

Targeted Peer Review Action Plan

April 2026

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Introduction

The University of Glasgow fully accepts the recommendations made by the QAA Scotland (QAAS) following a recent targeted peer review (TPR).[1] We will continue to work in an open and transparent manner as we implement these recommendations over the next 12–18 months.

The TPR identified concerns about the consistency and reliability of assessment processes across the institution and highlighted associated risks. We are committed to eliminating these. This action plan addresses all of the QAAS TPR recommendations, recognising that sustainable improvement requires coordinated action across policies, systems, and practices.

Our approach is guided by three principles:

- **Comprehensiveness** – addressing all recommendations through a structured programme of work.
- **Sustainability** – embedding improvements in ongoing institutional practice, rather than relying on short-term fixes.
- **Partnership** – working with students, staff, and external stakeholders to co-design solutions.

The University recognises that the TPR recommendations require not only improvement activity, but clear evidence of institutional accountability, effective governance, and ongoing monitoring of compliance and risk. This action plan therefore emphasises mandatory standards, centrally monitored assurance mechanisms, and transparent governance.

A project team has been established under the name of Project Compass (*see Project governance, page 4*) to deliver mandatory regulatory reform, strengthened quality assurance, and clear institutional oversight ahead of the 2026 Board of Examiners cycle, while laying the foundations for longer-term enhancement. The project operates through five interdependent

1 https://www.qaa.ac.uk/docs/qaa/reports/sqcs-targeted-peer-review-glasgow-oct-25.pdf

areas of focus, which collectively address the full range of QAAS TPR recommendations:

1. **Policy and Regulatory Simplification** – streamlining assessment and progression regulations.
2. **Quality Assurance for Assessment Outcomes** – strengthening assurance of assessment and degree outcomes in line with the Code of Assessment.
3. **Extenuating Circumstances and Short Extensions** – simplifying processes and embedding a wellbeing-first approach.
4. **Compassionate Communication of Outcomes** – developing a University-wide student communications plan for assessment outcomes and graduations, and a consistent approach to student handbooks.
5. **Degree Calculations Tool** – delivering a quality-assured set of tools and processes to support calculation of degree outcomes based on revised regulations.

QAAS enhanced engagement

All QAAS recommendations are addressed by these five focus areas and through our engagement with QAAS liaison and Tertiary Quality Enhancement Review (TQER) processes.

The University acknowledges the enhanced engagement and ongoing attention from QAA Scotland as we implement this action plan. Two further recommendations from the TPR relate directly to the oversight role of QAAS and are addressed here.

> **Recommendation 1** – The TPR team recommends that the University is subject to additional institutional liaison meetings in AY 2025-26 and 2026-27 to monitor and report regularly on progress.

The University welcomes the enhanced engagement with QAAS through additional Institutional Liaison Meetings. The Project Compass Oversight Group will prepare progress reports against each recommendation in advance of each ILM, enabling structured discussion and early identification of any areas requiring adjustment. The University has also agreed to provide monthly written progress updates to QAAS.

> **Recommendation 2** – The TPR team recommends that the University's next external peer review takes place in AY 2027-28 and considers progress against all the recommendations contained within this report.

The earlier Tertiary Quality Enhancement Review in AY 2027–28 will provide an opportunity to demonstrate the sustainability of improvements. The University will maintain an evidence log throughout the action plan period, capturing documentation of changes made, evaluation findings, and stakeholder feedback, ensuring that the evidence presented reflects the full trajectory of improvement.

Recommendation mapping

The work of each of the five Focus Areas maps to specific recommendations from the TPR as outlined below.

For the full wording of each recommendation, refer to Appendix I.

Rec #	Area 1 *(Page 8)*	Area 2 *(Page 11)*	Area 3 *(Page 15)*	Area 4 *(Page 18)*	Area 5 *(Page 21)*	Overall
1						✓
2						✓
3	✓				✓	
4		✓				
5		✓				
6		✓				
7		✓				
8			✓			
9			✓			
10			✓			
11			✓			
12			✓			
13				✓		
14				✓		
15		✓				
16		✓				
17	✓					
18		✓				
19	✓					
20	✓			✓		
21	✓			✓		
22				✓		

Project governance

Project Compass operates through a well-defined governance structure with clear lines of accountability:

- **Focus Area Leads** are responsible for delivering activities within their focus areas, reporting progress and escalating risks to the Project Team.
- **The Project Team** coordinates across focus areas, manages interdependencies, and prepares consolidated progress reports for the Project Compass Oversight Group.
- **The Project Compass Oversight Group** provides strategic oversight, ensures institutional accountability, and reports to the University's senior governance committees.

The Project Compass Oversight Group is composed of relevant members of the University's Senior Management Group (SMG), which includes representation of senior staff from Senate, Court and the committees thereof. In addition to reporting to the Project Compass Oversight Group, the Project Team will report regularly into institutional governance mechanisms (see next page, below). The University will provide monthly written progress updates to QAAS.

