

Application for Research Degree Awarding Powers

Wrexham University
Final Report

March 2024

Contents

About this report	1
Introduction	2
Executive summary	4
Discharge of responsibilities following the grant of taught degree awarding powers	4
Criteria for the award of research degree awarding powers	12
Concluding summary	13
Privy Council's decision	14
Key information about Wrexham University	15
About Wrexham University	15
Explanation of findings	17
Criterion A: Governance and academic management	17
Criterion A1	17
Criterion B: Academic standards and quality assurance	27
Criterion B1	27
Criterion B2	30
Criterion B3	36
Criterion B4	41
Criterion C: Scholarship and the pedagogical effectiveness of academic staff	47
Criterion C1	47
Criterion D: The environment supporting the delivery of taught higher education programmes	51
Criterion D1	51
Detailed scrutiny of evidence supporting the additional criteria for research degree awarding powers	58
Criterion 1	58
Criterion 2	64
Criterion 3	68

Compliance with the ESG

The Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG) provide the framework for internal and external quality assurance in the European Higher Education Area. QAA's review methods are [compliant with these standards](#), as are the [reports we publish](#). More information is available on our [website](#).

About this report

This report reflects the findings of a team appointed by the Quality Assurance Agency for Higher Education (QAA) to conduct a detailed scrutiny of an application from Wrexham University (the University) for the power to award research degrees.

Section 76 of the *Further and Higher Education Act 1992* and Section 48 of the *Further and Higher Education (Scotland) Act 1992* empower the Privy Council to specify institutions of higher education as competent to grant awards: in other words, to award their own degrees. In considering applications for degree awarding powers, the Privy Council seeks advice from the appropriate territorial minister with higher education responsibilities. In turn, the Minister seeks advice from QAA.

Applicants for research degree awarding powers (RDAP) must already have met, and continue to meet, the criteria for taught degree awarding powers (TDAP).

For Wales, applications are considered against criteria approved by government on 1 September 2004.¹ In advising on applications, QAA is guided by the relevant criteria and the associated evidence requirements. QAA's work in this area is overseen by its Advisory Committee on Degree Awarding Powers (ACDAP), a subcommittee of the QAA Board.

ACDAP's initial consideration of applications establishes whether an applicant has made a case to proceed to detailed scrutiny of the application and the evidence on which it is based. If satisfied on this matter, ACDAP appoints a team to conduct the scrutiny and prepare a report, enabling ACDAP to determine the nature of the recommendation it will make to the QAA Board.

Scrutiny teams produce reports following each of the engagements undertaken. The final report reflects the team's findings and is structured around the four main criteria contained in the 2017 TDAP criteria and three RDAP criteria.

Subject to the approval of the Board, QAA's advice is communicated to the appropriate minister. This advice is provided in confidence. The Minister determines whether it should be disclosed to the applicant. A final decision on an application and the notification of that decision is a matter for the Privy Council.

¹[Degree awarding powers: guidance and criteria for applicants | GOV.WALES](#)

Introduction

This report provides a summary of the work and findings of the scrutiny team (the team) appointed by QAA to review in detail the evidence submitted in support of an application for research degree awarding powers (RDAP) by Wrexham University (the University).

The application was considered by QAA's Advisory Committee on Degree Awarding Powers, in November 2022 when the Committee agreed to proceed to the detailed scrutiny of the application.

The team appointed to conduct the detailed scrutiny, comprised the following members:

Name: Professor Jeremy Bradshaw
Institution: Former Pro Vice Chancellor, University of Bath
Role in scrutiny team: DAP reviewer

Name: Professor David Gardner
Institution: Professor of Physiology, University of Nottingham
Role in scrutiny team: DAP reviewer

Name: Mrs Alison Jones
Institution: Head of Academic Quality Management, University of Salford
Role in scrutiny team: DAP reviewer

Name: Dr Cara Molyneux
Institution: Lancaster University Management School
Role in scrutiny team: DAP Student reviewer

The detailed scrutiny was managed on behalf of QAA by Dr Judith Foreman.

In the course of the scrutiny, the team read a wide range of documents presented as part of the evidence in support of the application, including the University's Critical Self-analysis. The team also spoke to a range of the institution's stakeholders and observed meetings and events pertinent to the application. This final report reflects the team's findings and is structured around the criteria contained in the 2017 RDAP criteria.²

The detailed scrutiny, which began in January 2023, culminated in a report to the Advisory Committee on Degree Awarding Powers in April 2024. The Committee's consideration of the team's report and the University's commentary focused on whether the criteria outlined in the Welsh Government publication [Applications for the grant of Degree Awarding Powers: guidance and criteria for applicants in Wales \(2017\)](#) were met and concluded that the application should be put into abeyance for a period of one year. This was because, while there were many positive aspects noted in the team's report with most criteria met, Committee members deemed there to be insufficient evidence to confirm that Criterion A1 and Criterion B2 were met. On considering the team's report, Committee members noted that additional evidence in support of these criteria would become available following the University's Quality Enhancement Review (QER) due to complete in February 2025 which could further inform ACDAP's consideration of the application. It had been agreed between the University, Medr and QAA that the review team undertaking the QER would consider, as part of the QER process, whether the [Concerns Investigation action plan](#) resulting from the [Concerns Investigation in January 2023](#) had been successfully completed.

² The TDAP and RDAP criteria are available at [Degree awarding powers: guidance and criteria for applicants | GOV.WALES](#)

The Committee agreed to reconvene following the one-year period of abeyance and the receipt of the additional evidence. In its correspondence to the University (June 2024) setting out its decision the Committee noted particularly that the outcome of the QER scheduled for early 2025, coupled with the University's completed evaluation of the effectiveness of actions taken in response to the Concerns Investigation, should generate the additional evidence needed by the Committee to determine whether each criterion is met or not. The additional evidence was received early in June 2025, and the Committee reconvened later the same month.

Executive summary

Discharge of responsibilities following the grant of taught degree awarding powers

Criterion A: Governance and academic management

Criterion A1

The University's financial planning, quality assurance and resource allocation policies are coherent and relate to its higher education mission, aims and objectives. Higher education activities take full account of relevant legislation, and strategies, policies and procedures are aligned to the UK Quality Code for Higher Education (UK Quality Code) and associated guidance. A mapping of the University's regulations, policies and procedures against the UK Quality Code is updated annually. References to external reference points are explicit in the regulations and in the Academic Quality Handbook (AQH) which sets out the University's procedures for quality assurance.

The University's higher education mission and strategic direction are coherent and understood because they have emerged from extensive consultation with internal and external stakeholders. The overall strategic direction is understood and consistently applied by the Board of Governors, which has established key performance indicators (KPIs) to monitor performance in relation to the University's strategic aims and to provide the Board with some high-level assurance that the University's academic policies effectively support its higher education mission, aims and objectives.

The evidence confirms that there is a clarity of function and responsibility at all levels of the University in relation to its governance and management structures. The Board of Governors' oversight of quality and standards was strengthened during the scrutiny period when the Quality and Standards Scrutiny Panel became a full subcommittee of the Board of Governors as the Academic Quality and Standards Committee.

There is an appropriate depth and strength of academic leadership across the whole of its higher education provision. The University effectively works in partnership with staff, students and other stakeholders to develop, implement and communicate its academic policies and systems. Students are individually and collectively engaged in the governance and management of the University and its higher education.

The University's regulations, policies, codes of practice and systems are monitored and reviewed regularly. It regularly reviews the effectiveness of its governance and management structures and there is evidence of change arising from these reviews. Mechanisms are in place within the governance and academic management structure for the management of academic risk and to ensure that academic standards are secured.

An investigation into Wrexham Glyndŵr University was instigated by the Higher Education Funding Council for Wales (HEFCW) and passed to QAA on 24 November 2022 for a Stage 2 Investigation under the Concerns Investigation Process (Wales). The final report from QAA's investigation team, which HEFCW received in March 2023, reached a conclusion of serious issues found relating to the ineffective operation of parts of the academic governance structure and the management of quality assurance procedures. The report contained several recommendations for action which fall within the scope of Criterion A: Governance and academic management. These include: action in relation to the management and oversight of partnerships, particularly in relation to the approval of new partnerships and associated academic risks; strengthening the reporting of key datasets

relating to student success to enable more effective institutional oversight; review of procedures for the management of extenuating circumstances and strengthening reporting and oversight of extenuating circumstances claims, student complaints and academic appeals; and that the Board of Governors should continue to strengthen its arrangements for the effective oversight of quality and standards, including in relation to academic partnerships.

The University developed an action plan to address the recommendations contained in the Concerns Investigation report and began implementing actions, overseen and monitored by the Vice Chancellor, the Executive Team and the Board of Governors, early in the degree awarding powers (DAP) scrutiny process. The DAP scrutiny team reviewed the implementation of the University's action plan as part of the wider evidence base scrutinised in relation to the RDAP application and saw evidence of changes being implemented to address the recommendations in the report to HEFCW. The details of the changes and evidence of implementation are considered more fully in the main body of this report.

