the University is in the process of formalising the way it monitors institutional performance against plans and performance indicators. However, the detailed analyses of student performance presented in the SED and supporting documentation shows that it already has effective mechanisms in place for producing, monitoring and responding to progression and completion statistics. In 2001-02, a drop in student retention rates to below that of the HEFCE benchmark led to a number of changes at both institutional and departmental level, for example, changing the structure of the academic year to mitigate the effects of pre-Christmas assessment points. Data for 2003-04 show that in most areas the University’s progression and completion rates now match its HEFCE/HESA benchmarks.

Some concerns remain about the high non-continuation rates of mature and part-time students and the relatively poorer performance of major-minor and joint honours students compared with single honours students. One important way of addressing these is for the University to require the AMRs of both courses to include detailed analysis of progression and completion statistics and suggestions for remedial action where appropriate. The University’s QAH requires course reports to be accompanied by a student data summary sheet produced from the Student Record System. In the sample of reports seen by the audit team this was not always the case. However, there was always a detailed analysis of student performance and the team understands that the format of these summary sheets is now much more user-friendly which should encourage inclusion in the future.

The University’s Student Record System has been developed substantially in recent years and now provides a fully integrated student management system. It allows students to register on-line, with built-in constraints preventing them from deviating from UMS regulations. It handles assessment mark entry, calculates progression and classification
outcomes and produces a useful range of statistical reports on student applications and performance. These reports can be accessed directly by all Worcester-based staff and can be made available to partnership colleges by email. Staff the audit team met also reported that the Planning Office, which produces statistical data for the Student Record System, is very supportive in providing additional information for student performance analysis.

86 From the evidence seen by the audit team, the University now has a comprehensive and integrated system for monitoring performance and completion data at all levels, is aware of any problems these data identify and is addressing them.

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

87 The Head of Personnel is a member of the Executive Group and the audit team found that the Personnel Department was integral to the development of staffing procedures. The SED stated that the University places ‘considerable emphasis on the development of processes and procedures to enable us to recruit, develop, reward and retain excellent staff.’ To this end it has made a number of substantial changes in its Human Resources Strategy over the last few years. It now has clear and well-publicised procedures which are integrated with the University’s Learning and Teaching Strategy, for example, in facilitating the appointment and development of part-time staff in areas where it is fruitful for staff to combine external employment with their teaching.

88 The University’s Recruitment and Selection Policy is available to staff on the intranet. It has clearly formulated guidelines for all aspects of the appointment process but is particularly strong in its requirements for the selection of staff, at all levels, to include a practical element as well as an interview. In order to raise the University’s research profile there is also now a requirement that all new academic appointments show evidence of competence in research, scholarship or relevant professional activity. After appointment, support staff are normally subject to a six-month probationary period and academic staff to a two-year probationary period. For academic staff, obtaining the University’s HE Academy-accredited Postgraduate Certificate in Learning and Teaching in Higher Education (PGCLTHE) is a requirement for completion of probation unless they already have an appropriate qualification or a substantial level of experience.

89 The University has a longstanding staff appraisal procedure which takes the form of an annual review between the member of staff and a senior manager. Staff met by the audit team felt this was a mutually-beneficial process. The present scheme has been in place since 1999 and the University is currently piloting a slightly modified scheme in which annual departmental plans and reviews will identify staff developmental needs and linkage to University objectives. The Personnel Department is also becoming more closely involved in monitoring the appraisal procedure to ensure uniformity in application.

90 The most significant recent change in the University’s Human Resources Strategy is to the remuneration policy. It was one of the first higher education institutions to adopt the national single pay spine, based on job evaluation, for all staff. It introduced an annual promotion scheme in 2005 together with clearly defined opportunities for additional and discretionary increments. Promotion is on the basis of achievement in two of the three areas of teaching and learning, research and scholarship, and management and leadership. The career development of existing staff and the ability to recruit new senior staff have been enhanced by the creation of professorial grade appointments and the introduction of a new award of Senior Academic for staff who have leadership responsibility for a specific area of provision or major projects. Quality of teaching is formally recognised as a criterion for promotion and has been encouraged by the introduction of a University Teaching Fellowship Scheme.
Although many of these changes have been very recent, the audit team found evidence through staff and students of a significant impact. On the basis of this, and its review of the relevant documentation, the team came to the view that the University’s arrangements for the appointment, appraisal and reward of all staff are sound, are working satisfactorily, and are well-tuned to progress its Learning and Teaching Strategy.

Assurance of the quality of teaching through staff support and development

The SED described the staff development opportunities at Worcester as ‘extensive’ and rated by staff as ‘one of the most positive aspects’ of working practice. From its discussions with staff and the evidence in the documentation, the audit team can confirm that this is the case. The extent to which development opportunities were available to, and taken up by, all levels of staff, including part-time and support staff, was particularly striking. The report associated with the confirmation of the Investors in People Award to University in May 2005 confirmed these strengths.

Development opportunities are delivered by different units, including the Personnel Department, the Academic Quality Unit, the Graduate School, the Equal Opportunities Centre, the Learning and Teaching Centre, Information and Learning Services and Registry Services. This wide range indicates the extent to which a staff development philosophy is embedded in all areas of the University’s service departments. There is an informal Staff Developers Forum convened by the Personnel Department to help coordinate this activity, however, the SED did recognise the need for a more formal framework and the University is currently developing this.

New staff are given an effective induction programme which runs three times a year. Normal practice also includes assignment of a departmental mentor and participation in the PGCLTHE for those new to higher education teaching. Subsequent support for the development of teaching is primarily the responsibility of the Learning and Teaching Centre and the Information and Learning Services. Considerable emphasis has been placed on supporting the relatively recent introduction of a University-wide VLE. During the DATS, the audit team saw evidence that this had been effective in leading to a very rapid incorporation by staff of VLE resources into their teaching.

The University’s well-established system of peer observation of teaching is at present used primarily as a development tool rather than for monitoring performance. The content remains confidential although developmental needs arising from the process are communicated through heads of departments to the Personnel Office. The University is aware that peer review is not occurring universally and is reviewing its monitoring procedures. However, during the DATS, the audit team saw evidence that although procedures varied somewhat they were well-embedded and seen by staff as effective.

An important element of the University’s Human Resources Strategy is the development of the research and scholarship of its staff. In addition to the provision of resources for attending conferences and registering for higher degrees, there are two principal mechanisms for achieving this. First, 20 days a year are allowed for research and scholarship in staff contracts. Staff wishing to make use of this allowance are expected to define their objectives and deliverables and agree these with their head of department. Second, the University introduced a Project Leave Scheme in 2004-05 to provide funding to cover staff leave to undertake a specified project. The Scheme has been made as flexible as possible to cover a wide range of research or scholarship related activity with permitted leave ranging from four weeks to a semester. Although there were no successful bids in the first year, partly because it coincided with the new annual promotions scheme, the audit team felt that this was an important resource which the University should be encouraged to promote.

The University is also addressing the specific
development needs of senior staff in a number of different ways, including attendance at Leadership Foundation events and problem-oriented away days. Senior staff are in turn providing internal development for heads of departments and principal lecturers and there is succession planning in place for all senior appointments.

98 Overall, the audit team came to the view that the University's arrangements for the assurance of the quality of its teaching through staff support and development were very effective. There is a well-embedded culture of staff development throughout the University and this development is raising both the quality of the teaching and the level of research, scholarly and professional activity.

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

99 The University offers no complete distance-learning programmes, but is actively engaged in developing web-enhanced and web-dependent modules following the adoption of a VLE in 2003-04 to replace an older system. An e-learning and on-line services team operates within ILS, and over half of all modules now actively use the VLE to support learning. Further development of e-learning is one of the key objectives of the University’s Strategic Plan 2004-08, and a revised e-learning action plan was in the final stages of consultation at the time of the audit visit. The University is planning to pursue blended learning to enhance the learning experience of onsite students and also to use electronic methods to support offsite students working at partner institutions. The SED also referred to proposals for a Lifelong Learning Network to cover Herefordshire, Worcestershire and the surrounding area, with a particular focus on web-based teaching and learning.

100 The SED stated that quality assurance processes for distance and on-line learning are broadly the same as for any other provision, but with some adaptation. In Summer 2004 the University conducted a thematic audit on alignment of its practices with the relevant section of the QAA Code of practice, including a draft of the revised Section 2 covering flexible and distributed learning published in September 2004. The audit resulted in a University action plan, to ensure that new course proposals are considered by a panel with appropriate expertise, that resources and student access are addressed, and that staff development is provided.

101 Annual course monitoring reports and the responses of staff and students indicated that the student experience of flexible and distributed learning is satisfactory. The audit team concluded that e-learning and distributed learning methods are being developed at an appropriate pace and that sound processes for quality management and enhancement are in place.