Project Compass Oversight Group membership

- **Chair:** University Secretary and Deputy Vice Chancellor (Governance)
- Vice Principal and Clerk of Senate
- Vice Principal (Learning and Teaching)
- Chief Operating Officer and Vice Principal for Innovation and Economic Development
- President of the Students' Representative Council
- Executive Director of Student and Academic Services
- Director of Academic Services
- Director of Student Life
- Director of Professional Services (College of Social Sciences)
- Chair of Academic Regulations Committee and University Assessment Officer

Transition to institutional governance

As activities become established as business as usual, oversight will transition from the project-specific structure into existing institutional governance mechanisms. The Project Compass Oversight Group will agree the criteria and timing for each transition, ensuring that assurance is maintained. The agreed approach will be set out in the first annual progress report.

For an overview of institutional governance mechanisms and how they relate to Project Compass, see the table below.

Relevant Committee or Group *(all contain Project Compass members)*	Role in action plan oversight	Student membership	Frequency of reporting
Academic Standards Committee (ASC)	Receives semester assurance and compliance reports	Yes	5 per year
Academic Regulations Committee (ARC)	Monitors compliance with reformed regulations	Yes	6 per year
Education Policy and Strategy Committee (EdPSC)	Receives annual institutional assurance review; oversees policy implementation	Yes	5 per year
Learning and Teaching Committee (LTC)	Oversees learning and teaching policy and strategy	Yes	8 per year
Project Compass Oversight Group	Sub-group of University Senior Management Group (SMG) with strategic oversight of the action plan	Yes	Weekly
QAA Scotland	Monthly reporting and progress updates	No	Monthly
QAA Scotland: Institutional Liaison Meetings (ILMs)	Formal reports and progress updates	Yes	3 per year
Senate	Scrutinises and challenges reports on assessment outcomes and progress	Yes	5 per year
Student Experience Committee (SEC)	Receives evaluation findings and student feedback	Yes – co-chaired by SRC President	5 per year
Student Voice Working Group (SVWG)	Develops expectations for student involvement in enhancement	Yes – co-chaired by SRC VP Education	6 per year
Tertiary Quality Enhancement Review (TQER)	Formal review as part of national enhancement framework	Yes	In 2027-28

Institutional assurance framework

The University will demonstrate, on an ongoing basis, that the changes described in this action plan are working, embedded, effective, and sustainable. QAAS and the Scottish Funding Council require evidence not only that actions have been completed, but that they have produced demonstrable, sustained improvements.

1. **Evidence of impact, not just the activity.** Reporting will require focus area leads to demonstrate impact through defined indicators, not merely confirm that deliverables have been produced.
2. **Risk-based and proportionate assurance.** Monitoring and audit will be prioritised according to assessed risk, including cohort size, previous non-compliance, external examiner concerns, and student outcome trends.
3. **Multi-layered governance with clear escalation.** Assurance operates at programme, School, College, and institutional levels, with defined reporting lines and escalation routes.
4. **Independent scrutiny.** Internal mechanisms are supplemented by external examiner oversight, independent sampling and audit, and engagement with QAAS through ILMs and the TQER.
5. **Integration with the Tertiary Quality Enhancement Framework.** The framework feeds directly into the University's annual Self-Evaluation Action Plan (SEAP) for the SFC and prepares for the brought-forward TQER in AY 2027-28.

The role of Senate

Senate is the University's senior academic governance body. Its role is to exercise scrutiny and challenge in relation to academic standards and quality. In relation to this action plan, Senate, and its committees, will not only receive reports but will actively scrutinise progress, challenge the adequacy of the evidence presented, and hold the institution to account. A recent external review of Senate governance has affirmed the effectiveness of Senate and its committees in understanding and exercising these functions. The Project Team will, for example, present detailed progress papers to Senate and/or the relevant committees thereof.

Annual institutional assurance review

Where any review identifies anomalies, inconsistencies, or risks to standards, the University will initiate targeted investigation through its escalation mechanisms.

From AY 2026-27, the University will produce an annual institutional assurance review of assessment outcomes, reported through EdPSC to Senate. This will draw on data from all Schools and Colleges and will encompass:

- Progression and retention rates
- Board of Examiners compliance
- External examiner report themes
- Extenuating circumstances data
- Conduct cases relating to academic integrity
- Student complaints and academic appeals data

The review will form a core component of the SEAP and will be available to QAAS at ILMs. The University recognises that the TQER will cover a broader scope than this action plan alone.