Based on the evidence, the team formed the view that the changes looked to be appropriate and adequate to address the deficiencies in governance and academic management identified in the report to HEFCW. The University's evaluation of the effectiveness of each action has been scheduled for 2024, also involving externality. While the team saw clear evidence that the University was making demonstrable progress in implementing the action plan, the team noted that the action plan constituted work in progress requiring additional time to be evaluated and to ensure that the University fully meets the requirements for Criterion A.

As noted above, ACDAP met to consider the application in April 2024 and at that time put the application into abeyance pending additional evidence in relation to Criterion A. On receipt of the additional evidence in June 2025, the Committee noted that the QER team was satisfied that recommendations of the Concerns Investigation had been satisfactorily completed and that no further action was necessary. Committee members also noted that, within two years of the original QER, progress against any areas of ongoing development in relation to Criterion A1 would be monitored along with the action plan taking forward the outcomes of the QER.

On the basis of these findings ACDAP concludes that Wrexham University meets Criterion A.

Criterion B: Academic standards and quality assurance

Criterion B1

There is an appropriate regulatory framework in place to govern the award of the University's taught qualifications. The regulations for the award of credit and qualifications, and associated framework of policies and procedures, which includes arrangements for programme approval, student admissions, and assessment, align with the Framework for Higher Education Qualifications of Degree-Awarding Bodies in England, Wales and Northern Ireland (FHEQ) and the UK Quality Code.

The University undertook a review of its general academic regulations and extenuating circumstances procedures during the DAP scrutiny period in response to a recommendation in the report to HEFCW of a Concerns Investigation that the University should ensure that academic regulations are implemented consistently. The revised regulations were approved by Academic Board during the scrutiny period. The Quality and Regulations team also embarked on a longer-term review during the scrutiny period of all its existing policies and procedures which support the general regulations. This is due for completion in 2024.

The University currently operates the regulations of its awarding body, the University of Chester, for the award of postgraduate research degrees and the evidence confirms that the regulations are fully and consistently implemented. In preparation for the granting of RDAP, the University has developed, and had approved, appropriate regulations for the transition to the award of its own research degrees.

Criterion B2

The University has clear and consistently applied mechanisms for defining and securing the academic standards of its higher education provision as set out in the Academic Quality Handbook (AQH). Clear procedures are in place for programme approval, periodic review, modification and closure, programme monitoring, the use of external examiners and working with Professional, Statutory and Regulatory Bodies (PSRBs) to secure and maintain academic standards of its provision. Its higher education awards are offered at levels that correspond to the relevant levels of the FHEQ. The University explicitly seeks advice from external peers and professional and statutory bodies to establish and maintain comparability of academic standards with other UK institutions. There is an explicit and close relationship between academic planning and decisions on resource allocation.

Programme approval and review procedures require programme teams and approval panels to take account of the UK Quality Code, credit frameworks, Characteristics Statements, Subject Benchmark Statements, and other external reference points. The team saw evidence of the effective application of these procedures in examples of reports of validation and periodic review events that had taken place before the commencement of the scrutiny period and through the observation of a periodic review event in May 2023.

During the scrutiny period, the University implemented changes to its programme approval and review procedures in response to a recommendation in the report to HEFCW of the Concerns Investigation that the University ensures that all relevant external reference points are considered fully during the programme development and approval process. Changes to programme approval were also made in response to the recommendation in the Concerns Investigation report to give wider consideration within the approval process to the partner's ability to deliver programmes of the required quality.

Based on the evidence available during the scrutiny period, the team formed the view that the changes to programme validation and review procedures implemented by the University are credible and should enable the University to ensure the consistent application of its procedures and alignment with external reference points across all its provision. The changes should also strengthen the consideration of partner arrangements for programme delivery during programme approval. However, the team was not able to assess the consistent application and impact of these amended procedures in practice by the end of the scrutiny period.

Criterion B3

Effective mechanisms are in place to ensure that the University consistently meets its stated learning objectives and achieves its intended outcomes. The University's strategies for curriculum development, and teaching and learning, are aligned to the University's Vision and Strategy. New course proposals must demonstrate how they meet the University's high level learning objectives. Staff are informed of, and provided with, guidance on policies and procedures for programme design, monitoring and review. Responsibility for amending and improving new programme proposals is clearly assigned in the AQH which sets out the clearly defined stages through which new programme proposals must pass before final approval by Academic Board. The coherence of programmes with alternative pathways is evaluated during the programme validation process. The evidence demonstrates that close links are maintained between learning support services and programme planning, approval, monitoring and review arrangements. The adequacy of learning opportunities provided to students studying at a distance is considered at initial programme approval and reviewed subsequently through annual monitoring.

Appropriate policies and procedures are in place to ensure that assessment practices are consistent with course objectives and intended learning outcomes. Assessment practices are communicated clearly to staff and students, and the evidence confirms that they are operated in line with the University's stated policies. The examples of student work seen by the team confirmed that assessment tasks enabled students to demonstrate the extent to which they have achieved the intended learning outcomes. The University makes effective use of suitably qualified external examiners in monitoring the reliability and validity of assessment procedures. External examiner reports and student performance data are monitored at programme and institution level and inform programme development. Clear mechanisms that safeguard students' interests are in place for use when a decision is taken to close a programme or programme element.

Criterion B4

There is considerable evidence that the University takes effective action to promote strengths and respond to identified weaknesses. The University's approach to self-criticality and enhancement is set out in the Enhancement Framework which is explicitly aligned to the UK Quality Code and includes the participation of students, employers, professional bodies, external advisors and University staff in quality enhancement and assurance. Appropriate arrangements, detailed in the AQH are in place at programme and institutional level to critically review its own performance and encourage continuous improvement, and there is evidence that the University acts in response to matters raised through internal and external monitoring and review. Its programme design, approval and review arrangements effectively draw on external expertise, and there are a range of internal mechanisms and activities that enable the sharing of good practice. Reviews of governance and academic management arrangements and internal processes, such as student procedures and programme approval and periodic review procedures, are effective in promoting improvement.

As noted in Criterion B1, B2 and B3 above, the University implemented changes to its quality assurance arrangements during the scrutiny period in response to recommendations in the report to HEFCW of a Concerns Investigation which identified serious concerns relating to the effectiveness of the programme approval process, arrangements for partner approval, and the consistent application of academic regulations. Based on the evidence, the team formed the view that the changes appeared appropriate and adequate to address the deficiencies identified in the Concerns Investigation report. The University's evaluation of the effectiveness of each action has been scheduled for 2024, also involving externality. The scrutiny team saw evidence that the University is making progress in implementing changes to strengthen the quality assurance management procedures. However, the team was not able to assess the consistent application and impact of these amended procedures in practice by the end of the scrutiny period. Therefore, additional time is required to provide the further evidence to enable the University to demonstrate that it fully meets the requirements of Criterion B: Academic standards and quality assurance.

As noted above, ACDAP met to consider the application in April 2024 and at that time put the application into abeyance pending additional evidence in relation to Criterion B2. On receipt of the additional evidence in June 2025, the Committee noted that the QER team was satisfied that recommendations of the Concerns Investigation had been satisfactorily completed and that no further action was necessary. Committee members also noted that, within two years of the original QER, progress against any areas of ongoing development in relation to Criterion B2 would be monitored along with the action plan taking forward the outcomes of the QER.

On the basis of these findings ACDAP concludes that Wrexham University meets Criterion B.

Criterion C: Scholarship and the pedagogical effectiveness of academic staff

Criterion C1

The evidence fully demonstrates that the staff of the University have the academic and professional expertise to teach, facilitate learning and undertake assessment of qualifications being awarded. For appointment to the academic staff of the University, applicants must demonstrate the necessary expertise and experience related to the relevant subject, at both undergraduate and postgraduate level, and must accept responsibility for ensuring they continue to update their knowledge and skills to be effective in their roles, and to participate in the staff personal development appraisal process. Promotion to a readership requires evidence of a distinguished contribution to the advancement of a subject discipline, and to a Personal Chair, evidence of an internationally significant and distinguished contribution in their field. All staff who deliver the University's programmes at partner institutions must first be approved by the University. The evidence confirms that all staff have relevant academic and professional qualifications appropriate to the level at which they teach.

A priority action of the Strategy for Supporting Student Learning and Achievement is to develop a research-informed curriculum. To this end, knowledge and understanding of current research and advanced scholarship in their discipline area is an expectation placed on all academic staff members at the University. The University's work-load allocation model is effective in allowing time to undertake research and scholarly activity. Engagement with the activities of providers of higher education in other institutions is encouraged and monitored. The University provided extensive evidence of the research and scholarly activity undertaken by staff, engagement of staff with other institutions as external examiners and external reviewers, as well as their engagement in external networks relating to research, practice, creative and professional communities.