Learning support resources

102 Student learning is supported and facilitated through the ILS which amalgamates library, information technology (IT), media and print services. A central facilities department is responsible for maintaining and enhancing learning and teaching accommodation. In addition, subject support resources are available in departments as appropriate. The SED claimed that learning support resources are deployed effectively, are responsive and well-run, and contribute to the inclusive learning experience which is central to the University’s strategic plan. The ILS has developed its own strategic plan through a process of consultation with staff and student stakeholders within and outside the University, and the strategic plan and e-learning strategy are being taken forward by an action planning group as part of the current review of broader Learning and Teaching Strategy.

103 Library facilities are provided in the Peirson Library. Expenditure per full-time equivalent has been rising in the last two or three years, with a 13 per cent rise in spending on books between 2004-05 and 2005-06. Careful consideration is given to matters such as appropriate loan periods for textbooks in high demand to maximise their usefulness to students. Students have access to libraries in
neighbouring universities including Birmingham and Wolverhampton, and an allowance of up to 15 interlibrary loans. Subject librarians liaise actively with departments and participate in quality assurance processes, including course validations. A new city-centre site for the University, to include additional library resources, has recently been approved.

104 Student access to computers is claimed to be good; 115 new computers were installed in summer 2005 and 65 computers are available on a 24-hour basis. The majority of the campus now has a wireless network. Students reported good access to computing services from home.

105 In parallel with the development of its electronic networks, the University has embarked on a programme of upgrading teaching accommodation. A ‘modern classrooms’ user group has assisted in the planning of these developments, and over half of classrooms had been refurbished by summer 2005.

106 There are relatively few postgraduate research students in the University posing the question of how to foster a lively and vigorous research culture. This has been recognised through the provision of the Graduate Research School, which provides shared office accommodation and computing facilities for full-time research students and facilities for part-time students.

107 Learning resources are monitored in several ways. All service departments produce annual reports, and are subject to quinquennial review with external participation. Resources are also explicitly addressed in AMRs and student feedback is collected through course committees and module feedback. An ILS user group was set up in 2004, and the University recently participated in a national survey of the quality of information services. All of these sources of information inform short-term actions and longer-term planning to improve services.

108 In the SWS, students expressed general satisfaction with the quality of teaching accommodation, and regard the use of the VLE to be ‘excellent’. These views were reinforced by students and staff during the audit visit. The SWS survey on the quality of library and general computing resources met with more mixed responses: while two-thirds of respondents felt that library and computing resources were at least adequate, about a third rated them as unsatisfactory. The SWS also highlighted some specific issues, including excessive noise in the library. In Summer 2005 the University increased and upgraded computer facilities and relocated the quiet study areas. During the audit visit, students and staff reported that these improvements have substantially addressed the issues raised in the SWS, and that the noise problem has been successfully resolved.

109 Students who met the audit team were satisfied with the general level and quality of learning support resources, and said that they appreciated the efforts being made by the University to improve resources.

110 The audit team concluded that the University has in place appropriate institutional and local mechanisms to identify and respond to user need and to assure the quality of its learning support resources, and that resource allocation is linked to the focus on learning and teaching in the institution’s mission.

Academic guidance, support and supervision

111 The SED expressed confidence in the level of academic guidance and personal support provided for students, which it describes as a ‘major strength’ of the University. It noted the success of this aspect of its provision in external reviews and in feedback from students, and the ‘open and supportive environment’ which is integral to the University’s mission.

112 Departments are responsible for implementing a personal tutor system which provides both academic and personal support and also for embedding PDP into the curriculum. A National Teaching Fellow is taking forward the PDP programme. The effectiveness of these systems is monitored at departmental and institutional level, and the SED reported that in both instances good practice has been identified,
but with significant variability between departments. The University provides support for students in developing generic academic and study skills through modules run by ILS and the Equal Opportunities Centre; these modules are very popular with students and the range of workshops and web pages has recently been increased.

113 Registry Services provides guidance on matters such as complaints, appeals and mitigating circumstances and also operates a programme advisory service for students on module choice within the UMS. Both the SED and the SWS commented that this service had been overloaded at particular times of the year. During the audit visit the team saw evidence that this issue has now been effectively addressed through an electronic system for module choice and an appointment system for advice sessions at times of peak demand.

114 The University has about 100 full and part-time research students who are all affiliated to a Graduate Research School. As well as office accommodation and computing facilities, this provides handbooks for students and supervisors, a newsletter and web pages, and also facilitates groups for support and feedback. Routine support and guidance is provided by directors of study and by research supervisors, a significant number of whom are external to the University, including a few who are overseas. During the audit visit students confirmed that this external supervision is effective and that they have resources and opportunities to travel to meet their supervisors. Training is available for supervisors, and a University Code of Practice for research supervisors reflects the Code of practice, published by QAA. Research students in receipt of a bursary contribute teaching or other support to their departments for up to six hours a week; where appropriate these students are encouraged to attend part of the PGCLTHE.

115 Student comments in the SWS supported the University’s statement that in general the academic and personal support provided by tutors is good. Around 88 per cent of respondents rated the availability of tutors as sufficient, good or excellent and the SWS commented that tutors are friendly and helpful. A majority of respondents felt that they received useful feedback on their work and progress.

116 During the audit visit, students spoke very highly of the accessibility and helpfulness of all staff, and confirmed that the personal tutor system is effective, with personal tutors engaged with the students’ academic progress. This is especially the case where, for instance in Sports and Exercise Science, the personal tutor meets regularly with the student to discuss their PDP.

117 The audit team concluded that academic support and guidance is available for students at all levels, that it is well thought through and effective.

**Personal support and guidance**

118 In addition to the combined academic and personal support offered to students by personal tutors and other staff, the SED described institutional structures designed to underpin its ‘inclusive and supportive institutional culture’. In 2004 an integrated Student Services Department was formed to bring together services including pre-entry guidance, disability support, welfare and financial advice, nursery, counselling and careers advice. Performance of Student Services is monitored through their levels of use and by feedback questionnaires and student surveys, and is measured against annual performance targets and service charters, which will be updated in 2005-06. Most parts of Student Services have quality assurance manuals. The special needs of international students are addressed by an International Centre, which runs a two-week special induction programme prior to the start of each academic year and provides a point of contact. Training for hall wardens includes awareness of the special needs of international students.

119 In pursuit of its institutional mission, the University has undertaken a number of development activities aimed at improving student employability, retention and achievement. To support these aims, the post of Student Achievement Officer has been
created. Initial tasks have included a revision of exit interviews and a detailed analysis of student retention and achievement and the reasons for academic failure.

120 An Equal Opportunities Centre provides and coordinates support for students with disabilities in all aspects of their University life. The SED described the Centre as a particular strength, with a national reputation. The Centre has been successful in attracting funding for projects directed to the development of practical student support and of strategies for inclusivity. A National Teaching Fellowship has been awarded to the Head of the Centre.

121 Some areas for improvement in student support identified in the SED, include fuller access to services for part-time and off-site students and increasing attendance by departmental representatives at Student Affairs Committee. Overall, however, the SED claimed that student support and guidance is a particular strength of the University, basing this view on student feedback and external review. The SWS supported this claim in general, with very high approval ratings by respondents to the SWS questionnaire.

122 Information provided during the audit, including the views of staff and students, supported the observation that effective personal support is provided for all students, including part-time, postgraduate and international students. During the audit visit, students highlighted strong support for students with disabilities, including dyslexia. Service charters set out the scope and levels of service to be expected. Students described their experience of Student Services as being comprehensive and readily accessible, and referred to a 'friendly and helpful' atmosphere at departmental and institutional levels. The audit team concluded that the University is justified in claiming student support as a strong feature of its provision.

**Collaborative provision**

123 The SED identified a number of collaborative programmes mostly located in the Hereford-Worcester region (see paragraph 9) in which the University is the only higher education provider. A few are in the wider West Midlands area and a small number are further afield and relate to subject areas where the University has particular expertise. Collaborative provision is an expanding area within the University with much recent growth in the development of Foundation Degrees, although the numbers on these programmes have remained small. At present there is no overseas collaboration except for a small piece of educational provision in Dublin. The University has established a number of international staff and student exchange arrangements and indicated that it is considering developing more overseas collaborations, such as articulation agreements. It is currently reviewing its partnership strategy in the context of an emerging Lifelong Learning Network for the region. The University also signed a strategic partnership with the University of Birmingham in 2002.

124 The University was commended in the 2001 continuation audit for the partnership focused management of its collaborative arrangements. Subsequent PSRB reports have echoed this and the University has continued with the same inclusive approach to managing its collaborative provision. A thematic audit was undertaken in 2004 which mapped University procedures against the revised section of the Code of practice. As a result a number of changes were made to procedures including the establishment of the EPPSC of the AQSC, the introduction of quinquennial review of institutional partnerships, and the revision and re-issuing of all partnership and course agreements to reflect the revised Code.

125 Processes and procedures relevant to the management of collaborative provision are set out in detail in the QAH. In general these mirror the processes and procedures used for University provision. University policies and procedures and operational information for partners is set out in a Partnership Handbook. Potential new partners are evaluated against a set of criteria to measure the fit between the University and the potential partner and the
rationale for the partnership. Potential new partnerships must be approved by the Executive Group before they are taken forward under the leadership of the Director of Lifelong Learning. The process culminates in a recommendation to AQSC to permit the signing of a formal partnership agreement. The Registrar's Office maintains a register of such agreements.