Focus Area One

Policy and Regulatory Simplification

Aim: To simplify and streamline assessment and progression regulations

TPR Recommendations Addressed

3	Prioritise completion of the regulation simplification programme to enable implementation of an appropriate system for programme-level aggregation by academic year 2027-28 (paragraph 22).
17	Develop a standardised, mandatory cyclical training programme in support of the Assessment Framework, before the next assessment diet (paragraph 72).
19	Develop an approach to policy and process implementation that strikes an appropriate balance between complete standardisation across the University and complete delegation to School level, with identified principles to be followed in arriving at an implementation plan for each policy (paragraph 80).
20	Co-design, in partnership with students, guidance and resources to ensure critical elements of the assessment regulations are communicated to students and staff in a way that is accessible, digestible and valuable, to be implemented in academic year 2026-27 (paragraph 92). *See also:* ***Focus Area Four, page 18.***
21	Consider the strategic approach to the production and use of handbooks (or other student-facing guidance mechanisms such as virtual learning environment templates) by academic year 2026-27 (paragraph 93). *See also:* ***Focus Area Four, page 18.***

These recommendations all relate to the development, understanding, and application of policy and regulation across the institution.

Glasgow's assessment regulations, while rigorous, have accrued complexity over successive iterations, creating barriers to consistent understanding and application. The TPR identified this complexity as a contributing factor to the issues under review. This focus area will implement a simplification of the University's degree regulations – introducing sector-standard approaches to the award of credit, Honours-level second-diet assessment,

and compensatory credit – and engage fully with the University's governance processes for their approval.

The focus area will additionally design and implement a framework for academic policy and process change that ensures a consistent institutional approach, striking an appropriate balance between standardisation and local delivery.

Senate approved the principles of the new simplified award of credit regulations in December 2025, and the Academic Regulations Committee approved the wording of the new award of credit regulations in February 2026. Throughout February, March, and April 2026, College engagement sessions and drop-in Q&A sessions have been delivered, alongside engagement sessions with students and the Schools hosting regulated clinical degrees. These sessions received highly supportive feedback on simplification.

The regulatory simplification programme responds directly to Recommendation 3 and creates the foundation for the programme-level degree calculation tools described in Focus Area Five. It is also closely interdependent with Focus Area Two: findings from the quality assurance processes may identify the need for further regulatory refinement, reflected as a defined stage through the annual regulatory review process.

Deliverables and Evidence

Deliverable	Future Evidence of Fulfilment
Revised regulations for the award of credit: (a) credit awarded on achievement of D3; (b) compensatory credit; (c) reassessment aligned across all levels. Professional/ regulated degrees will have specific requirements clearly specified.	Approved by Senate and published. QAAS will receive a copy at the earliest opportunity.
Revised degree regulations addressing variation between similar degree structures.	Approved through governance (ARC, SMG) and published by August 2026.
Updated student record system and course and degree calculation tools.	Documented testing and formal sign-off.
Phase 1 training (current Code of Assessment) for all Assessment Officers, Chairs, and key administrators.	Centrally maintained completion records with 100% compliance amongst staff attending, or processing outcomes of, Boards of Examiners. Senior Assessment Officer post-exam-board review planned.
Phase 2 training (revised regulations) for AY 2026-27.	Centrally maintained completion records with 100% compliance amongst staff attending, or processing outcomes of, Boards of Examiners. Records maintained centrally.
Refresher training cycle established.	Annual schedule published and monitored.
Detailed transition plan including student communications.	Plan approved and published.
Implementation framework for academic regulation and process change.	Designed under Vice Principal and Clerk of Senate leadership by September 2026.
Co-designed guidance for accessible communication of regulations.	Published and embedded. *See also* ***Focus Area Four, page 18***.

Target Future State

The University operates a single, simplified set of assessment and progression regulations that are consistently understood and applied across all Schools and Colleges, aligned with sector norms and accessible to staff and students. All relevant staff participate in a mandatory training and refresher cycle. An institutional framework ensures that future regulatory changes are introduced consistently.

Outcome Measures and Evidence

Outcome Measure	Future Evidence of Fulfilment
Revised regulations in use across all Schools and Colleges.	Approved by Senate and SMG; single authoritative version published.
Staff understand and correctly apply revised regulations.	100% training completion for Assessment Officers, Chairs of Boards, and Senior Assessment Officers. Records maintained centrally.
Systems accurately reflect revised regulations.	Student records system validated with documented testing and sign-off.
Regulations applied correctly in practice.	Risk-based audit (Focus Area 2). Target: zero errors affecting outcomes.
Regulations clear and sector-aligned.	External examiner confirmation through updated report template.
Regulatory and policy implementation framework in place.	Framework approved by EdPSC and in use.

Timeline

Rec	Action	End Date
3	Regulation publication	February 2026
21	Draft template development	March 2026
21	Staff policy on student-facing regulatory content	May 2026
20	Central guidance development	May 2026
17	Training materials development	May 2026
20	Student material drafts	May 2026
20	Student consultation on training materials and resources	May 2026
17	Core staff training delivery	June-September 2026
20	Publish student materials and guidance	June 2026
17	Refresher training planning	August-November 2026
21	Review and refinement	August 2026
19	Policy/process implementation framework (EdPSC)	September 2026

Focus Area Two

Quality Assurance for Assessment Outcomes

Aim: Strengthening assurance of assessment and degree outcomes in line with the Code of Assessment