Staff are provided with development and appraisal opportunities aimed at enabling them to develop and enhance their professional competence and scholarship, and staff are encouraged and supported to hold professional recognition as a Fellow of AdvanceHE. Staff with programme management responsibilities have relevant experience of curriculum design and assessment, and the University provides training to support their continued development. All staff are supported to develop their assessment practice, and there is extensive evidence of staff engagement in reviewing, amending and developing curricula as part of annual monitoring, periodic programme review and new programme design and approval.

On the basis of these findings ACDAP concludes that Wrexham University meets Criterion C.

Criterion D: The environment supporting the delivery of taught higher education programmes

Criterion D1

The evidence demonstrates that the teaching and learning infrastructure, including student and administrative support arrangements, is effective and monitored. The University's approach to the provision of a supportive learning environment is articulated in key strategies which set out a clear vision for the student experience, the engagement of students as partners, and the means to achieve that vision, underpinned by a commitment to support equality and diversity. The Learning, Teaching and Quality Committee (LTQC) exercises oversight of these strategies, as demonstrated in evidence which confirms engagement with, and monitoring of, the strategies.

There is clear evidence of internal cooperation between professional services and academic departments in the planning, development and evaluation of teaching and learning activities and student support. Available learning support materials ensure that students are enabled to achieve the stated purposes of their study programmes. Effective monitoring and evaluation of the learning infrastructure is undertaken at institution and programme level and involves systematic consideration of student, staff and employer feedback.

Students are effectively inducted into their courses of study, and arrangements are in place to identify and assess individual learning needs early in the student journey. Well-qualified staff provide a range of counselling and mental health and well-being support and support students with additional learning requirements and disabilities, for example, to negotiate individual exam arrangements or apply for the Disabled Students Allowance. Advice on careers and employability as well as student funding and money is also available. The services are monitored and evaluated and areas for development identified and acted upon. Staff involved with supporting the delivery of the University's provision are given adequate and wide-ranging opportunities for professional development.

Students are informed about the outcomes of assessment in a timely manner, and feedback on assessed work is constructive and developmental. External examiner reports provide evidence of the appropriateness of feedback on assessment, and student views on their experience generally demonstrate a high level of satisfaction with assessment.

Administrative systems provide a range of data and reports on such matters as student enrolment, retention, progression and performance, as well as student satisfaction, and these are used effectively to monitor and enhance the student experience and maintain academic quality and standards. As noted in Criterion A, the University introduced changes during the scrutiny period to strengthen data reporting and oversight at programme and institutional levels. Effective mechanisms are in place to ensure that the information that the University produces concerning its provision, including its awards delivered by partner institutions, is accurate and complete.

There are effective and confidential mechanisms in place to deal with student complaints and academic appeals across the whole of the University's provision. Academic appeals and complaints are analysed and reported on within the academic management structure. The University introduced changes during the scrutiny period to the frequency of reporting to ensure that its monitoring and oversight of complaints and appeals is fully effective to enhance quality. The team saw evidence of this happening in their observations and in the associated papers of the LTQC meetings in July and October 2023.

The University's strategies and policies state that it is committed to seeking and achieving equality of opportunity, and the team saw considerable evidence of the implementation of

this commitment in its teaching, learning and student support activities. Progress towards achieving equality of opportunity and widening access to higher education is planned, monitored and responsibility for any action clearly identified. The team concluded that the University is determined and takes an insightful approach to foster equality of opportunity and inclusion for its staff and students in all aspects of the institution's activities.

On the basis of these findings ACDAP concludes that Wrexham University meets Criterion D.

Criteria for the award of research degree awarding powers

Criterion 1

The University has longstanding and successful experience of training postgraduate research students since 1976 in partnership with its awarding body, the University of Chester. In this context, and in collaboration with its awarding body, the University has developed and effectively operated its own policies and procedures in relation to ensuring that staff have the required knowledge, understanding and experience of research and advanced scholarship to inform their supervision and teaching. The effectiveness of the University's approach is fully confirmed in the evidence, which demonstrates that significant proportions of staff are active and recognised contributors to subject associations and learned societies, have recent experience of research activity in other institutions, and can demonstrate achievements that are recognised by the wider academic community to be of national and/or international standing.

There are clearly defined requirements for approval as a supervisor of a University of Chester research student, and the University has developed its own similar criteria should it be successful in its RDAP application. The team noted that the distribution of research activity between the two faculties is skewed towards the Faculty of Arts, Science and Technology, as measured, for example, by the distribution of staff eligible for submission to the Research Excellence Framework 2021, the proportion holding a doctorate, the proportion of professors and readers, or the proportions of principal and secondary supervisors. The difference is largely explained because the proportion of staff with PhDs is lower in the Faculty of Social and Life Sciences compared to the Faculty of Arts, Science and Technology, reflecting a greater preponderance of professional qualifications required to support the delivery of a range of health-related programmes.

The University is increasing the number of research-active staff through workforce planning, the development of its current staff, and the recruitment of staff who already hold a doctorate and can demonstrate engagement with research. The Research Committee, a committee of Academic Board, monitors faculty research strategies and research centre activities, and the University continues to increase the number of research centres and groups, based on areas of strength.

Evidence demonstrates that the University meets each of the metric tests contained in RDAP Criterion 1.

On the basis of these findings ACDAP concludes that Wrexham University meets Criterion 1.

Criterion 2

The University satisfies the expectations of the FHEQ in relation to the levels of its research degree programmes. At present, the responsibility for ensuring that research degrees delivered by the University align with the FHEQ lies with the University of Chester. The University works with the University of Chester to ensure that there are effective arrangements in place to secure the standards of the University of Chester's research degrees. Comparability of standards and alignment with qualifications frameworks on research programmes is monitored using suitably qualified external and internal examiners. In anticipation of gaining RDAP, the University has approved its own appropriate regulatory framework for the award of postgraduate research degrees aligned to the FHEQ.

The University undertakes regular mapping of its processes against the expectations of the UK Quality Code and associated guidance, and its regulations, policies and procedures,

including those which apply to the training of postgraduate research students, are set in that context.

The evidence shows that there are appropriate governance, academic management and administrative arrangements in place to oversee and support the teaching of research students. The provision of information about research degrees is clear and accessible to research students and staff. There is a supportive and inclusive environment for research students who are afforded opportunities for professional development. The University is a signatory to the Research Development Concordat and has a researcher development programme mapped to the UK Researcher Development Framework. Students are encouraged to participate in a variety of fora and activities to support networking, and share their experience, knowledge, expertise and research. Student feedback is used to improve the research environment and postgraduate research students are represented on the Research Committee. The University's Student Complaints Procedure and Academic Appeals procedures are accessible and used by research students.

Supervisors are appropriately skilled and supported. The register of supervisors and supervisor workloads are monitored by the University Research Degrees Sub-committee reporting to Research Committee. There is an established programme of doctoral supervisor training that covers student selection, admissions, interviewing, monitoring, progression/transfer, and examination. Students' progress is systematically monitored through regular supervisory meetings and annual reporting.

The University does not currently have research council-funded studentships and is therefore not required to implement any Research Degree Management Frameworks. In anticipation of increasing student numbers and the number of research grants, the University has mapped its processes against the UK Research and Innovation (UKRI) Training Grant Guidance and the UKRI Statement of Expectations for Doctoral Training. The team's scrutiny of the mapping and the available evidence indicates that the University has relevant policies and procedures in place and the capacity to satisfy the expectations and guidance.

On the basis of these findings ACDAP concludes that Wrexham University meets Criterion 2.

Criterion 3

The University has achieved 258 doctoral degree conferments, awarded through partner universities in the UK.

On the basis of these findings ACDAP concludes that Wrexham University meets Criterion 3.

Concluding summary

The evidence demonstrates that the University has in place means of critically reviewing its own performance, responding to identified weakness and building on its strengths. There are clear mechanisms for the scrutiny and monitoring of academic provision at programme and institutional level, through annual programme review and the preparation of monitoring reports for its governance and deliberative committees. The University is proactive in seeking and taking action in response to ideas and expertise from within and outside the institution, engaging staff, students, external examiners, employers and industry advisers in the development of teaching and learning, assessment and the curriculum.

There is a cohesive academic community, enabled through corporate strategies, which articulates a clear vision and purpose for the provision of higher education underpinned by

core principles to guide academic practice and curriculum development. Clearly defined deliberative structures facilitate debate and the sharing of ideas. Staff are brought together as members of committees and academic groups, are involved in the development of strategy and policy, and are supported to ensure they are competent to teach and facilitate learning at the required level. Students are effectively engaged as members of the academic community through involvement in deliberative committees and the provision of feedback on their experience. Responsibility for academic standards and quality is clearly defined within the governance and academic management structures, and the team saw evidence of effective oversight and action to maintain quality and standards being exercised at programme and institutional level. The University makes appropriate use of external examiners in assessment and confirming that standards are met and responds systematically to external examiner comments and recommendations for improvement. There is evidence of effective institutional oversight of external examiner comments and actions taken in response.