126 The development of courses with partner institutions follows a process very similar to that adopted for the development and approval of new University provision. Proposals for new courses are developed jointly by the partner and the department to which the provision has been assigned with the latter taking the proposal forward to the Planning and Resources Committee. Validation follows the same process for internal provision except that it results in the signing of a formal course agreement with the partner. Course agreements are reviewed and modified annually as part of the annual monitoring process and all courses are subject to periodic revalidation. Departments write a separate section on collaborative provision as part of their annual monitoring.

127 At the operational level the link tutor for each arrangement is central to the management of the relationship between the University and the partner. A role profile for link tutors is set out in the QAH. Link tutors write an annual report which is sent to the DQAC and to EPPSC. Link tutors meet once per semester in a University-wide forum to discuss matters of common interest.

128 At the institutional level the management of collaborative provision is overseen by the EPPSC which includes representation of all departments. For each further education partner, where there are multiple programme arrangements, a Joint Planning Group (JPG) includes senior management from the University and the partner. JPGs meet each semester with an informal agenda primarily to discuss strategic issues. Relationships with partners have been strengthened by the designation of a new post: the Director of Collaborative and Sub-Degree Programmes. Partner institutions are also invited to attend the Higher National and Foundation Degree forum to discuss matters of mutual interest.

129 The University approaches its partnership arrangements in a developmental fashion. Close working relationships between staff are expected and staff in partner colleges are encouraged to participate in University development activities including the PGCLTHE. The University has identified the need to ensure that staff changes are processed more effectively in order that development opportunities can be made available quickly. The University is also working with its partners to develop access to the University's VLE for the benefit of both staff and students.

130 The audit team noted as good practice the close relationships that exist between the University and its partners facilitated by the work of the link tutors and the provision of multiple opportunities for staff at different levels in the institution and its partners to work together. Notable also is the way in which the University has used the Code of practice to modify its management of collaborative provision in order to ensure that the Academic Infrastructure operates effectively in relation to programmes delivered by partner institutions. In particular the establishment of the EPPSC provides a means of monitoring the embedding of these changes.

Section 3: The audit investigations: discipline audit trails

131 DATs allow consideration of institutional processes at work at the level of the programme and, through review of student work, consideration of the quality of learning opportunities available to students and the standard of academic achievement.

Business and management

132 The DAT in Worcester Business School covered the BA (Hons) Business Management and the Postgraduate Certificate/Diploma/MA in Management Studies. The undergraduate programme can be pursued as a major or minor part of a degree, as a joint honours
degree, or as a single honours degree. The latter allows for specialisation in one of four areas, marketing, finance and accounting, human resources or the global economy, as well as for a general degree in business and management. Both undergraduate and postgraduate programmes are available in full and part-time modes.

133 The last periodic review of the programmes took place four years ago, and the audit team was therefore provided with a DSED written for the purposes of the audit. The DSED included a programme specification and a set of helpful annexes including AMRs, external examiners reports, module evaluations and course committee minutes. The DSED was both descriptive and evaluative and included proposed actions identified in the course of preparing the document.

134 The DSED noted that the intended learning outcomes of both the undergraduate and the postgraduate provision was mapped against the relevant subject benchmarks during revalidation in the year 2002-03. At the same time the two level undergraduate degree was disaggregated into a three level degree to conform with the requirements of the FHEQ. The School AMR contains a discussion of the effectiveness of the implementation of the Code of practice. The School also monitors the requirements of PSRBs such as the Chartered Institute of Marketing and the accounting bodies in order to assist students to gain professional exemptions. The programme specification provided to the audit team was based on the University template but did not reflect current information, in particular the revised assessment regulations which have reduced the availability of compensation. The audit team would advise the University to reflect on how it may ensure accurate updating of specifications.

135 Programmes in the school are subject to the University’s processes of annual and periodic review. The course leader writes an extensive commentary on the operation of the programme over the previous year and submits this, together with supporting documents and an action list, to the DQAC during the autumn term. A member of the DQAC is appointed as a scrutineer to read and check the material before the report is presented to the Committee. The course AMRs are discussed by the DQAC in parallel with the AMR prepared for the School. The implementation of action plans is monitored later in the year and in the subsequent year’s AMRs.

136 The course AMRs provided to the audit team were comprehensive and contain analyses of student recruitment, progression and completion. The School faces difficulties caused by falling student numbers at both undergraduate and postgraduate levels, although numbers now appear to be stabilising. Data has been used to shed light on the problem and to underpin proposals for remedial action such as raising entry standards and the development of new degree titles. Progression and completion rates and degree classifications are benchmarked for undergraduates against the rest of the UMS and national figures. Retention has been identified as an area of concern and remedial actions include identifying at risk students and requiring them to seek tutorial support. Through this example and others, the audit team concluded that the annual monitoring process was in general robust.

137 The AMR process is augmented by the work of the Post-Results Moderation Group (PRMG) which selects modules for further review. The outcome of this exercise and any wider implications for the School are discussed in the School AMR and the audit team recognises this as a feature of good practice.

138 All programmes are subject to revalidation. The MA programme was revalidated in 2004-05 and was brought more into line with postgraduate provision elsewhere in the University to facilitate sharing of modules. As noted above, the undergraduate programme was revalidated in 2002-03.

139 The external examiners' reports seen by the audit team expressed satisfaction with the quality and standards of the programmes.
Their reports feed into the AMR process and the audit team was able to confirm that issues raised by external examiners lead to action lists which are implemented. The AMR report is used as a means of communicating to externals that their reports have been discussed and acted upon.

140 The assessment regulations for both undergraduate and postgraduate programmes have been amended to conform to the University's UMS and PRF regulations. Work is being undertaken to increase the level of formative assessment in the undergraduate programme in line with institutional policy and to address issues relating to retention.

141 The audit team saw examples of coursework, examinations and projects. These assessments showed evidence of careful marking, moderation, double-marking of projects and helpful feedback to students. For examinations, model answers and marking schemes were provided. The team was able to confirm that the standard of student achievement was appropriate to the title of the award and its location within the FHEQ.

142 Students receive a University handbook and a UMS Handbook as well as course guides and leaflets about particular services. In addition students receive a CD-ROM with a compendium of handbooks and information as well as having access to similar material on the intranet. The students, that the audit team met, confirmed that they found these helpful and that they received sufficient information for their needs. Students can monitor their progress and receive information on module choice through the Student Online Learning Environment (SOLE) interface.

143 Students also confirmed that the library resources and recently upgraded IT provision was sufficient for their needs. A dedicated member of ILS staff attends course meetings and contributes to programme development. The use of a commercial VLE to support modules is relatively new and its use is currently limited. Although not widely used by the students met by the audit team, further development and use of the VLE was seen by them as valuable and has been identified by the School as a priority. Students reported very favourably on the quality of the teaching that they received. There are limited opportunities for students to interact with the world of practice during their studies. The DSED identified the enhancement of employer links to achieve this as an area for development.

144 The Student Qualities Profile (SQP) has been embedded in the structure of the undergraduate degree through a first-year personal development module and in the learning outcomes of second and third-year modules. Individual pursuit of the SQP beyond the first year is voluntary and a minority continue to participate and find it helpful.

145 The DSED stated that the School provides a 'supportive, student-centred learning environment that allows for the diversity in student backgrounds'. All students are allocated personal tutors and staff maintain an open-door policy for students seeking advice and support. Student support is extensive and was considered to be excellent by the students who met the audit team. Staff are also proactive where they see students underperforming or at risk of falling behind. The audit team noted this as an area of good practice.

146 Undergraduate students elect representatives who sit on the course committees which meet twice a year. The students who met the audit team felt that this was an effective vehicle for raising issues and getting them resolved. Typical issues raised recently concern aspects of the delivery of particular modules and teaching accommodation. The small number of postgraduate students were satisfied that matters could be raised more informally with staff.

147 Overall the audit team found that the quality of learning opportunities was suitable for the programmes of study leading to the award of BA Business Management and the Postgraduate Certificate/Diploma/MA in Business Management.
Sport and exercise science

148 The DAT covered selected courses in the School of Sport and Exercise Science: BSc (Hons) Sports Coaching Science, BSc (Hons) Sports Studies, and an HND Sports Studies programme which is jointly taught with Worcester College of Technology. The audit team also saw documents relating to the recent validation of a new master’s programme comprising courses in Sports Coaching, Sports Management, and Sport and Physical Education. A full DSED was provided along with a comprehensive collection of documents on CD-ROM.

149 The DSED stated that programmes are specified using an outcome-based learning model which implements the University’s learning outcomes policy. Learning outcomes are aligned with relevant FHEQ level descriptors and benchmark statements and carefully mapped to the aims of the School and the courses. Programme specifications and course definitive documents support this statement, and also explicitly address the alignment of programmes with relevant sections of the Code of practice including assessment, placement learning and equal opportunities.