TPR Recommendations Addressed

4	Establish an annual assurance cycle owned by the Academic Regulations Committee (ARC) that specifies sampling frames, coverage by School, timelines for follow-up and a published synthesis of external examiner themes mapped to actions and owners (paragraph 25).
5	Undertake a rigorous review of all exam board spreadsheets currently in use, with institutional sign-off confirming that each is fit for purpose (paragraph 31).
6	Continue with the planned harmonisation of mark aggregation and evaluation processes, including completing the scheduled roll-out of the course aggregation tool for courses in academic year 2025-26 (paragraph 32).
7	Strengthen scrutiny and oversight of exam boards by making the minutes template compulsory, introducing a short pre-board readiness checklist owned by the Assessment Officer, requiring explicit alignment statements where local or PSRB [Professional Statutory and Regulatory Bodies] requirements apply, and regularly sampling minutes to verify that key checks are recorded (paragraph 37).
15	Mandate greater standardisation of spreadsheet templates for the interim period before regulatory simplification and systems development are complete, so that only institution-approved templates are used across all Schools (paragraph 67).
16	Continue the review of student awards across the institution and put mechanisms in place to have oversight of all awards of credit made in its name (paragraph 70).
18	Review approach to risk management to ensure there are suitable monitoring and reporting mechanisms that apply to the operation of the Assessment Framework (paragraph 77).

These recommendations relate to Board of Examiners processes, the introduction of robust standardised processes and systems, and the provision of assurance of outcomes – including tools for managing risk.

This focus area will deliver rapid, practical improvements ahead of the main Board of Examiners cycle in spring/summer 2026, and will continue the review of recent awards. It will also support ongoing preparation for the planned implementation of a mandated standard degree calculation tool for session 2026/27, strengthening consistency and assurance of outcomes. This follows the initial fact-finding phase completed in 2025 and sets the foundation for Focus Area Five (Degree Calculations Tool).

In October 2025, the University strengthened Board of Examiners regulations and mandatory instructions. Senior Assessment Officers were appointed across all four Colleges. The strengthened framework introduced mandatory requirements that were previously advisory, including standardised agenda structures, quorum requirements, and documented pre-Board scrutiny. This focus area builds on that foundation by addressing the operational infrastructure – spreadsheets, data flows, and assurance mechanisms – that underpin decision-making.

Board of Examiners processes will be further strengthened through a RACI (Responsible, Accountable, Consulted, Informed) matrix. The degree calculation tool has been mandated by ASC.

Review of Recent Awards

The University has already undertaken retrospective analysis where concerns were identified, including a full review of undergraduate awards in the School of Geographical and Earth Sciences. A review of “Credit Refused” and “Credit Withheld” grades across all other Schools found no evidence of concerns around the 75% rule.

The University will continue a risk-based review covering AY 2023-24 and AY 2024-25 as agreed with QAAS.

The review will implement a structured, risk-based sampling and audit programme. Sampling intensity will be determined by:

- Previous compliance findings or audit outcomes.
- External examiner concerns or adverse feedback.
- Student outcome data falling outside expected parameters.

This will cover accuracy of degree classifications, correct application of regulations, Extenuating Circumstances (formerly Good Cause) outcomes, and Board of Examiners documentation. Findings will be reported to ASC, with a summary in the institutional assurance review.

Deliverables and Evidence

Deliverable	Future Evidence of Fulfilment
Standardised Board of Examiners framework across all Colleges, including templates, RACI matrix, and end-to-end processes with central compliance monitoring.	100% adoption verified through central monitoring; process documentation published; semester compliance reports submitted to ASC.
Accelerated adoption of course calculation tool.	Adoption targets met and reported each semester; aggregation tool validated with institutional sign-off.
Risk-based review of recent awards.	Reports produced with findings and any required rectification actions reported to ASC.
Standardised external examiner engagement and reporting.	Updated reporting template implemented; thematic analysis produced with actions and owners.

Target Future State

A robust, centrally governed assurance framework for assessment and Board of Examiners outcomes, underpinned by standardised processes and supported by standard degree calculation tool with clear institutional oversight. Ongoing review of recent and current awards strengthens assurance and supports confidence in the integrity, consistency, and accuracy of all awards.

Outcome Measures and Evidence

Outcome Measure	Future Evidence of Fulfilment
Consistent application of standardised Board of Examiners processes across all Colleges.	Senior Assessment Officer reports following each Board of Examiners cycle; compliance confirmed through central monitoring.
Reliable and consistent degree outcomes supported by course calculation tool and validated aggregation tools.	Adoption rates reported each semester; aggregation outputs verified through institutional processes.
Review of recent awards completed with any required corrections implemented.	Confirmed outputs for AY 2023-24 and 2024-25 reported to ASC.
Ongoing assurance and risk monitoring embedded within governance.	Annual assurance cycle in operation from AY 2026-27; risk model with defined indicators reported through ASC/EdPSC.
External examiner input provides clear and consistent assurance.	Reports include structured commentary on consistency, clarity, and effectiveness.