During the scrutiny period, the University made changes to its governance and academic management arrangements, and to its quality management procedures, in response to the recommendations of QAA's report to Higher Education Funding Council for Wales (HEFCW) of a Concerns Investigation which identified serious issues relating to academic standards and quality assurance mechanisms and the effectiveness of the governance structure. The team formed the view that the changes being implemented by the University looked to be appropriate and adequate to address the concerns raised in the report to HEFCW and will strengthen the University's ability to prevent, detect and rectify deficiencies and weaknesses in the quality assurance, management and governance processes. The team saw evidence during the scrutiny period of the effective strengthening of governors' oversight of quality and standards when the Quality and Standards Scrutiny Panel became a full subcommittee of the Board of Governors as the Academic Quality and Standards Committee and observed extended scrutiny and discussion of agenda items at Academic Board and the Board of Governors. The team also saw extensive evidence of the approval and implementation of new and amended quality assurance procedures. While the University has made and continues to make progress in taking action to address shortcomings identified, the effectiveness of the changes being implemented had yet to be tested by the end of the scrutiny. Such testing should provide further evidence to enable the University to demonstrate that it is exercising appropriate stewardship of its degree awarding powers and that it satisfies all the required criteria.

Privy Council's decision

The Privy Council's decision is to award Wrexham University research degree awarding powers from 4 March 2026.

Key information about Wrexham University

Legal name	Prifysgol Wreccsam/ Wrexham University
Trading name	Prifysgol Wreccsam/ Wrexham University
UKPRN	10007833
Type of institution	University
Date founded	2008
Date of first higher education provision	1975
Application route	Full Degree awarding powers
Level of powers applied for	Research Degree Awarding Powers (RDAP) up to and including Level 8
Subject(s) applied for	All subjects
Current powers held	Taught Degree Awarding Powers (TDAP) up to and including Level 7
Date current powers granted	2008
Locations of teaching/delivery	Plas Coch; Regent Street
Number of current programmes as at 2022, Provider Information Form	172 x bachelor's 157 x master's 13 x foundation degrees 2 x HNC 1 x Cert Ed 3 x Dip HE 4 x Graduate Diploma 2 x PCE 2 x PGCE MPhil and PhD programme
Number of students as 2021-22, HESA	Undergraduate: 3,205 FT; 4,285 PT Research students: 25 FT; 45 PT
Number of staff as at 2022-23, HESA	Academic: 145 FT; 80 PT
Current awarding body arrangement	University of Chester; University of Wales

About Wrexham University

Wrexham University's origins are in the merger of Denbighshire Technical College, Cartrefle Teacher Training College and Kelsterton College, which became North East Wales Institute of Higher Education (NEWI) in 1975. NEWI joined the University of Wales' federal structure in 2004. Glyndŵr University was established on 3 July 2008, following a successful application for TDAP and the granting of University Title by the Privy Council to NEWI. From 2016, the institution adopted for trading purposes the name 'Wrexham Glyndŵr University', though its formal title as Glyndŵr University remained unchanged. In February 2023, the University changed its formal title to Wrexham University (Prifysgol Wreccsam in Welsh).

The University's mission is to 'inspire and enable; transforming people and places and driving economic, social and cultural success'. It comprises two faculties: Arts, Science and Technology (FAST) and Social and Life Sciences (FSLS). The faculties have identical

leadership structures, with an Executive Dean supported by four Associate Deans. The Vice-Chancellor and the Executive Team are responsible for the management of the University, reporting to the Board of Governors. Academic affairs are reported to a series of committees with ultimate oversight for quality and standards taking place at Academic Board.

The University's main campus is at Plas Coch, Wrexham, with the School of Creative Arts a short walk away in Regent Street, Wrexham. Taught programmes are also delivered in the rural village of Northop. The University operates two research and development facilities: OpTIC, and the Advanced Composites Training and Development Centre.

One of the priority actions in the University's 'Vision and Strategy to 2025' is to 'Develop educational partnership provision across a broad range of curriculum offers in the UK and internationally'. The University works with three UK further education providers of higher education, two private UK institutions and 24 private overseas academic partners to deliver its taught higher education awards.

The University has trained research students since 1976. Postgraduate research degrees were initially awarded as NEWI, validated by the University of Salford and, since 1993, by the University of Wales. Following the merger of the University of Wales into the University of Wales, Trinity St David, the University of Chester has provided the validation for new research students since 2015.

In 2022, the University had a total of 3,205 full-time (FT) and 4,285 part-time (PT) students with a full-time equivalent (FTE) of 5,348. There were 25 FT and 45 PT postgraduate research degree students, totalling 47.5 FTE. Of the postgraduate research students, 33% are staff at the University (five FT and 21 PT). There is a total of 145 full-time and 80 fractional academic staff.

An investigation into Wrexham Glyndŵr University was instigated by the Higher Education Funding Council for Wales (HEFCW) and passed to QAA on 24 November 2022 for a Stage 2 investigation under the Concerns Investigation Process (Wales). The final report from QAA's investigation team, which HEFCW received in March 2023, reached a conclusion of serious issues found. The report of the investigation was published on HEFCW's website in August 2023. The QAA investigation team made several recommendations for HEFCW and the University to consider. In response, the University developed an action plan which was approved by HEFCW and undertook the implementation of actions relating to the recommendations of the Concerns Investigation during the RDAP scrutiny period. The implementation of the action plan is being monitored as part of HEFCW's quality assurance framework. All the recommendations contained in the report of the investigation touched on issues in the scope of the criteria for degree awarding powers. The changes made by the University arising from its implementation of the action plan during the scrutiny period are considered in this report as part of the assessment of the wider evidence base submitted to support the University's RDAP application.

Explanation of findings

In seeking research degree awarding powers (RDAPP), an applicant must have first secured taught degree awarding powers (TDAP), demonstrating that it continues to satisfy the criteria governing the grant of TDAP and exercises appropriate stewardship of such powers. The scrutiny team's (the team) findings are as follows.

Wrexham University was granted TDAP in 2008, meeting the criteria set out in the Guidance for applicant organisations in England and Wales (August 2004).

Criterion A: Governance and academic management

Criterion A1

1 This criterion states that:

An institution granted taught degree awarding powers is governed, managed and administered effectively, with clear and appropriate lines of accountability for its academic responsibilities. Its financial management is sound and a clear relationship exists between its financial policy and the safeguarding of the quality and standards of its higher education provision. In the case of an institution that is not primarily a higher education institution; its principal activities are compatible with the provision of higher education programmes and awards.

2 The University's mission is to 'inspire and enable; transforming people and places and driving economic, social and cultural success'. Its stated values are to be: accessible in the learning provided for its students, staff and community; supportive of its learners, staff, and the wider region, including industry and other stakeholders; innovative in the delivery and management of academic provision and professional services, and in relationships with collaborative and regulatory partners; and ambitious in what it seeks to deliver for students, staff and partners. Its strategic goals are set out under four domains - teaching, research, engagement, and structure. Underpinning each domain is a comprehensive set of clear strategy documents with key performance indicators and rolling priority aims and actions, approved by the Academic Board and the Board of Governors. Each strategy has the date of its most recent review and the date of the next required review. The tone of the research statement contained in the mission has recently been updated to reflect the Research Excellence Framework (REF) definition of 3* research and is now 'Research that transforms; supporting innovation, learning and economic growth, through being internationally excellent in originality, significance and rigour'.

3 The Strategy for Supporting Student Learning and Achievement aligns closely and explicitly to the University Vision and Strategy. It clearly states that the strategy will 'inform the planning and resourcing of Faculties, including student recruitment to, and the sustainability of, academic programmes', and 'drive the development of the pedagogic approaches required to enable flexible, accessible, inclusive and healthy curriculum delivery within the University's Active Learning Framework'. Similarly, the Estates and Learning Environment Strategy, the Digital Strategy, and the Environmental Sustainability Strategy align with the vision and core values contained in the University Vision and Strategy through explicit consideration of the core values and strategic themes and identification of priorities and actions to support the delivery of the values and strategy.

4 The Finance Strategy provides guidance to decision-making by the leadership, in alignment with the Strategy and Vision and, particularly, in support of the strategic priority 'Structure that Sustains'. It aims to ensure long-term financial sustainability of the University.

It includes high-level guidance on financial risk and mitigation to ensure that any financial risks associated with the activities of the University are communicated and managed appropriately.