150 The core process for routine internal monitoring and review in the School is the AMR. The standard report format incorporates statistical data, evaluation by students, staff and external examiners, consideration of learning resources and an explicit confirmation that the course operates in alignment with the FHEQ. An action list is appended to each AMR; progress on the actions is monitored via mid-year review and closed at the following AMR. Course AMRs are also considered by DQAC and contribute to the Department’s annual report to AQSC. The auditors concluded that this process is effective for all the programmes seen, including the collaborative HND programme.

151 AMRs seen by the auditors contain full monitoring statistics and also a module-by-module analysis of mean marks, Pass rates and grade distribution. Pass rates at each level are considered for the report year and compared to the previous year, and the data are used in the generation of action lists for each course. The School has also implemented a number of strategies to improve retention and completion.

152 A notable feature of the quality monitoring process is the use of post-exam board module review. Selected modules are referred to a review group by the examination board and are considered in greater detail, including sampling of marked student work. They are then rated across a range of indicators including appropriateness of assessment items, achievement of learning outcomes, feedback given to students and actions taken in response to feedback from students. Outcomes of the review are fed back to the module leader and reported to the examination board. Reports seen by the audit team confirmed that this is an effective mechanism for quality enhancement at module level.

153 The DSED described the meeting of staff and students at course committees as ‘the bedrock of enhancement’. Minutes of these meetings, which are held three times a year, confirm that they are well attended by staff and students and cover a wide range of topics. The minutes of each meeting incorporate a task list with action allocated to a member of staff, and this list appears under ‘matters arising’ at the next meeting so that progress and completion can be monitored and recorded. Students and staff confirmed that the course committee provides for effective student representation on all course-related matters, and that action is taken in response to student input.

154 Student feedback is collected at the mid-point and end of each module. Students and staff explained that this process is embedded into the departmental culture, and provided examples of changes and improvements resulting directly from such feedback.

155 The audit team saw copies of recent external examiner reports for the programmes included in the DAT. These reports are almost universally positive, commenting favourably on the range of assessments, arrangements for external examining and the professionalism with which examination boards had been conducted. They confirm that the content of
programmes conform to benchmark statements, and that standards of programmes are comparable with those found elsewhere. External examiners meet students to discuss their experience of the course. The audit team saw copies of action plans responding to external examiner reports.

156 Examples of student work from all stages of the programmes were made available to the audit team. As a result of the evidence available to the team it could confirm that the expected standard of work was appropriate to the learning objectives and aligned with the qualification level as described in the FHEQ.

157 Students are provided with a University handbook and a UMS handbook setting out the regulatory framework of their programme, along with a detailed and helpful course handbook. A complete range of documents, including University policies and procedures, study skills guides and handbooks, is provided to each student on CD-ROM and is also available on the student web pages. Complete module descriptors, including learning outcomes and how they link to assessment, are provided, and individual student web pages list available module choice and marks achieved to date.

158 Student support is described in the DSED as taking place through a tutorial system which links to a customised PDP process. The School has a PDP strategy in which undergraduate students meet with a personal tutor once each semester to consider and update the student's progress file. HND students meet a tutor much more frequently. Students who met the audit team confirmed that this process is effective in helping them to monitor their progress and set personal goals, and staff commented that the success of the PDP programme in the School is influencing policy elsewhere in the University. Students placed particular emphasis on the supportive atmosphere of the School and the open-door policy of the staff.

159 The DSED described the wide range of specialist equipment, laboratories and facilities available to students, some of it described as state-of-the-art, but also referred to the pressure on equipment resulting from increasing student numbers. Students who met the audit team during the visit commented that the University lacks a swimming pool, but that in their view resources are generally good, in particular the indoor sports facilities, IT provision, the growing use of the VLE and refurbished classrooms. Staff reinforced these impressions: the audit team also noted the high level of staff participation in professional development activities within the School.

160 Overall, the audit team found that the quality of learning opportunities is suitable for the programmes of study leading to the named awards of the School and that those awards were appropriately situated within the FHEQ. Student support mechanisms are strong, external examiners are positive about quality and standards and the School has effective procedures for quality management and enhancement.

Psychology

161 The scope of this DAT was the programme leading to the award of a BSc in Psychology. This degree is accredited by the British Psychological Society (BPS) as providing the Graduate Basis for Registration by the Society. The teaching of psychology is the responsibility of the Division of Psychology which is located within the Institute of Health and Social Care, one of the six budget holding departments of the University. The Division currently offers no taught postgraduate provision. The undergraduate modules it teaches are also taken by students from a wide variety of other courses within the UMS.

162 The DSED provided to support the DAT consisted of a specially written document describing and evaluating the Division's teaching provision. This was full and detailed and usefully self-critical. It was supported by a comprehensive set of documents including those for the Subject Review of Psychology held in June 2004, the 2005 BPS Accreditation Report, the programme specification, AMRs, external examiner reports, the Student Handbook and a sample of student work. The audit team considered that taken together these documents provided a
comprehensive and self-critical evaluation of the University's provision in psychology.

163 The audit team found the programme specification to be generally full and clear. There was good mapping between the curriculum and the learning outcomes and the Subject benchmark statement for psychology. Both the programme specification and the DSED showed a thorough and responsive awareness by the Division and its staff of the guidance offered by the FHEQ. However, the team found some discrepancy between the requirements for achieving a degree as given in the regulation of assessment section of the programme specification and those in Section 10 of the UMS Student Handbook and Section J of the University's UMS Regulations. For example, the last two have a specific requirement for the number of Level 3 modules to be passed for an honours degree which is not present in the programme specification.

164 The audit team found good evidence that the University's quality assurance procedures were operating fully and effectively at this level. AMRs are reviewed and commented on by the DQAC. They follow a formal template defined by the QAH. The centrally provided Student Data Summary Sheet, which the QAH requires to be attached was not present in either of the AMRs seen by the team, but this was compensated for by a very detailed analysis of student data. In all other respects the template was followed and the reports seen by the audit team indicated a critical self-evaluation with a reasonable follow through from year to year.

165 The audit team also saw good evidence of careful response to external examiners' reports. These are first considered at the post-exam board module moderation meeting before being responded to by letter from the Head of Division. They are also reviewed and responded to in the AMR which is also sent to the external examiners. The examiners' reports seen by the audit team were detailed and helpfully critical and these criticisms were carefully considered, leading to changes where appropriate. The post-exam board module moderation meeting also reviews in detail a small number of individual modules identified at the examination board. All aspects of these modules are considered and recommendations made to the module leaders. This seemed to the audit team to be a particularly effective and timely process for monitoring and developing the delivery of teaching.

166 The Division was one of the first areas of the University to undergo the new Subject Review procedures instituted in 2003-04. The detailed SED produced for this indicated that it was taken very seriously by the Division and the subsequent report, produced by a panel including two external assessors, was full and frank. However, the audit team considered that the report was rather generously summarised on the Teaching Quality Information (TQI) website. Central to a number of the recommendations was the appointment of a new Head of Division in 2004-05 and the follow-up documentation indicated that the Subject Review had led to useful changes. Appreciation of the value of recent developments shown was mentioned by students seen by the audit team.

167 The audit team considered a wide range of undergraduate work from all levels contributing to the degree under review. It was satisfied that the nature of the assessments and the standard of student achievement met the expectations of the programme specifications and the subject benchmark statement. In all cases, the standards of achievement were appropriate to the levels of award obtained.

168 Students do not sit on the Division's committee responsible for the planning and management of its teaching, but there are several other routes for their input to be delivered. Regular course committees have substantial representation from all levels and types of students and minutes of their meetings go to both the DQAC and to external examiners. Student representatives are given time in lectures to collect feedback from students and the minutes of committee meetings are available on the web and displayed in the Division. There is a general 'student area' on the web for student
representatives to use. Feedback is also obtained from mid and end of module evaluations. The former is informal and this year is being carried out by the Course Committee, but the latter is by anonymous questionnaires. Examples seen by the audit team in the minutes of the Course Committee and offered by students indicate that these mechanisms lead to effective changes.

169 Students obtain information about the academic and non-academic aspects of the University in a number of different ways. There is a very full Psychology Handbook, a University Student Handbook and a UMS Handbook. These are available on a CD-ROM for new students and are updated each year on the web. Each module also has a module specification or contract. The students the audit team met felt they had sufficient information for their needs and always knew where to find new information. Students were also enthusiastic about the quality of the non-academic support available to them. Personal tutors, who were also engaged with academic progress, were usually proactive and there were plenty of other people who were approachable and helpful, both in the Division or the University and in the central support services.

170 The students the audit team met reported that in general learning resources were reasonable. Lecture accommodation was good. They appreciated the space dedicated to psychology, though felt that some of this was of rather low standard. They also felt that library stock could be improved. This is partly relieved by good access to other academic libraries, though these are not always easily reached by students. They commented favourably on the good and expanding access to web-based resources both on and off campus.