Timeline

Rec	Action	End Date
16	Award review initiated	February 2026
4	Annual assurance cycle process design	March 2026
18	Risk monitoring model designed	March 2026
5	Validate and standardise calculation tools; sign-off	May 2026
15	Institutional templates mandated; local variants removed	May 2026
6	Structured rollout of course calculation tool	June 2026
7	Mandatory minutes template, checklists, sampling	July 2026
4	Monitoring process defined	August 2026
16	Award review and assurance design	August 2026
18	Monitoring process defined	August 2026

Focus Area Three

Extenuating Circumstances and Short Extensions

Aim: Simplifying processes and embedding a wellbeing-first approach

TPR Recommendations Addressed

8	Ensure that the Student Support Officer role is clearly defined and fully communicated to, and understood by, staff and students at the University by the end of semester 2 of AY 2025-26 (paragraph 44).
9	Ensure adequate resourcing for the Wellbeing and Safeguarding Teams to meet the operational demands of the new Extenuating Circumstances process by the end of semester 2 of AY 2025-26 (paragraph 45).
10	Monitor the Stage 2 process (locally managed academic decision) closely, as it is implemented from semester 2 of AY 2025-26, responding promptly to any issues that emerge (paragraph 47).
11	Ensure that appropriate support, guidance, and continuing professional development is provided to ensure Senate Assessors are well prepared and fully aware of the potential academic and wellbeing implications for students, including possible impacts on qualification outcomes. The University should also ensure that appropriate systems are in place to record and monitor decisions that are made by Senate Assessors (paragraph 48).
12	Undertake an evaluation of the new Extenuating Circumstances Policy and process at the end of AY 2025-26, with ongoing monitoring in subsequent years (paragraph 54).

These recommendations focus on improving Extenuating Circumstances (EC) processes to ensure that academic procedures and support are clear, consistent, and effective. Early help-seeking is a cornerstone of our public-health approach to student wellbeing. We therefore need a system that is straightforward to navigate and that applies academic adjustments reliably and fairly, with a wellbeing-first ethos guiding every step of the process. Our response must set out – and consistently apply – a process that makes obtaining an academic adjustment as straightforward as possible.

This focus area builds on the introduction of the new EC policy between September 2024 and September 2025. The QAAS TPR team endorsed the move from Good Cause to the v policy. The new policy is in active rollout: Stage 1 (wellbeing review) is in place; Stage 2 (academic decision) will be enhanced through increased standardisation and automation. Student feedback has been positive. A toolkit for managing adjustments is planned.

This work aligns with the University's Service Excellence Programme (https://www.gla.ac.uk/myglasgow/serviceexcellence/), with the Student Wellbeing Target Operating Model scheduled for completion by June 2026.

Deliverables and Evidence

Deliverable	Future Evidence of Fulfilment
Student Support Officer (SSO) role clearly defined and communicated.	Role description published; communications documented.
Adequate resourcing for Wellbeing and Safeguarding.	Ongoing review; evidence of adjustments to demand.
Automated extension requests for AY 2026-27.	System operational across all Schools.
Stage 1 and Stage 2 process improvements with SOPs.	SOPs and decision criteria published.
Standard toolkit for managing adjustments.	Toolkit published and in use.
Reporting dashboards and audit processes.	Turnaround times tracked by School each semester.
Senate Assessor roles documented; individuals trained.	Records centrally maintained; annual refresher established.
Formal evaluation incorporating quantitative and qualitative measures.	Report to EdPSC and Student Experience Committee.

Target Future State

A centralised, wellbeing-led EC and short extensions process that is consistent, transparent, and timely. All stages supported through a case-management system with automated workflows, clear criteria, and reporting dashboards.

Student outcomes:

- Know how and where to seek help early.
- Feel safe and respected when disclosing need.
- Report the process is clear, quick, and fair.
- Experience reduced friction.
- Adjustments enable participation.

Staff and system outcomes:

- Confident, consistent responses.
- Fewer hand-offs and less duplication.
- Policy applied equitably across Schools.
- Timely, compassionate, trauma-informed communication (consistent with Focus Area Four, page 18).

Outcome Measures and Evidence

Outcome Measure	Future Evidence of Fulfilment
EC processes consistent across Schools.	Approval rates and adjustment types analysed; significant variation investigated.
All decisions recorded with rationale.	Case management system data.
Staff confident in applying adjustments.	Staff articulate process; clear escalation routes.
Annual audit demonstrates consistency.	Minimum 10% sample across each College.
External benchmarking undertaken.	Engagement with professional networks.
Annual evaluation through governance.	Report through sub-committees to Senate.