5 Evidence that financial planning, quality assurance and resource allocation policies are coherent and relate to the institution's higher education mission, aims and objectives are found in the Minutes of the Strategy and Finance Committee, which record frequent consideration of the corporate key performance indicators, together with the close alignment of strategy and resource allocation. The annual financial planning process involves the Vice Chancellor's Executive Team and the Board of Governors' Strategy and Finance Committee, as recorded in the Terms of Reference of the Strategy and Finance Committee, and in committee papers of the Board of Governors and the Strategy and Finance Committee.

6 The Enhancement Framework describes the University's approach to the assurance and enhancement of academic quality. This is a high-level document that links the approach to the Strategy for Supporting Student Learning and Achievement (SSSLA) and key performance indicators (KPIs). It breaks the quality process into four stages: approach, deployment, review and improve. Learning and Teaching Quality Committee (LTQC) minutes and papers demonstrate that the committee reviews progress against the SSSLA action plan as a standing item. Academic Board receives reports from LTQC on the SSSLA.

7 There is evidence that higher education activities take account of relevant legislation, the UK Quality Code and associated guidance, and that compliance is monitored. The Quality Team regularly performs a mapping exercise of the University's policies and procedures against the UK Quality Code. The results are reported to LTQC. The most recent review was undertaken in 2022.

8 The General Regulations state that the University's regulatory framework is set in the context of national reference points including the Framework for Higher Education Qualifications (FHEQ), the Credit and Qualifications Framework for Wales (CQFW), the UK Quality Code, and Subject Benchmark Statements.

9 The Enhancement Framework states that it is aligned to the UK Quality Code and associated advice and guidance. It includes the participation of key stakeholders, such as students, employers, professional bodies and external advisors, in the quality enhancement and quality assurance process. The Academic Quality Handbook (AQH) provides a framework of process and procedures to meet quality assurance requirements and ensures that higher education activities are aligned to the UK Quality Code, the associated guidance and external reference points.

10 The annual report of the Academic Scrutiny Panel to the Board of Governors includes an assurance that the University's higher education activities comply with key external reference points, including: the UK Quality Code; Subject Benchmark Statements; the FHEQ; Characteristics Statements; the CQFW, and Professional, Statutory and Regulatory Bodies (PSRB) requirements. The University ensures it continues to meet the baseline regulatory requirements set out in the Quality Assessment Framework for Wales. Each year, information is provided to the funding council, and there is external scrutiny.

11 Strategies, policies and procedures make explicit reference to the UK Quality Code and associated guidance. For example, the AQH requires programmes seeking validation to be consistent with the UK Quality Code and the FHEQ and/or CQFW. The decision of which framework to use is recorded on the initial proposal for each programme, then development of the programme is aligned accordingly. Alignment with the appropriate framework is checked during the validation process, and during annual monitoring and review. Module development guidance requires that learning outcomes should reflect the level descriptors in the UK Quality Code Part A, and the setting of threshold academic standards should be in

alignment with the FHEQ and the CQFW. The University implemented changes during the RDAP scrutiny period to its pre-validation and validation processes in response to the report to the Higher Education Funding Council for Wales (HEFCW) of a Concerns Investigation to ensure that all relevant external reference points are considered fully during the programme development and approval process - see discussion in Criterion B2. Partnership agreements explicitly require partner institutions to deliver the University's programmes in accordance with its regulations, definitive programme documents, and under its academic quality systems and processes. The validation process for programmes delivered by academic partners includes coverage of regulation, policies and procedures, to ensure that partners understand and meet the University's expectations.

12 The University states that engaging students as partners is fundamental to its ethos, and both the University's vision and strategy and the SSSLA include working with students as a priority. In developing its policy on engaging students in quality assurance and enhancement, the University has explicitly used UK Quality Code advice and guidance on student engagement to formulate its approach. The framework outlines opportunities for engagement such as participation in module and programme surveys, programme representative systems, student representation on university committees, as well as participation in validation panels, specially formed task groups and external surveys. Details of support and training for student representatives and ways in which student feedback is used are also described in the framework and students are provided with a guide on engagement. The team saw evidence of students being effectively engaged as partners in quality assurance and enhancement – this is discussed further below, and in Criterion D1.

13 There is evidence that the University's mission and associated policies are understood and applied by staff and students. A staff survey, conducted every two years, reported in 2022 that 91% of respondents support the University's strategic aims and objectives, and 93% were aware of the University's values. Academic staff were conversant with the vision, mission and strategy and were able to provide examples of their applications, including valuing the student voice and research-informed teaching. They reported that the concept of 'Research that transforms' is central to the REF agenda, that it is explicit in the professional development review objectives, and that it informs the development of new programmes. Students were aware that the vision, mission and strategy were available on the website, though most had not looked at it. A few students who had read the documents reported that they were borne out in practice, particularly in terms of widening access and inclusion. They also testified that the concept of students as partners was very real in their experience. Consistent application of the University's mission, policies, and associated systems across all of the provision is monitored at programme and institution level - see discussion in Criterion B: Academic standards and quality assurance.

14 The evidence confirms that there is clarity of function and responsibility at all levels of the University in relation to its governance and management. Ultimate authority at the University rests with the Board of Governors whose composition is prescribed by the Standing Orders of the University. The Terms of Reference of the Board of Governors are included in the Scheme of Delegation that describes the responsibilities of the Board, and its delegations of authority to the Academic Board and the Vice-Chancellor and the Executive Team. The Nominations and Governance Committee monitors the membership of the Board to ensure an appropriate range of experience and expertise. The Student Union is responsible for nominating two student governors from among the elected officers of the Union, normally this will be the Union President and Vice President. There are clear role descriptions for the Chair, Vice Chair and members of the Board of Governors. There is a framework for succession planning for the independent members of the Board of Governors. The Board of Governors has six subcommittees - the Academic Quality and Standards Committee, People and Culture Committee, Audit and Risk Committee, Strategy and

Finance Committee, Nominations and Governance Committee and Remunerations Committee.

15 Observations of the Board of Governors' meetings, particularly those that took place after action had taken place to address the recommendations contained in the Report to HEFCW of a Concerns Investigation, showed that the Board manages its business rigorously, communicates effectively with other parts of the management and governance structure, and holds the Executive to account. An example of the latter was observed at the meeting of the Board of Governors on 24 November 2023 when proposals by the Executive for new partnerships procedures were rejected on the grounds of not being rigorous enough in their approach to risk assessment and management, and agreed that final approval of an amended template was delegated to the Academic Quality and Standards Committee.

16 Members of the Board of Governors reported that they assure themselves that academic standards are being upheld and that the quality of the teaching and learning experiences are being enhanced by monitoring performance metrics on quality and standards, student surveys, and teaching outcomes such as students in employment, completion and retention. This was verified through observations and Board papers. A Board Quality and Standards Scrutiny Panel was established in the 2019-20 academic year. This panel met more frequently than the full Board of Governors, held inspection walks round the campus, met with staff and students, and has attended strategy days. The Quality and Standards Scrutiny Panel became a full subcommittee of the Board, the Academic Quality and Standards Committee, in May 2023. An annual assurance report is commissioned by the Learning and Teaching Quality Committee, which goes to Academic Board, then to the Board of Governors, before submission to HEFCW.

17 According to the Scheme of Delegation, the Vice Chancellor is the Chief Executive of the University and the Accountable Officer. They may delegate the exercise of their powers and responsibilities as they see appropriate. The Vice Chancellor chairs the Academic Board, which is the senior academic authority. The Terms of Reference of Academic Board are found in the Academic Board Handbook. The Academic Board is responsible for research, scholarship, teaching, and courses at the University, including the criteria for the admission of students; the appointment and removal of internal and external examiners; policies and procedures for assessment and examination of the academic performance of students; the content of the curriculum; academic standards and the validation and review of courses; the procedures for the award of qualifications and honorary academic titles; and the procedures for expulsion of students for academic reasons. Such responsibilities are subject to the requirements of the validating and accrediting bodies. The Academic Board Handbook provides the current membership of Academic Board and its subcommittees, which comprise the Research Committee, LTQC, Academic Partnerships Committee, Access and Learner Engagement Group and Assessment Boards and Specialist Panels.

18 Academic Board receives regular reports from its committees, including the Research Committee, which plays a central role in overseeing the University's research activities, including monitoring progress against relevant KPIs and reporting to the Vice Chancellor and the Executive Group, and advising Academic Board on the establishment and development of policies to support and embed research activity in the University. It also reports to Academic Board on research degree programmes. There are two student members on the Research Committee. The University Research Degrees Subcommittee reports to the Research Committee and considers student business such as admission, progression, annual monitoring, recommendations for awards, and requests for interruption. The Research Ethics Committee has delegated powers from the Research Committee to consider proposals from postgraduate students. Guidance documentation and templates for application for ethical approval were provided for staff and students.

19 Observations of the Academic Board and its subcommittees and review of committee papers revealed rigorous scrutiny and detailed deliberation of each item, clear minuting, and comprehensive follow-up of actions. Reporting lines through the committee structure were clear and utilised appropriately.