171 Formal structures for overt personal development planning using the University's SQP scheme are not well-developed in the Division. The students the audit team met were aware that it occurred but were not fully engaged. The nature of psychology degrees, including the one at Worcester, is such that they do already contain a wide variety of personal development activities but it is also valuable to students if there can be a mechanism for making these more explicit. The Division is addressing this in a number of ways, including the creation of a psychology-specific SQP and the appointment of a designated SQP tutor.

172 The audit team saw good evidence of effective staff development. There are annual staff development review interviews which feed into divisional planning. The training to facilitate the recent and rapid development of the web for teaching an important example of this with particularly favourable student comments on the use of the discussion board facilities. There is a dyadic system of peer review of teaching, new staff take the PGCLTHE, and several staff are active in pedagogical research and external teaching-related activities.

173 The audit team considered that the quality of learning opportunities was suitable for the programme of study leading to the award of a BSc in Psychology and that this programme was appropriately located within the FHEQ.

Section 4: The audit investigations: published information

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

174 The audit team viewed copies of the prospectus and web material available to prospective students as well as handbooks and intranet materials available to current students. Students receive a University Student Handbook, guides to central services and handbooks and guides relating to their chosen degree scheme and pathway. These are issued both in hard copy and on CD-ROM. The same materials can be accessed through the University's SOLE web pages which also provide students with personalised information about their status and studies. The team had the opportunity to discuss the accuracy and utility of these materials with student groups it met through the DATs and with SU during the briefing visit.
The Marketing Department is responsible for the production of prospectuses. In order to ensure accuracy individual entries are signed off by those originating them, for example departments. Overall responsibility for the quality of published information lies with the Vice-Chancellor, but is exercised through the involvement of senior managers in the production process. Following a review of validation procedures draft prospectus entries are now submitted to the PRC at the planning approval stage to further ensure the accuracy of entries relating to new programmes. The Marketing Department is also responsible for corporate web pages and vetting pages generated locally. To assist this process a content management system is employed.

The Registry is responsible for the production of University and degree scheme handbooks and also provides a template for course handbooks together with standard paragraphs about common policies and processes. The audit team saw evidence that templates influenced the overall structure of handbooks, although the final products varied considerably, with some providing more comprehensive information about matters such as assessment regulations than others. Recent changes to assessment regulations and the variable levels of information in handbooks have contributed to student uncertainty. The audit team would advise the University to reflect on the desirability of variation in the completeness of information on assessment.

Much of the information about programmes provided collaboratively follows a similar path. The link tutor is responsible for keeping copies of handbooks and ensuring that the website, marketing material and prospectus have been checked. Action is taken if materials published by partner institutions are felt to be misleading.

The SED noted that problems have arisen in the past concerning the accuracy of information provided about the module choice available to students. A thematic audit was undertaken of the issues and as a result steps have been taken to ensure that prospective students are aware of limitations on choice and to mitigate the impact of falling numbers on available modules, particularly for part-time students. The SWS noted a number of areas where students felt that the information provided to them could be improved. For prospective students this included matters such as information on accommodation, and for current students, for example, information on reading lists. Following receipt of the SWS, the University responded to the issues raised about information provided to students and allocated responsibility to specific staff and committees to monitor and improve the provision with respect to the points raised.

The students who met the audit team spoke positively about the accuracy and usefulness of the information they received about the University. The prospectus, open days and the website gave students a picture of the University which was borne out by experience. Students were also complimentary about the course handbooks and departmental information.

However, the SWS reported that students were often unaware of, or unclear about, appeal procedures and the calculation of degree classes. This lack of knowledge was corroborated by students who met the audit team through the DATs. Information about appeals is available to all students on paper and electronically through the University Student Handbook and the UMS Handbook. The team concluded that the University pays serious attention to the provision of useful, timely and accurate information for students. In general the quality of published information is good. However, there appeared to be a lag in updating local student handbooks, and a variability in their content, that resulted in some students being poorly informed about key matters, in particular the operation of the assessment regulations (see paragraph 176). The audit team would advise the University to consider ways for ensuring that students receive accurate and up-to-date information in student handbooks.
Reliability, accuracy and completeness of published information

181 The University reviewed its information provision in 2004 in the light of the requirements of HEFCE’s document 03/51, Information on quality and standards in higher education: Final guidance as a result of which a new format was adopted for external examiners’ reports. The majority of reports now have summaries that are published. Missing summaries are requested and advice is being developed to encourage external examiners to include more qualitative information about programme strengths in their summaries for publication to reflect the very positive comments in their full reports.

182 The first summaries of periodic reviews of provision have now been published on the TQI-HERO website. As a result of this experience the University is modifying the process by which such summaries are written and signed off.

183 The periodic review process laid down in the QAH does not indicate specifically who is responsible for writing and approving the TQI summary of a periodic review. AQSC has expressed concern at the lack of clarity in the recommendations resulting from periodic review and the procedure adopted for producing summaries at the event itself. As a result the summaries for the two recently completed reviews to be published were rewritten and a review of the process of production of TQI summaries was instigated. The audit team noted that the published documents that emerged from the rewriting process did not reflect fully the conclusions of the extended reports from which they were drawn. The revised process calls for summaries to be drafted after the event but to be confirmed by panel members in parallel with the full report. The team would advise the University to assure itself that the revised process will fully reflect the conclusions of the full report.

184 The University has added its Teaching and Learning Strategy and employer links to the HERO website and has also provided a link to the University web pages which contain programme specifications. The variability in the quality and consistency of the published programme specifications has been noted elsewhere in the report (paragraphs 68, 134).

185 The Registry and the AQU continue to monitor the publication of TQI materials and to develop practice with respect to collaborative provision.

186 The audit team concluded that confidence could be placed in the accuracy, integrity, completeness and frankness of the information published by the University on the HERO website. However, the University is urged to keep the processes for producing summary reports of periodic reviews under review and to ensure that published programme specifications are consistent and up-to-date.
Findings
Findings

Introduction

187 An institutional audit of the University of Worcester (the University) was undertaken during the week commencing 21 November 2005. The purpose of the audit was to provide public information on the quality of the University's programmes of study and on the discharge of its responsibility for its awards. As part of the audit process, according to the protocols agreed with the Higher Education Funding Council for England, the Standing Conference of Principals and Universities UK, three discipline audit trails (DATs) were carried out. This section of the audit summarises the findings. It concludes by identifying features of good practice revealed by the audit, and in making recommendations to the University for enhancing current practice.

The effectiveness of institutional procedures for assuring the quality of programmes

188 In its self-evaluation document (SED) the University outlined its approach to quality assurance and standards: 'the quality strategy aims to achieve comprehensive coverage by addressing quality across the entire university'. The SED noted that this covered: course approval and validation, course and departmental annual monitoring, periodic subject review; partnership approval and review; monitoring and review of all service areas including learning support; and monitoring and review of all research and specialist areas. Student views and opinion are captured through: the annual institution-wide student satisfaction survey, student evaluation of modules, staff-student liaison meetings and through representation on committees at departmental and institutional level. The framework for quality and standards for collaborative provision is exactly the same as that for University-based provision. The institutional level the management of collaborative provision is overseen by the Externally Provided Programmes Sub-Committee (EPPSC) which includes representation of all Departments.

189 Operationally, the University's framework for managing quality and standards is clearly and comprehensively set down in the Quality Assurance Handbook (QAH). It has not changed radically since the continuation audit in 2001, when the handbook was regarded by the audit team as a well-structured manual supporting the comprehensive and thorough quality assurance system. In the view of the audit team, it continues to offer clear guidance to users on constitutional and procedural mechanisms to ensure the University's responsibility for awarding its own degrees is satisfactorily discharged.

190 The Head of Quality Assurance, who reports to the Director of Quality and Educational Development (DQED), is responsible for the operations of the Academic Quality Unit (AQU) that administers the University's arrangements for programme approval, review, external examiners and annual monitoring. The SED claimed that the Registrar, DQED and Head of Quality Assurance work closely together to ensure an integrated approach to the management of quality and standards. The view of the audit team is that this is the case.

191 The Academic Quality and Standards Committee (AQSC) is the key committee for the 'formulation and development, evaluation, and promotion of university-wide quality assurance policies and procedures...’ and acts as the conduit between a number of subcommittees with responsibilities for specific branches of the University's provision: undergraduate studies; postgraduate studies, externally provided programmes and the University's six departmental quality assurance committees (DQACs). The business of AQSC is extensive, but from the evidence seen by the audit team, the committee discharges the responsibilities delegated to it by the University's Academic Board.

192 The procedures for internal approval, monitoring and review are set out in the QAH. The SED described the University's four stage process: (i) an initial phase of planning approval (ii) the validation of course proposals
(iii) annual monitoring at the level of the course and academic department, and (iv) periodic subject review, which includes the quinquennial revalidation of approved courses.