Timeline

Rec	Action	End Date
11	Staff practice workshops (ongoing)	November 2025
10	In-system dashboards go-live	January 2026
11	Training needs assessment	February 2026
10	Wider dashboards go-live	April 2026
12	Formal evaluation	April 2026 – June 2026
8	Publish clarified SSO role	May 2026
11	Review and update Senate Assessor resources	August 2026
11	Decision matrix review	August 2026
10	Full EC process launch, including widespread training on policy and processes	September 2026
9	Ongoing resourcing review	Ongoing

Focus Area Four

Compassionate Communication of Outcomes

Aim: Developing a University-wide student communications plan for assessment outcomes and graduations, and a consistent approach to student handbooks

TPR Recommendations Addressed

13	Continue to adhere to the stated implementation timeline for the student communications project, with development of the revised award outcome letters by the end of AY 2025-26 and formal adoption in AY 2026-27 (paragraph 55).
14	Develop and implement a coordinated approach to embedding 'compassionate communication' principles across all relevant academic and professional service areas, including consistent delivery of training, clear articulation of expected standards, and monitoring of uptake and impact. Related resources should also be made accessible institution-wide to support a shared understanding and ensure greater consistency of practice (paragraph 59).
20	Co-design, in partnership with students, guidance and resources to ensure critical elements of the assessment regulations are communicated to students and staff in a way that is accessible, digestible and valuable, to be implemented in AY 2026-27 (paragraph 92). *See also* ***Focus Area One, page 8***.
21	Implement strategic approach to the production and use of handbooks (or other student-facing guidance mechanisms such as virtual learning environment templates) by academic year 2026-27 (paragraph 93). *See also* ***Focus Area One, page 8***.
22	Continue planned actions to evolve its approach to student voice from a consultative to collaborative culture across all levels of the institution (paragraph 99).

These recommendations relate to student communication and engagement. This focus area will develop a coordinated assessment outcomes communications plan, delivering aligned messaging across

Schools, Registry, and Graduation teams. Partnership with the Students' Representative Council (SRC) and the wider student body is central.

The foundational piece of work is the development and formal adoption of institutional compassionate communication principles, grounded in the Academic Registrars' Council's Compassionate Communication guidance. These will underpin all communications activity and will address:

- Culture of Kindness
- Mindful Communications
- Timely Communications
- Inclusivity
- Reflection and Continuous Improvement

The principles will be co-created with students and in partnership with the Wellbeing and Inclusion teams. They will address tone and language, clarity and actionability, timeliness, and accessibility. They will be embedded in templates and tested with students before rollout.

Alongside principles and templates, the University will put in place training and infrastructure to support these approaches. Progress to date: mapping existing practice; co-creation sessions with staff and students; a Student Handbook template working group; template communications including an award letter. Templates will be monitored. Staff development on trauma-informed practice will further inform this work.

Deliverables and Evidence

Deliverable	Future Evidence of Fulfilment
Compassionate communication principles formally adopted.	Principles document approved and published.
Revised award outcome letter templates co-created with students.	Approved by EdPSC for AY 2026-27. Progress reported to QAAS at each meeting.
Map of communication touchpoints.	Mapping document completed.
Templates aligned with adopted principles.	In use across all Schools and services.
Published service standards.	Including response times and accessibility requirements.
Training programme with annual refresh.	Delivered; uptake monitored.
Strategic approach to handbooks.	Templates co-created; minimum standards published; adoption monitored.
Expectations for collaborative working with students.	Statement published; Schools reporting through annual QA processes.

Target Future State

Assessment outcomes, progression decisions, and graduation information communicated in a timely, compassionate, clear, and accessible manner. Templates in use across all Services, Schools and Colleges, co-designed with students. All staff trained, with annual refresh. Student handbooks meet minimum standards. Student voice mechanisms are collaborative across all levels.

Outcome Measures and Evidence

Outcome Measure	Future Evidence of Fulfilment
Principles adopted and embedded.	Principles published; templates aligned.
Revised award letters in use.	Deployed; compliance monitored.
All relevant staff trained.	Completion records; annual refresh uptake.
Student experience improved.	Feedback via surveys, focus groups, Student Voice. Baseline AY 2025-26.
Communication complaints reduced.	Measured against pre-implementation baseline.
Communications accessible.	Accessibility audit confirming compliance.
Handbooks meet standards.	Compliance monitored from January 2027.
Student voice collaborative.	SVWG annual report; Student Experience Committee analysis.

Timeline

Rec	Action	End Date
Templates		
13	Develop through co-creation sessions with students template communications for key messaging	April 2026
22	Targeted template testing and feedback gathering	June 2026
22	Implement post-testing changes and finalise templates for rollout	August 2026
Transition and Training		
14	Training material development: slide decks, handbooks, case examples, scenario-based learning, workflow demos	July 2026
14	Develop online resources: explainer videos, narrated walkthroughs, quick-reference guides, FAQs	July 2026
14	Training delivery: online and in-person sessions across Schools, Colleges and University Services	September 2026
14	Training completion tracker: maintain central record of attendance, completion rates, and outstanding groups	December 2026
Student Handbooks		
21	Draft handbook template development	March 2026
21	Staff–student co-creation sessions	April 2026
21	College and School adoption of revised handbooks	September 2026
21	Monitoring of handbook compliance with min. standards	From January 2027
Student Voice		
22	Schools report on student voice activity in annual QA reporting	From AY 2026-27
22	Student Experience Committee thematic analysis	Annually from January 2027
22	SVWG annual report to LTC and EdPSC	Annually from May 2027

Focus Area Five

Degree Calculations Tool

Aim: Delivering a quality-assured set of tools and processes to support calculation of degree outcomes based on revised regulations.