20 The Vice-Chancellor is normally the Chair of the Board of Directors of any subsidiary companies and is accountable to the Board of Governors for the business conducted through those subsidiary companies. The executive management of the subsidiary companies and their business is delegated by the Vice Chancellor to other Directors or Managers as appropriate. The financial performance of the subsidiary companies is reported through the Board's Strategy and Finance Committee. The University has two subsidiary companies - Glyndŵr Innovations Ltd and North Wales Science. Glyndŵr Innovations Limited is a subsidiary of the University, and is located at the St Asaph campus, where it conducts research and leads European-funded projects. It has its own board, comprising members from industry. It is fully owned by the University and provides a core capability in research and development. North Wales Science oversees the Science Discovery Centre where school students can come and discover science. It has received support from the Wellcome Trust and regeneration funding from the Welsh Government. North Wales Science trades as 'Xplore!'.

21 The Scheme of Delegation includes a schedule of authorities for various actions and transactions. This provides clarification of the responsibilities of the Board of Governors which cannot be delegated, as well as those powers and functions which are delegated to committees and to executive officers of the University to facilitate decision-making. The report to HEFCW of a Concerns Investigation made recommendations about reporting lines and delegation of authority in relation to the management and oversight of partnerships, and quality and standards. This is discussed below.

22 The Vice-Chancellor's Executive Team (VCET) implements the strategic framework of the University working towards the achievement of the University's vision and mission. The remit encompasses financial health, resource management, strategic imperatives, action planning, partnerships and external impact, and risk management. VCET includes those members of management who report directly to the Vice Chancellor. A Vice-Chancellor's Board (VCB) carries responsibility for the operational management of the University, including strategic planning, financial management, student numbers, marketing communications, policies and procedures, management reporting, academic portfolio, staffing issues including continuing professional development (CPD), compliance, operational audits, health and safety, intellectual property, and risk management. Membership of the Board is determined by the Vice-Chancellor and includes the Executive Team and Directors of Professional Services, Heads of Academic Faculties, the President of the Student Union, and other senior managers, as appropriate. Curriculum Vitae (CVs) for the members of VCET and the other members of VCB provide evidence that there is appropriate depth and strength of academic leadership. The team found that post-holders have relevant experience and have held senior positions at other institutions and are thus able to draw upon their wider knowledge of the sector and expertise to lead academic development at the University.

23 The University develops, implements and communicates its academic policies in collaboration with staff, students and other stakeholders in a variety of ways. For example, the Enhancement Framework, Student Engagement in Quality Assurance and Enhancement Policy and Framework, SSSLA, Student Charter, and the Student Guide to Engagement in Quality Assurance and Enhancement (QAE) describe the University's commitment to engaging students in quality assurance and enhancement processes, deliberative committees, and decision-making activity. There are student members on the Board of

Governors, Academic Board, LTQC, Academic Partnerships Committee, Research Committee, Access and Learner Engagement Group, and Faculty Boards of Studies.

24 Committee minutes confirm student attendance and participation in meetings. Students who sit on university committees reported that they had received training for their roles and had been briefed before their first meeting. They felt supported and valued and provided examples of participation in programme development, review and validation processes and other projects, including, for example, collaboration with staff on matters relating to student support, assignment deadlines and feedback, and study spaces.

25 All institutional policies, procedures and relevant regulatory frameworks governing higher education are published and accessible for staff and students. Academic Board has responsibility for approving policies and procedures. Academic, professional and corporate services staff are represented on Academic Board and its committees and so contribute to policy development through deliberation and providing advice and feedback.

26 The Academic Partnerships: Partner Staff Guide provides partners with an overview of the University's policies and procedures with links to academic regulations, the quality and partnerships handbooks. The Partner Staff Guide is a comprehensive document which outlines roles and responsibilities and the academic and student administration of the programmes. Representatives from partners confirmed that they were informed about the University's policies at validation events. Student handbooks and Google Classroom contain information about university policy. The Partnership Office maintains regular dialogue with each partner, and there are academic links with programme teams at local operational level. Staff from partner institutions confirmed that link tutors foster a close working relationship and help them to keep up to date with any changes and that they are invited to contribute to the development of policies.

27 External stakeholders, including employers and community representatives, are informed about policies, initiatives and developments and contribute ideas through, for example, the University's civic engagement activities, external employer and professional body meetings where the University is represented, through employer engagement on the development and delivery of degree apprenticeships, and through employer involvement in stakeholder groups and industry liaison boards.

28 The evidence confirms that the University's academic policies, systems and activities are systematically monitored and reviewed. The University's policies and codes of practice contain version control information, approval, implementation, and review dates. The Academic Regulations are refreshed annually. Academic Board approved revisions to regulations and policies in September 2022. Since then, the Academic Regulations have been rewritten to make them clearer and easier to understand. Research policies are reviewed by Research Committee and approved by Academic Board.

29 Regulations for postgraduate study, together with the criteria for appointing supervisors and modified Terms of Reference of the Research Degrees Sub-Committee were approved by the Research Committee in January 2022 and by Academic Board in February 2022. The regulations for postgraduate study were revised in 2023, as part of the clarification and simplification of all academic regulations.

30 The University regularly reviews the effectiveness of its governance and management structures. The effectiveness of the Board of Governors was reviewed in the 2021-22 academic year. A report dated January 2022, an action plan update dated October 2022, and an action plan update dated July 2023 provide evidence of the rigour of the review and the actions that resulted from it. Of the 16 recommendations, the majority were accepted in full or in part (15 out of 16), while one, that the Strategy and Finance Committee be split into two separate committees, was not accepted. By the date of the July 2023 update, all actions

were completed or had become ongoing practice. Papers from the July 2023 meeting of the Board of Governors record completion of the Board Effectiveness Review action plan. Audit Committee papers include discussion of an evaluation of its own effectiveness and refer to an annual review of the effectiveness by each committee in the governance and management structure.

31 An external review of Academic Board and its subcommittees was completed in 2020. Academic Board undertook to produce an action plan in response to recommendations identified by the review. The responses to the findings of the review were submitted to the Academic Board meeting in November 2020. Revisions were made in relation to the role of elected representatives at Academic Board, the remit and ownership of Faculty Boards and student representation at Academic Board subcommittees. Another effectiveness review of Academic Board and its subcommittees has been scheduled to start in early 2024.

32 The Academic Board Handbook requires each committee to undertake a self-critical evaluation of its effectiveness every two years and to report on the outcomes to the relevant senior committee and include action plans to address any issues raised by its members. Examples of changes arising from reviews of committees' self-reflection on their effectiveness include the way in which Academic Programme Sub-Committee considers minor or major amendments to programmes and requests for recognition of prior learning, and two Faculty Boards of Studies have revised their processes for oversight of partnerships, recruitment, and retention.

33 In 2018, the Pro Vice-Chancellor Research commissioned an external review of the Research Office and Student Administration. The review findings included a number of recommendations that have largely been addressed, although ongoing work continues with some. The implemented changes include adjustments to the committee membership.

34 The University monitors and controls risk. It maintains a risk register, which is updated quarterly by members of the VCET acting on behalf of their management areas. Any uncontrolled risks are identified, and mitigation measures introduced. The risk register is reviewed regularly by the Audit and Risk Committee of the Board of Governors. Papers of this committee reveal extensive and detailed consideration of risk and its mitigation, including regular review of the Corporate Risk Report (risk register) and reporting to the Board of Governors. The Corporate Risk Report includes consideration of risks associated with academic quality and student engagement, student recruitment, research profile, academic partnerships, enterprise profile, organisation and personnel, physical and digital environment, financial sustainability, compliance and reputation, and national policy.

35 Mechanisms are in place to ensure that the academic standards of the University's awards are not put at risk. The Scheme of Delegation states clearly that the University accepts responsibility for the academic standards of all awards granted in its name, and that it is accountable to HEFCW, QAA, PSRBs and other awarding bodies for the quality and standards of the provision it offers. The Board of Governors has ultimate responsibility for the quality and standards of the students' academic experience and student outcomes and receives reports from the Academic Board to assure itself of the security of those quality and standards. Board of Governors' papers reveal receipt and consideration of reports from Academic Board and the business it has transacted. Recent business described in Academic Board reports includes approval of the annual Academic Quality and Standards Overview Report, approval of actions relating to the recommendations of the Concerns Investigation, consideration of a Completion Gap report, approval of the Annual Research Integrity Statement, approval of programme validations report, consideration of updates on the National Student Survey (NSS), Postgraduate Taught Experience Survey (PTES) and the International Student Barometer, and noting the work being undertaken to minimise the

impact of any industrial action over the assessment and marking period. LTQC minutes record scrutiny of programme validations and external examiner overview reports.