193 Validation events are managed by of the AQU and it provides training for chairs of approval panels. External peer membership is standard, reflecting the University’s constant commitment to the external perspective. The AQSC monitors the validation process through AQU reports. Through documentation supplied by the University demonstrating the thoroughness of this process, the team concluded that the University’s approach to validation is robust and reflects expected practice across the sector.

194 Departments are the key sites for annual monitoring with course teams producing annual monitoring reports (AMRs). These are summarised by the head of department in conjunction with the DQAC in order to produce an overall departmental report for ASQC on the quality and standards of departmental provision.

195 Subject to the condition that the audit team was only able to track one cycle of the University’s current means of handling departmental annual reports, the team noted that at the moment course-level annual monitoring identifies progress on previous year’s action list, with timescales set for forthcoming objectives. At the same time, there is evidence that updating of programme specifications (as set out in the QAH) does not always happen. The team also noted that certain omissions in the DQAC signing off procedures has led to what the team concluded are inaccuracies in some of the University’s publicly available information. In connection with this, the team noted the University’s intention to review its committee structures, and in view of these observations the team would recommend that the University expedite the proposed review of the effectiveness of the DQACs as soon as possible.

196 Beyond annual monitoring, the University has in place a system of periodic (quinquennial) subject review. The review, and accompanying responses by the head of department, is considered by AQSC. The team was able to consider subject reviews in psychology and geography and concluded that the process was carried out consistent with the claims in the SED.

197 The SED stated that ‘UCW regards external involvement in internal quality processes as pivotal in setting and maintaining academic standards, and in benchmarking the quality of our provision’. From its review of validation documentation carried out in the course of the DATs, the audit team concluded that this is a commitment is demonstrated by the University, and reflects a wider and serious readiness to take external benchmarks and reference points into account when monitoring its quality and standards.

198 At institutional level Student Union officers are members of the Board of Governors, Academic Board, AQSC, Learning and Teaching Committee, the Student Affairs Committee, and the Graduate School Committee. Both the Board of Postgraduate Studies and the Board of Undergraduate Studies also have student representatives. At departmental or divisional level the representation is based primarily in course committees. Examples seen by the audit team indicated that these had full representation from a wide range of students and discussed operational as well as quality issues. The audit team found that, in line with the University’s view, mechanisms for student representation at operational level were generally comprehensive and effective.

199 The SED described two principal routes for obtaining feedback from students. Course committees normally meet twice a year and provide a forum for student representatives to raise issues which they have identified. The audit team saw evidence in the DATs that these were working well, with changes being effected and information being fed back to students on these changes. The second route for obtaining feedback is through module evaluation. The audit team saw evidence in the DATs that there was complete and very full module evaluation.
Students seen by the team confirmed that these processes were effective in producing change.

200 Feedback at the institutional level has been obtained by a student satisfaction survey which was piloted in 2002-03 and run fully in 2003-04. The 2005 National Student Survey supplied additional programme and discipline level information. The University is currently reviewing its procedures for obtaining a full range of feedback without unnecessary duplication. Feedback from graduates is obtained through annual First Destination survey prepared for the Higher Education Statistics Agency, and by the Careers Advisory Service survey of students’ careers four years after graduation.

201 Obtaining input from employers is primarily the responsibility of the Departments and Divisions and is very variable, partly at least because of the diverse needs and opportunities of different disciplines. The audit team saw examples of active and effective liaison panels in some areas. In others there was little or no contact with employers or a reliance on input from professional bodies during accreditation procedures.

202 Overall, the audit team found that the University’s arrangements for gathering feedback from students, graduates and employers were broadly sound. Module level feedback was particularly thorough and effective. Procedures in place for obtaining higher level feedback and input from employers, while still developing, demonstrate a high level of commitment by the University to these activities.

203 Currently the University has collaborative agreements with eleven regional Further Education (FE) Colleges: Evesham and Malvern Hills College; Halesowen College; Herefordshire College of Technology; Josiah Mason College; Kidderminster College; North East Worcestershire College; Pershore Group of Colleges; Stourbridge College; Worcester College of Technology; Bourneville College of Further Education; and Dudley College. Collaborative awards offered through the partnerships include sub-degree awards, typically HNC, HND and foundation programmes, as well as undergraduate degrees. The overall student number on the programmes in 2004-05 was approximately 700 students or around 9 percent of the total student population for the University. Collaborative provision is an expanding area within the University with much recent growth in the development of Foundation Degrees, although the numbers on these programmes have remained small. At present there is no significant overseas collaboration within the meaning of the Code of practice for the assurance of academic quality and standards in higher education (Code of practice), Section 2: Collaborative provision and flexible and distributed learning (including e-learning).

204 The overarching principle is that quality management arrangements are the same as those applied within the University. The arrangements in place were consistent with the recently updated Code of practice. Features of good practice in the management of collaborative provision are: the pivotal role of the link tutor in maintaining close operational links; the strengthening of central oversight through the EPPSC and the developmental approach to partners in relation to curriculum, staffing and facilities.

205 The University has a longstanding staff appraisal procedure which takes the form of an annual review between the member of staff and a senior manager. Staff met by the audit team felt this was a constructive process from which both they and the institution benefited. The SED described the staff development opportunities at Worcester as ‘extensive’ and rated by staff as ‘one of the most positive aspects’ of working there. From its discussions with staff and the evidence in the documentation it saw, the audit team can confirm that this is the case. The extent to which development opportunities were taken up by all levels of staff, including part-time and support staff, was particularly striking. These examples illustrate the commendable effectiveness of the University’s Human Resources Strategy in raising the level of appropriate research, scholarly and professional activity amongst all staff.
206 The University’s well-established peer observation of teaching is at present used primarily as a development tool rather than for monitoring performance. The University is aware that peer review is not occurring universally and is reviewing its monitoring procedures. However, during the DATs, the audit team saw evidence that although procedures varied somewhat they were well embedded and seen by staff as effective.

207 Overall, the audit team came to the view that the University’s arrangements for the assurance of the quality of its teaching through staff support and development were very effective. The University has a comprehensive Human Resources Strategy and there is a well-embedded culture of staff development throughout the University and this development is raising both the quality of the teaching and the level of research, scholarly and professional activity.

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

208 The SED listed procedures for the assurance of standards of awards and these included: validation; annual monitoring; periodic subject review; common frameworks for assessment and award; and institutional policies on moderation including internal verification of marking, operation of examination boards and use of external examiners.

209 The audit team noted that not all undergraduate programmes are within the Undergraduate Modular Scheme (UMS) and that small variations to the UMS regulations were permitted, for example, in the case of psychology where there are important professional, statutory and/or regulatory bodies stipulations involved for professional recognition. The team also noted that course handbooks and programme specifications did not always explain clearly how students could progress, particularly in terms of the application of the regulations about compensation and condoning of failed modules. In consideration of the uncertainty that these variations might present to students, the audit team considers it advisable for the University to implement procedures for ensuring that all information made available to students concerning assessment and progression so that it fully and accurately reflects current University regulations.

210 The SED stated that the University is looking to rationalise its assessment regulations to a standardised common framework and introduced a Board of Undergraduate Studies. The team did not see evidence that the University is failing in its intention to achieve consistency across the various schemes for which it has responsibility. Even so, the audit team saw the desirability of the University completing the UMS review that is currently in train and proceeding to a set of standard undergraduate regulations across the University.

211 The SED referred to post-exam board module moderation as an important additional means of assuring standards. The SED made it clear that ‘the purpose is not to alter marks, but to assist in the application of consistent standards across the provision and across the staff group’. On evidence in documents and presented through meetings the audit team concluded that the the manner in which this procedure enhances the link between learning outcomes, assessment and student achievement is an example of good practice.

212 External examiners are appointed for all internal and collaborative courses at Worcester; for the modular schemes, which operate two-tier examination boards, an independent Chief Examiner attends the Scheme Board and reports to Academic Board. In 2005, some courses had difficulty in finding suitable examiners and some were appointed only shortly before taking up their duties. AQSC is reviewing the appointment process to ensure timely nominations.

213 At institutional level all external examiner reports are read by the Director of Quality and Educational Development who writes a summary and commentary for AQSC to identify trends and highlight matters that may require institutional attention.
also circulated to all external examiners. Examiner comments in the minutes of examination boards are analysed by the Registrar as part of an annual report to AQSC on the effectiveness of central support and servicing and the general conduct of boards. Implementation of institutional policy was evident in external examiner reports, in examples of AMRs seen during DATs, in the minutes of DQAC meetings, and in the institution-level analysis of, and response to, examiner reports. The audit team concluded that strong and scrupulous use is made of the external examiner system. External examiner reports seen by the team confirmed that the standards of the programmes of the University are appropriate to level and subject discipline, that assessment processes are appropriate, and that examination boards are well managed.

214 Since the 2001 audit the University has participated in a number of QAA conducted reviews and Ofsted inspections and has received positive reviews. In May 2005 the AQSC conducted a global review and analysis of QAA engagements since 2001 to identify cross-institutional themes. The current audit team found good evidence of a careful and thorough tracking of responses over time and, where appropriate, developing an institutional response to recommendations.