TPR Recommendations Addressed

3	Prioritise completion of the regulation simplification programme to enable implementation of an appropriate system for programme-level aggregation by AY 2027-28 (paragraph 22). *See also* ***Focus Area One, page 8***.

This focus area builds on Focus Areas One and Two to deliver a consistent, transparent, and quality-assured approach to degree calculation. It is dependent on the completion of regulatory simplification (Focus Area One), standard processes degree calculation tool and standardised processes for session 2026–27 (Focus Area Two), providing a consistent and quality-assured approach ahead of full system integration.

The University will transition to a single, integrated approach to degree calculation with clear institutional oversight. This represents a significant change and will be implemented in a controlled and phased manner.

During the transition period, assurance of degree outcomes will continue through the controls established in Focus Area Two, including risk-based review and ongoing monitoring.

The University is developing options to integrate degree calculation within core systems in AY 2027-28. The approach will be refined iteratively, with progress and key decisions shared with QAAS.

Deliverables and Evidence

Deliverable	Future Evidence of Fulfilment
Agreed specification for programme-level degree calculation aligned to revised regulations and standardised processes.	Specification approved; validated against comprehensive test scenarios.
Design and development (or procurement) of the Degree Calculations Tool.	Acceptance testing completed; institutional sign-off
Configured and tested tool aligned to standard degree calculation rules and data structures.	Documented testing outcomes; discrepancies resolved and recorded.
Piloting of the Degree Calculations Tool in live programme contexts.	Pilot evaluation reports; issues tracked and resolved.
Training and transition to the Degree Calculations Tool.	Staff training completed; guidance issued; competence records maintained.
Implementation of the Degree Calculations Tool across programmes.	Tool operational for AY 2027-28; confirmation of use across all relevant Boards of Examiners.
Post-implementation review and refinement.	Review completed following initial Board cycle; findings reported to EdPSC with actions.

Target Future State

A robust, quality-assured, programme-level degree calculation tool producing consistent, accurate, and auditable outcomes across all programmes. Centrally managed, aligned with revised regulations, supported by training and documentation. Manual processes eliminated or subject to enhanced oversight.

Outcome Measures and Evidence

Outcome Measure	Future Evidence of Fulfilment
Degree calculation aligned consistently to revised regulations and programme-level rules.	Verified outputs across sampled programmes; no material inconsistencies identified.
Accurate and reliable degree outcomes in practice.	Post-implementation review confirms accuracy; issues identified and resolved.
Transition from interim aggregation tools to integrated system achieved.	Legacy calculation tools retired or superseded; system usage confirmed.
Staff confident and competent in use of the tool.	Training completion and competence records; user feedback.
Degree calculation fully auditable at student level.	All inputs, parameters, and outputs retrievable and traceable.
Ongoing assurance embedded.	Annual audit and sampling integrated into assurance cycle.

Timeline

Rec	Action	End Date
3	Requirements and specification development (aligned to standard processes and calculation tools)	June 2026
3	Design and implementation planning (including system approach and governance)	October 2026
3	Development / procurement of Degree Calculations Tool	April 2027
3	Configuration and comprehensive testing	April-June 2027
3	Training development and delivery	June 2027- April 2028
3	Pilot implementation (aligned to academic cycle)	Semester 1, AY 2027-28
3	Full implementation across programmes	Semester 2, AY 2027-28
3	Post-implementation review and refinement	Following first Board cycle (AY 2027-28)

Appendix I

QAAS TPR Recommendations

The following list of recommendations is drawn from the Targeted Peer Review published by QAA Scotland.

Recommendation numbers have been adapted for ease of use within the action plan. The original numbering can be found in the TPR.[1]

1 https://www.qaa.ac.uk/docs/qaa/reports/sqcs-targeted-peer-review-glasgow-oct-25.pdf