36 The Scheme of Delegation is clear that the University's responsibility for the quality and academic standards of its provision includes that offered in collaboration with partner organisations. Partnership agreements provide detailed definitions of the division of responsibilities and include a summary table for clarity, and compliance with the agreements is explicit in Partnership Approval Reports. Annual Partner Review Reports record identification of points for action and follow up on the previous year's report, and academic link reports show detailed consideration of academic standards and the quality of the teaching and learning environment. As described below, following the findings of the report to HEFCW of a Concerns Investigation, the Partnerships Procedure is being revised to strengthen the oversight of quality and standards.

37 The report to HEFCW of a Concerns Investigation contained several recommendations which fall within the scope of Criterion A1. These are detailed below. In each case, the team saw evidence of action that looked to be appropriate and adequate although at the end of the scrutiny period the effectiveness of the actions remains to be tested. Evaluation of the effectiveness of each action has been scheduled for 2024.

38 The report to HEFCW of a Concerns Investigation recommended that academic regulations should be implemented consistently in order to ensure that academic standards are maintained. In response, the University's Quality and Regulations team reviewed and refreshed the Regulations based on the principles of increased clarity, transparency and consistency, and will take a similar approach to all existing policies and procedures and develop new ones, where necessary, during the 2023-24 academic year. The Academic Board considered and approved revised Regulations and associated actions to ensure their implementation in November 2023.

39 Another recommendation concerned the role and responsibilities of the Director and Chair of the Extenuating Circumstances Panel. The role of Director of the Extenuating Circumstances Panel has now been removed as part of wider changes made to the extenuating circumstances procedure to ensure clarity of roles and processes. Changes have also been made to reporting and oversight of extenuating circumstances claims. LTQC will receive interim and annual reports on the number of claims received, upheld and rejected, and any recommendations on policy or procedures or which might enhance quality of provision. The University has also implemented changes in response to the recommendations of the Concerns Investigation report to ensure that its arrangements for monitoring and oversight of complaints and appeals is effective to enhance quality. Observation of LTQC meetings in July and October 2023, and scrutiny of associated papers, confirmed that detailed reports on extenuating circumstances, complaints and academic appeals, which included both quantitative and qualitative analysis and recommendations for enhancement, were received and discussed by participants.

40 The Concerns Investigation report also recommended strengthening the reporting of key datasets relating to student success to enable more effective institutional oversight. A matrix of dataset reporting to committees has been prepared and will be included in the Academic Board Handbook. It includes new reporting of student progression data to LTQC, Academic Board, Academic Quality and Standards Sub-Committee and the Board of Governors, and attainment and completion gap reporting will form part of the continuous monitoring and enhancement (CME) process of all programmes. It will be reviewed at least once a year as part of the annual review of the handbook. Observation of the Board of Governors revealed detailed scrutiny of student recruitment, attainment and completion data with governors asking probing questions of the Executive Team.

41 Several recommendations of the report to HEFCW of a Concerns Investigation are concerned with the management and governance of partnerships, particularly in relation to the approval of new partnerships and the associated risks. A new Partnerships Procedure has been prepared, detailing the governance relationships related to academic partnerships and defining the approach to be taken to assess and manage the associated risks. It includes the creation of a new Head of Partnership role, installing a senior academic as the Chair of the Academic Partnerships Committee, moving the locus of oversight of quality in validation and periodic review to the Quality and Regulations team, and strengthening oversight of partnerships by the Board of Governors and its Academic Quality and Standards Sub-Committee. The new Partnerships Procedure also includes an updated risk matrix that more clearly defines the risk categories for partnership arrangements and provides a procedure for determining risk rating, that together will become a component of the due diligence stage of the partner commissioning process. Although the document describes a far more discerning approach to the development and management of partnerships, the Board of Governors (at its November 2023 meeting) did not consider the proposed risk matrix and associated procedures to be rigorous enough and sent the proposals back to the Executive for revision.

42 The University's approach to evaluation and management of the risks specific to academic partnership activity has been strengthened through the measures described above. Previously, the Academic Partnerships Committee has carried considerable responsibility for the assessment and management of the risks associated with the University's partnerships. The recent changes provide a better-defined management and governance structure that more closely aligns with the institution's risk management strategies.

43 Following the Concerns Investigation report, senior management and the Governing Body reported that the changes brought about in response to the recommendations raised by the report will place the University in a much stronger position and better able to prevent, detect and rectify deficiencies and weaknesses in the management and governance processes. Evidence to support these statements is provided by subsequent observations of the Academic Board and the Board of Governors, both of which were characterised by extended scrutiny and discussion of each agenda item.

44 Based on the evidence reviewed above, including the University's past record and the way in which it has responded to the recommendations of the Concerns Investigation, the scrutiny team's view is that the University has the capability to continue to manage successfully the responsibilities associated with taught degree awarding powers. This is because its financial planning, quality assurance, and resource allocation policies are coherent and relate to its higher education mission, aims and objectives. Higher education activities take full account of relevant legislation, and strategies, policies and procedures are aligned to the UK Quality Code and associated guidance. Governance and management structures are clearly defined and there are appropriate lines of accountability. The Board of Governors' oversight of quality and standards was strengthened during the scrutiny period when the Quality and Standards Scrutiny Panel became a full subcommittee of the Board of Governors as the Academic Quality and Standards Committee.

45 There is an appropriate depth and strength of academic leadership across the whole of the University's higher education provision. The University effectively works in partnership with staff, students, and other stakeholders to develop, implement and communicate its academic policies and systems. Its regulations, policies, codes of practice and systems are monitored and reviewed regularly, and the University regularly reviews the effectiveness of its governance and management structures. Mechanisms are in place to manage risk and secure academic standards. In addition to the evidence considered in Criterion A, the wider evidence base reviewed in other sections of this report, which includes external examiner

reports, also indicates the University's effective stewardship of its taught degree awarding powers.

46 As discussed above and elsewhere in this report, the University is implementing changes to its governance and academic management arrangements which relate to the criteria for taught degree awarding powers in response to the recommendations of the report to HEFCW of a Concerns Investigation. The team formed the view during the scrutiny period that the changes looked to be appropriate and adequate to address the concerns raised in the HEFCW report and that the changes will strengthen the University's management of the responsibilities associated with taught degree awarding powers.

While the University has made and continues to make progress in taking action to address shortcomings identified, the effectiveness of the changes being implemented had yet to be tested by the end of the scrutiny period according to the agreed timelines for the HEFCW/QAA Concerns Investigation as shared with the scrutiny team. Such testing should provide further evidence to enable the University to demonstrate that it is managing successfully the additional responsibilities associated with taught degree awarding powers.

Criterion B: Academic standards and quality assurance

Criterion B1

47 This criterion states that:

An institution granted taught degree awarding powers has in place an appropriate regulatory framework to govern the award of its higher education qualifications.

48 The University has well-established regulations to govern how it awards academic credit and qualifications on its taught programmes up to and including Level 7. The regulations are supported by a framework of academic policies and procedures developed to manage the delivery of the awards including, for example, policies for student admissions, assessment, appeals and complaints. The regulatory framework is appropriate because it sets out the scope and conditions of the award of a qualification by the Academic Board, which authorises assessment boards to make conferment of marks and awards on its behalf, and the requirements for the progression, calculation and classification for each of its awards, including the transfer of credit and the operation of assessment boards. The regulations and associated academic policies and procedures are comprehensive because they set out what is needed to secure academic standards on its taught provision including: arrangements for the admission of staff and students, Welsh and English language requirements, enrolment, assessment and examination, transfer, withdrawal and suspension of students, progression and conferment of awards, publication of results, quality assurance and enhancement arrangements including validation and monitoring of programmes, and student-facing procedures including academic appeals, complaints and academic misconduct.

49 The Academic Quality Handbook (AQH) underpins the regulations and details the quality assurance mechanisms used by the University to assure the academic standards of its taught awards. This comprehensively encompasses quality assurance requirements and procedures for all aspects of programme validation, periodic review, modification and closure, continuous programme monitoring and enhancement, the recognition of prior learning and the use of external examiners. The AQH also describes how the University ensures that its academic and regulatory framework aligns with the UK Quality Code and other external reference points. For example, programmes submitted for validation are required to adhere to the relevant sections of the UK Quality Code, the FHEQ, the Credit and Qualifications Framework for Wales (CQFW), Subject Benchmark Statements and qualification Characteristics Statements, alongside Professional, Statutory and Regulatory Bodies (PSRB) requirements. The University's Modular Curriculum Framework comprises modules with prescribed credit values, normally 20 credits or an integer multiple thereof, with levels associated with the FHEQ and CQFW and overall learning hours for each level of study.