215 The University’s Student Record System has been developed substantially in recent years and now provides a fully integrated student management system. It handles assessment mark entry, calculates progression and classification outcomes and produces a useful range of statistical reports on student applications and performance. These reports can be accessed directly by all staff onsite and can be made available to partnership colleges by email. Staff the audit team met also reported that the Planning Office, which is responsible for the Student Record System, is very supportive in providing additional information for student performance analysis.

216 Overall the audit team has confidence in the current and likely future management of academic standards of the awards of the University including those delivered by its collaborative partners.

The effectiveness of institutional procedures for supporting learning

217 The SED claimed that learning support resources are deployed effectively, are responsive and well-run, and contribute to the inclusive learning experience which is central to the University’s strategic plan. The Information and Library Service (ILS) has developed its own strategic plan through a process of consultation with staff and student stakeholders within and outside the University, and the strategic plan and e-learning strategy are being taken forward by an action planning group as part of the current review of broader learning and teaching strategy.

218 Learning resources are monitored in several ways. All service departments produce annual reports, and are subject to quinquennial review with external participation. Resources are also explicitly addressed in all course annual monitoring reports and student feedback is collected through course committees and module feedback. An ILS user group was set up in 2004, and the University recently participated in a national survey of the quality of information services. All of these sources of information inform short-term actions and longer-term planning to improve services.

219 In the student written submission (SWS), students expressed general satisfaction with the quality of teaching accommodation, and regarded the use of the virtual learning environment (VLE) to be ‘excellent’. The SWS also highlighted some specific issues, including excessive noise in the library. In summer 2005 the University increased and upgraded computer facilities and relocated the quiet study areas. During the audit visit, students and staff reported that these improvements have substantially addressed the issues raised in the SWS, and that the noise problem has been successfully resolved. Overall, students who met the audit team were satisfied with the general level and quality of learning support resources, and said that they appreciated the efforts being made by the University to improve resources.
220 The University offers no complete distance-learning programmes, but is actively engaged in developing web-enhanced and web-dependent modules following the adoption of a VLE in 2003-04 to replace an older system. Further development of e-learning is one of the key objectives of the University's Strategic Plan 2004-08 and a revised e-learning action plan was in the final stages of consultation at the time of the audit visit. Annual course monitoring reports and the responses of staff and students indicated that the student experience of flexible and distributed learning is satisfactory.

221 The audit team concluded that the University has in place good institutional and local mechanisms to identify and respond to user need and to assure the quality of its learning support resources, including e-learning and distributed learning, and that resource allocation is effectively linked to the focus on learning and teaching in the institution's mission.

222 The SED expressed confidence in the level of academic guidance and personal support provided for students, which it described as a 'major strength' of the University. It noted the success of this aspect of its provision in external reviews and in feedback from students, and the 'open and supportive environment' which is integral to the University's mission.

223 Student comments in the SWS supported the University's statement that in general the academic and personal support provided by tutors is good. Around 88 per cent of respondents rated the availability of tutors as sufficient, good or excellent and the SWS comments that tutors are friendly and helpful. A majority of respondents felt that they received useful feedback on their work and progress. During the audit visit, students spoke very highly of the accessibility and helpfulness of all staff, and confirmed that the personal tutor system is effective, with personal tutors engaged with the students' academic progress.

224 In addition to the combined academic and personal support offered to students by personal tutors and other staff, the SED described institutional structures designed to underpin its 'inclusive and supportive institutional culture'. In 2004 an integrated Student Services Department was formed to bring together services including pre-entry guidance, disability support, welfare and financial advice, nursery, counselling and careers advice. Performance of Student Services is monitored through their levels of use and by feedback questionnaires and student surveys, and is measured against annual performance targets and service charters. Most parts of Student Services have quality assurance manuals.

225 Some areas for improvement in student support are identified in the SED, including fuller access to services for part-time and offsite students and increasing attendance by departmental representatives at course committee. Overall, however, the SED claimed that student support and guidance is a particular strength of the University, basing this view on student feedback and external review. The SWS supported this claim in general, with very high approval ratings by respondents to the SWS questionnaire.

226 Information provided to the team during the audit, including the opinions of staff and students, supported the view that effective personal support is provided for all students, including part-time, postgraduate and international students. The audit team concluded that the University is justified in claiming student support as a strong feature of its provision.

**Discipline audit trails**

**Business and management**

227 The DAT covered the BA (Hons) Business Management and the Postgraduate Certificate/Diploma/MA in Management Studies. The undergraduate programme can be pursued as a major or minor part of a degree, as a joint honours degree, or as a single honours degree. The latter allows for specialisation in one of four areas, marketing, finance and accounting, human resources or the global economy, as well as for a general degree in business and management. Both
undergraduate and postgraduate programmes are available in full and part-time modes.

228 Annual monitoring is robust and reports provided to the audit team were comprehensive and contained analyses of student recruitment, progression and completion. The School faces difficulties caused by falling student numbers at both undergraduate and postgraduate levels and data has been used to shed light on the problem and to underpin proposals for remedial action. Progression and completion rates and degree classifications are benchmarked for undergraduates against the rest of the UMS and national figures. Retention has been identified as an area of concern and remedial actions introduced such as identifying at risk students and requiring them to seek tutorial support.

229 Students receive a University handbook and a UMS Handbook as well as course guides and leaflets about particular services. Students also confirmed that the library resources and recently upgraded information technology provision was sufficient for their needs and reported very favourably on the quality of the teaching and personal support. There are limited opportunities for students to interact with the world of practice during their studies and the DSED identified the enhancement of employer links to achieve this as an area for development. Undergraduate students elect representatives who sit on the course committees which meet twice a year. The students who met the audit team felt that this was an effective vehicle for raising issues and getting them resolved.

230 The external examiners' reports seen by the audit team expressed satisfaction with the quality and standards of the programmes included in the DAT. Their reports feeding into annual monitoring and the audit team was able to confirm that issues raised by external examiner's are fed into action lists and acted upon. The AMR report is used as a means of communicating with externals that their reports have been discussed and actioned.

231 The audit team saw examples of coursework, examinations and projects. These assessments showed evidence of careful marking and moderation with double-marking of projects with helpful feedback provided for students. The team was able to confirm that the standard of student achievement was appropriate to the title of the award and its location within the FHEQ.

Sport and exercise science

232 The DAT covered selected courses in the School of Sport and Exercise Science: BSc (Hons) Sports Coaching Science, BSc (Hons) Sports Studies, and an HND Sports Studies programme which is jointly taught with Worcester College of Technology. Auditors also saw documents relating to the recent validation of a new master's programme comprising courses in Sports Coaching, Sports Management, and Sport and Physical Education.

233 AMRs seen by the auditors contain full monitoring statistics and also a module-by-module analysis of mean marks, pass rates and grade distribution. Pass rates at each level are considered for the report year and compared to the previous year, and the data are used in the generation of action lists for each course. The School has also implemented a number of strategies to improve retention and completion.

234 Students are provided with a University handbook and a UMS handbook setting out the regulatory framework of their programme, along with a detailed and helpful course handbook. Student support is described in the DSED as taking place through a tutorial system which links to a customised personal development planning (PDP) process. Students who met the audit team confirmed that this process is effective in helping them to monitor their progress and set personal goals, and staff commented that the success of the PDP programme in the School is influencing policy elsewhere in the University. Students placed particular emphasis on the supportive atmosphere of the School and the open-door policy of the staff.
The audit team saw copies of recent external examiner reports for the programmes included in the DAT. These reports are almost universally positive, commenting favourably on the range of assessments, arrangements for external examining and the professionalism with which examination boards had been conducted. They confirm that the content of programmes conform to benchmark statements, and that standards of programmes are comparable with those found elsewhere.

Examples of student work from all stages of the programmes were made available to the audit team. From the evidence available to it, the audit team considered that the standard of work expected of students was appropriate to the learning objectives and aligned with the qualification level as described in *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ).

**Psychology**

The DAT focused on the programme leading to the award of a BSc in Psychology. This degree is accredited by the British Psychological Society as providing the Graduate Basis for Registration by the Society. The teaching of psychology is the responsibility of the Division of Psychology which is located within the Institute of Health and Social Care. Both the programme specification and the DSED showed a thorough and responsive awareness by the Division and its staff of the guidance offered by the FHEQ. The audit team found the programme specification to be generally full and clear with good mapping between the curriculum and the learning outcomes and the *Subject benchmark statement* for psychology. However, the team found some discrepancy between the requirements for achieving a degree as given in the programme specification and those in the UMS Handbook.

Annual monitoring reports are prepared by the Division and reviewed and commented on by the DQAC. They follow a formal template defined by the QAH. The centrally provided Student Data Summary Sheet which the QAH requires was not present in either of the reports seen by the team, but this was compensated for by a very detailed analysis of student data. In all other respects the template was followed and the reports seen by the audit team indicated a critical self-evaluation with a reasonable follow through from year to year. The Division was one of the first areas of the University to undergo the new Subject Review procedures instituted in 2003-04. The detailed SED produced for this indicated that it was taken very seriously by the Division and the subsequent report, produced by a panel including two external assessors, was full and frank. However, the audit team felt that the report was rather generously summarised on the Teaching Quality Information (TQI) website.