Appendix I - QAAS TPR Recommendations

#	Recommendation
1	The TPR team recommends that the University is subject to additional institutional liaison meetings in academic years 2025-26 and 2026-27 to monitor and report regularly on progress against all the recommendations within this report (paragraph 18).
2	The TPR team recommends that the University's next external peer review takes place in academic year 2027-28 and considers progress against all the recommendations contained within this report (paragraph 19).
3	The TPR team recommends that the University prioritises completion of the regulation simplification programme to enable implementation of an appropriate system for programme-level aggregation by academic year 2027-28 (paragraph 22).
4	The TPR team recommends that the University establishes and implements an annual assurance cycle owned by the Academic Regulations Committee (ARC) that specifies sampling frames, coverage by school, timelines for follow-up and a published synthesis of external examiner themes mapped to actions and owners (paragraph 25).
5	The TPR team recommends, as an immediate priority and before the next assessment diet in academic year 2025-26, that the University undertakes a rigorous review of all exam board spreadsheets currently in use, with institutional sign-off confirming that each is fit for purpose (paragraph 31).
6	The TPR team recommends that the University continues with the planned harmonisation of mark aggregation and evaluation processes, including completing the scheduled roll-out of the course aggregation tool for courses in academic year 2025-26 (paragraph 32).
7	The TPR team recommends that the University, by the 2026-27 academic cycle, strengthens scrutiny and oversight of exam boards by making the minutes template compulsory, introducing a short pre-board readiness checklist owned by the Assessment Officer, requiring explicit alignment statements where local or PSRB requirements apply, and regularly sampling minutes to verify that key checks are recorded (paragraph 37).
8	The TPR team recommends that, building on the QESR (2023) recommendation, the University ensures that the Student Support Officer role is clearly defined and fully communicated to, and understood by, staff and students at the University by the end of semester 2 of academic year 2025-26 (paragraph 44).
9	The TPR team recommends that the University ensures adequate resourcing for the Wellbeing and Safeguarding Teams to meet the operational demands of the new Extenuating Circumstances process by the end of semester 2 of academic year 2025-26 (paragraph 45).
10	The TPR team recommends that the University monitors the Stage 2 process (locally managed academic decision) closely, as it is implemented from semester 2 of academic year 2025-26, responding promptly to any issues that emerge (paragraph 47).
11	The TPR team recommends that appropriate support, guidance, and continuing professional development is provided to ensure Senate Assessors are well prepared and fully aware of the potential academic and wellbeing implications for students, including possible impacts on qualification outcomes. The University should also ensure that appropriate systems are in place to record and monitor decisions that are made by Senate Assessors (paragraph 48).
12	The TPR team recommends that an evaluation of the new Extenuating Circumstances Policy and process be undertaken at the end of academic year 2025-26, with ongoing monitoring in subsequent years. An evaluation framework should be established to actively track and monitor the impact of the new policy and process through defined metrics, regular review meetings, and the systematic collection of student and staff feedback, and put in place measures to address identified issues (paragraph 54).
13	The TPR team recommends that the University continues to adhere to the stated implementation timeline for the student communications project, with development of the revised award outcome letters by the end of academic year 2025-26 and formal adoption in academic year 2026-27 (paragraph 55).
14	The TPR team recommends that the University, from academic year 2025-26, develops and implements a coordinated approach to embedding 'compassionate communication' principles across all relevant academic and professional service areas, including consistent delivery of training, clear articulation of expected standards, and monitoring of uptake and impact. Related resources should also be made accessible institution-wide to support a shared understanding and ensure greater consistency of practice (paragraph 59).
15	The TPR team recommends that the University mandates greater standardisation of spreadsheet templates for the interim period before regulatory simplification and systems development are complete, so that only institution-approved templates are used across all schools (paragraph 67).

#	Recommendation
16	The TPR team recommends, as a matter of urgency, that the University continues the review of student awards across the institution and puts mechanisms in place to have oversight of all awards of credit made in its name (paragraph 70).
17	The TPR team recommends that the University develops, as a matter of urgency and before the next assessment diet, a standardised, mandatory cyclical training programme in support of the operation of the Assessment Framework. Training should ensure staff understand the Code of Assessment (particularly administrative grades), use spreadsheets appropriately, and operate exam boards effectively. The training should be designed around clear learning outcomes to address common misconceptions. Training must be mandatory for Assessment Officers, exam board Chairs, and key administrators, with a process to confirm and monitor completion. Expectations for refresher training should also be established (paragraph 72).
18	The TPR team recommends that the University reviews its approach to risk management to ensure there are suitable monitoring and reporting mechanisms that apply to the operation of the Assessment Framework (paragraph 77).
19	The TPR team recommends that the University develops an approach to policy and process implementation that strikes an appropriate balance between complete standardisation across the University and complete delegation to school level, with identified principles to be followed in arriving at an implementation plan for each policy (paragraph 80).
20	The TPR team recommends that, as part of the regulation simplification programme, the institution co-designs, in partnership with students, guidance and resources to ensure critical elements of the assessment regulations are communicated to students and staff in a way that is accessible, digestible and valuable, to be implemented in academic year 2026-27 (paragraph 92).
21	The TPR team recommends that the institution considers the strategic approach to the production and use of handbooks (or other student-facing guidance mechanisms such as virtual learning environment templates) by academic year 2026-27. This could include facilitation opportunities for sharing best practice, support through centrally produced content or templates, and mechanisms for oversight to assure itself that required guidance to students is being delivered and is accurate (paragraph 93).
22	The TPR team recommends that the University continues planned actions to evolve its approach to student voice from a consultative to collaborative culture across all levels of the institution. The University should consider how it sets and communicates expectations around student involvement in enhancement design across schools, and outline methods to assure itself of the effectiveness of student voice mechanisms by academic year 2026-27 (paragraph 99).

The University of Glasgow, charity number SC004401