Students obtain information about the academic and non-academic aspects of the University in a number of different ways. There is a very full Psychology Handbook, a University Student Handbook and a UMS Handbook. Each module also has a module specification or contract. The students the audit team met felt they had sufficient information for their needs and always knew where to find new information. Students were also enthusiastic about the quality of the academic and non-academic support available to them.

The audit team also saw good evidence of full responsiveness to external examiners' reports. These are first considered at the post-exam board module moderation meeting before being responded to by letter from the Head of Division and then reviewed and responded to in the AMR which is in turn sent to the external examiners. The examiners' reports seen by the audit team were detailed and helpfully critical and these criticisms were carefully considered, leading to changes where appropriate. The post-exam board module moderation meeting also reviews in depth a small number of individual modules identified at the examination board. All aspects of these modules are considered and recommendations are made to module leaders. This seemed to the audit team to be a particularly effective and timely process for monitoring and developing the delivery of teaching.
The audit team considered a wide range of undergraduate work from all levels contributing to the degree under review. It was satisfied that the nature of the assessments and the standard of student achievement met the expectations of the programme specifications and the subject benchmark statement. In all cases, the standards of achievement were appropriate to the levels of award obtained.

The use made by the institution of the Academic Infrastructure

Reference to the use and application of the Academic Infrastructure is required as part of the validation and review of programmes and in annual monitoring. Responsibility for ensuring that the provisions of the Code of practice are covered fully lies with AQSC. In 2003, in the light of revisions to the Code, AQSC decided to undertake a review of policies and procedures. As a result of this review a number of changes were made such as modifying the management of collaborative provision. The SED noted several occasions where the FHEQ had been used as a key tool in reviewing programmes and changes have been made in the UMS to bring it in line with the three levels identified in the FHEQ. Subject benchmark statements are used within validation and review as a tool for evaluating the appropriateness of the curriculum. The University has developed its Foundation Degrees in the light of the draft statement and a review has been initiated of these degrees following publication of the Foundation Degree qualification benchmark.

The programme specifications seen by the team used the University template in various ways and not all documents provided the full range of information indicated in the template. Programme specifications are intended to be updated annually through the annual monitoring process. The team noted that the processes currently operating did not always result in effective updating of the programme specification and further that there was a time lag between updating of specifications and their publication. The University has identified programme specifications as key documents in future validation and review as a means of ensuring that they are carefully scrutinised and kept up to date. The team would advise the University to reflect on how it can assure itself this objective is being achieved.

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

The SED prepared for this audit was exemplary in providing a clear, accurate and comprehensive outline of the framework for quality assurance, maintenance of standards, and support of student learning. The document presented an honest and balanced view of the University’s procedures and was self-reflective in assessing strengths and limitations. The audit team concluded that it had clearly been written to assist their work and the level of self-reflection in the document and proposed actions to address limitations gave confidence in the University’s ability to enhance quality and standards.

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

The University sees review of its Learning and Teaching Strategy as ‘a key driver of quality enhancement with which other strategies can articulate’. The new 2005 strategy refers to the continuing importance of the University’s values of quality, access, equality and opportunity. This embraces an overarching commitment to perform above benchmarks in terms of: widening participation and equal opportunity measures; effective academic and personal support and guidance systems for all students; and exemplary outcomes in terms of student retention, progression, achievement and retention. The University’s Learning and Teaching Centre has the lead responsibility for implementing the strategy. The Peer Observation scheme and the Teaching Fellowship scheme are
key elements in the Learning and Teaching Centre's means of contributing to the University's enhancement strategy.

**Reliability of information**

246 The University has adopted a systematic and planned approach to the fulfilment of the requirements of the Higher Education Funding Council for England's (HEFCE) document, *information on quality and standards in higher education: Final guidance, (HEFCE 03/51)* for the publication of information on teaching quality on the Higher Education and Research Opportunities (HERO)-TQI website. The University reviewed its information provision in 2004 in the light of the requirements of document 03/51 as a result of which a new format was adopted for external examiners' reports. The majority of reports now have summaries that are published. The University has added its Teaching and Learning Strategy and employer links to the HERO-TQI website and has also provided a link to the University web pages which contain programme specifications. The team noted a variability in the quality and consistency of the programme specifications published (see paragraphs 237 and 243).

247 The periodic review process does not indicate specifically who is responsible for writing and approving the TQI summary of the review. AQSC has expressed concern at the lack of clarity in the recommendations arising from periodic review and as a result the summaries for the two recently completed reviews were rewritten and a review of the process of production of TQI summaries was instigated. The audit team noted that the published documents that emerged from the rewriting process did not reflect fully the conclusions of the extended reports from which they were drawn.

248 The audit team saw evidence that University templates influenced the overall structure of course handbooks, though the final products varied considerably, with some providing more comprehensive information about matters such as assessment regulations than others. The variable levels of information provided in departmental level handbooks have contributed to student uncertainty about assessment and appeals procedures.

249 The team concluded that the University pays serious attention to the provision of useful, timely and accurate information for students. In general the quality of published information is good. However, there appeared to be a lag in updating local student handbooks, and a variability in their content, that resulted in some students being poorly informed about key matters, in particular the operation of the assessment regulations.

**Features of good practice**

250 The following features of good practice across the University were identified during the audit:

i the exemplary institutional self-evaluation document which provided comprehensive, accurate and self-critical reflection of the University's policy, practice and procedures (paragraph 244)

ii the supportive ethos and range of departmental and central services provided to students and staff in support of the University's mission to deliver an excellent inclusive higher education (paragraphs 96, 145, 205)

iii the effective way in which the University deploys its financial and physical resources in support of learning and teaching (paragraphs 110, 221)

iv the Human Resources Strategy which is well judged to address the University's commitment to learning and teaching and to raising the level of appropriate research, scholarly and professional activity amongst all staff (paragraphs 96, 205)

v the close and productive working relationships with collaborative partners, which are closely integrated into the quality and standards infrastructure at institutional and departmental level (paragraphs 128, 204)
the use of post-examination board module reviews to enhance the link between learning outcomes, assessment and student achievement (paragraphs 36, 137, 165, 211).

**Recommendations for action**

251 The University is advised to:

i review the procedures for writing and approving reports from internal subject reviews to ensure summary reports placed on the Teaching Quality Information website are an accurate reflection of the conclusions of the full reports to which they refer (paragraphs 166, 183, 186, 247)

ii review procedures for updating and approving programme specifications to ensure that they are complete, accurate and current (paragraphs 68, 134, 243)

iii implement procedures for ensuring that all information made available to students concerning assessment and progression, including that in programme specifications and student handbooks, clearly and accurately reflects current University regulations (paragraphs 32-33, 163, 176, 180, 209, 248).

252 It would also be desirable for the University to:

i expedite the proposed review of the effectiveness of Departmental Quality Assurance Committees (paragraphs 51, 195)

ii complete the Undergraduate Modular Scheme review that is currently under way and proceed to a standard set of undergraduate regulations across the University (paragraphs 31, 35, 210).
The University of Worcester's response to the audit report

The University of Worcester welcomes the outcome of the institutional audit and the endorsement of confidence in the soundness of the University's current and future management of the quality of its programmes and the standards of its awards. The University regards the report as providing strong support for its future development in continuing to provide an excellent experience for students.

The University is particularly pleased that the auditors identified areas of good practice in relation to strategic institutional and departmental management, which support our mission and ethos to deliver a high quality excellent inclusive higher education. We welcome too the favourable comments regarding our work with partners, which we continue to regard as central to the University's commitments in relation to the region and to widening participation. We are gratified by the very positive evaluation of the effectiveness of our human resources, financial and physical resource strategies in support of learning and teaching. The commendation of the auditors for our self-evaluation document and for the work we have done in enhancing the links between learning outcomes, assessment and student achievement is also most welcome.

The University acknowledges the recommendations for action, and has set in train plans to address all of these.

We have already reviewed the procedures for writing and approving reports from subject reviews for the TQI website. We have put in place revised procedures for compiling programme specifications and have plans to strengthen procedures to ensure they are annually updated and checked for accuracy. The University takes seriously the importance of the accuracy of information and the conclusions of the audit team in relation to information for students concerning progression and assessment will be considered at all levels within the University to ensure that appropriate procedures and checks are in place.

We have begun the review of the effectiveness of Departmental Quality Assurance Committees and expect this work to be completed by summer 2006. The review of our undergraduate modular scheme is progressing well, and we now have a schedule for the adoption of a standard set of undergraduate regulations across the University.

Finally, the University thanks the auditors for the professional and positive spirit in which the audit was conducted, and appreciates the findings, both in relation to the particular strengths of Worcester and the areas where action is recommended.