50 The University's regulations and quality assurance policies and procedures apply to all taught programmes including those delivered at its partner institutions unless exceptions are considered by Partner Validation and Delivery Approval Panels and subsequently approved by Academic Board via recommendation from the Academic Partnership Committee/VCET. Staff representatives who met the team from both the UK and overseas partner institutions confirmed that they were familiar with the University's regulatory requirements, including external qualification frameworks, and that they received training on the regulations from the Partnerships Office as described in the Partnership Handbook. Academic liaison was regarded as supportive, and staff were given opportunities to comment on proposed change to academic policies and were notified once changes had been approved.

51 Academic Board is responsible for establishing the academic regulations, policies and procedures, which govern the institution's academic activities, and for maintaining the academic standards, quality assurance and enhancement of learning and teaching opportunities and the student experience including collaborative provision. The team saw evidence that Academic Board exercises its responsibilities appropriately through consideration of evidence that enables a consistent oversight of the operational implementation of the academic framework and regulations. Meeting minutes and papers of the Academic Board provided evidence of its authority in approving revisions to the academic regulations, changes to academic policies and procedures, the academic calendar, validation of programmes, suspension of programmes, partnership proposals including language delivery and assessment in languages other than English, approval of chairs of assessment and awards boards, degree outcomes statements and PSRB oversight. Standing agenda items including matters relating to learning and teaching quality, partnership and research are supported by the minutes from meetings of the Learning and Teaching Quality Committee (LTQC), Research Committee and Academic Partnerships Committee.

52 The University's monitoring processes ensure that the regulatory framework is consistently applied across the institution from which the Quality Team draws together issues that have arisen during the year to take forward revisions for approval to Academic Board. Updates are then cascaded to all staff including those at partner institutions. An example provided by academic staff in discussion with the scrutiny team during the scrutiny period were changes made to the Wrexham Glyndŵr University Online (WGUO) taught masters regulations to address issues relating to the timing of progression boards. The revised regulations had presented subsequent challenges to the academic calendar for students progressing to dissertation within the delivery model for online taught master's awards. The issue had been resolved through further amendments to the WGUO taught master's regulations, approved by Academic Board in May 2023, for students to complete 120 credits, rather than 150 credits, prior to enrolling for the dissertation and removal of prerequisites. The University had also instigated an academic integrity action plan as a result of internal monitoring that addresses a rise in academic integrity cases during 2021-22 with a view to relaunching a new process that reflects sector practice and addresses the growing influence of artificial intelligence.

53 The University undertook a review of its regulations during the scrutiny period in response to the recommendations of QAA's report to Higher Education Funding Council for Wales (HEFCW) of a Concerns Investigation resulting in a number of minor amendments and clarifications to its general regulations to increase clarity, transparency and consistency. At its November 2023 meeting, Academic Board approved the final versions of the General Academic Regulations and regulations specific to taught awards for immediate implementation during 2023-24. A report to the November 2023 Board of Governors meeting noted the revised academic regulations. Prior to the meeting of Academic Board in November, the Quality Assurance Working Group (QAWG) and the LTQC had considered earlier versions of the regulations before presentation to Academic Board in September for detailed discussion, which included endorsement of the revisions by the Student Union Vice President.

54 Also, in response to the recommendations of the Concerns Investigation report, the Extenuating Circumstances (EC) Procedures were updated during the scrutiny period, with changes approved by Academic Board in May 2023, to clarify the role and responsibilities of the Chair of the EC Panel and the Director of the EC Panel. The team also saw evidence of amendments to arrangements for complaints and academic appeals monitoring (see Discussion in D), programme validation templates (see Discussion in B2) and procedures for risk rating new partnership proposals (see A) in response to the recommendations contained in the QAA report to HEFCW.

55 As part of the University's longer-term review of its regulatory framework, the Quality and Regulations Team embarked on a review of all of its existing policies and procedures which support the general regulations. This is due for completion in 2024.

56 The team saw evidence of the consistent implementation of the regulatory framework and associated policies and procedures. For example, standard agendas are followed to ensure operation of Assessment Boards is consistent across modules and programmes. Section 4 of the Academic Regulations: Assessment Boards 2022-23 outlines the terms of reference, composition, quoracy and determination of the standards of awards. Guidance is clear on the operation of module and progression boards in terms of proceedings, the role of Board members, recording of discussions, dealing with suspected academic misconduct, absence of external examiners and Chair's action. The team's observation of module and programme assessment boards confirmed the proceedings as set out in the University's academic regulations were followed in their decision-making, that included extenuating circumstances considered by the module board, reference to derogations relating to professional body requirements, review of individual student profiles and borderline classification cases, the application of compensation, withdrawals and resits. There was proactive involvement of a member of the Quality Team to ensure consistent operation of the boards. External examiners present at the boards confirmed proceedings had been conducted appropriately and in line with the institution's academic regulations and its assessment policies and procedures.

57 The undergraduate and taught postgraduate Admissions Policy, which was revised in 2022, is supported by the University's Contextual Policy for Admissions, its Applicant Appeals Policy and its Widening Access and Engagement Strategy, which sets out the University's intention to be accessible, fair and inclusive as part of the wider University strategy, vision and values. Minimum standards of language proficiency are set out in the English Language Policy that reflect Student Visa Immigration Requirements. The University currently follows the University of Chester policies for postgraduate research degree admissions and, since July 2023, the University has had delegated responsibility for dealing directly with online applications for research degrees, with information published on its website that encompasses admissions criteria, supervisory arrangements, proposal interviews and rejections. Undergraduate and postgraduate students who met the team were positive about the admissions arrangements and confirmed that the pre-admission information, prompt responses to enquiries, applicant support from student ambassadors and administrators, and the admissions process helped them to make an informed choice. Through its consideration of the policies and procedures that apply to admissions and its discussions with a range of students, the team was able to confirm that the admissions system is implemented consistently and in line with the University's values and policy objectives.

58 The team also saw evidence of the effective implementation of the University's programme approval policies and procedures (see discussion in Criterion B2 and Criterion B4), assessment policies and procedures (see discussion in Criterion B3) and arrangements for Student Academic Appeals and complaints (see discussion in Criterion D1).

59 The University has extensive experience of operating academic frameworks and regulations for postgraduate research degrees through its collaboration with university partners. Currently, the University uses the postgraduate research degree regulations of the University of Chester to govern how it awards postgraduate research degree qualifications. Prior to this, the University worked in partnership with the University of Wales to award postgraduate research qualifications.

60 Both the University of Wales and the University of Chester have worked collaboratively with Wrexham University to develop its independence in the governance and management of postgraduate research degrees in preparation for RDAP. The University of Wales and the University of Chester conducted periodic reviews of the institution's research degree provision in 2014 and 2018 respectively which led to action plans to take forward recommendations for improvement, but no areas of major concern were identified.

61 The University of Chester conducted a review in 2020 to address issues arising out of annual monitoring reports and governance reporting relating to supervisory capacity, student progress and support arrangements. The review also considered Wrexham University's progress in its application for RDAP. An action plan arising from the review led to the establishment of a Joint Programme Committee (JPC), which was embedded within the University of Chester's regulatory framework, to steer the partnership and review the institution's RDAP progress, providing support to Wrexham University staff as required. For example, the March 2021 JPC minutes confirmed that research supervisors have access to the postgraduate regulations on the virtual learning environment (VLE) with training provided on both the regulations and supervisory requirements which is recorded and followed up and refresher training provided. Staff from the University of Chester and Wrexham University confirmed that the JPC had facilitated a closer working relationship with greater devolved responsibility awarded to the institution to support their research capacity and supervisory capabilities.

62 In preparation for gaining RDAP, the University has developed a regulatory framework for granting its own research degrees approved by Academic Board following sustained discussion through the governance structures. The regulations are based on the University of Wales Common Academic Framework and were initially approved by the institution's Research Committee in January 2022 and Academic Board in February 2022. To support the large number of staff undertaking PhDs, following a recommendation from the Research Committee on 19 October 2023, the Academic Board also approved separate regulations for professional doctorates and PhD by published works in November 2023. The proposed academic regulations covering all intended research awards were considered by the Academic Board in September 2023, providing clarification regarding the MRes awards while noting that further discussion was required regarding the award of Honorary Degrees, with removal of Honorary Fellows, and plans to develop a Doctorate in Education (EdD). The final set of draft regulations, incorporating updates agreed in September, were subsequently approved by Academic Board in November 2023.

63 The final version of the draft research regulations comprehensively sets out the institution's proposed approach for the management and award of its research degrees covering MPhil, PhD, Professional Doctorate, PhD by Published Works, and Higher Doctorates, and details the requirements relating to all stages of a student's research degree experience, from admissions through progress reviews to examination.

Criterion B2

64 This criterion states that:

An institution granted taught degree awarding powers has clear and consistently applied mechanisms for defining and securing the academic standards of its higher education provision.

65 The University's requirements for the levels of its awards are stipulated in its General Regulations and Definitions and are embedded in its regulatory framework. The regulations state that modules offered at the University are assigned to levels in accordance with the FHEQ and in line with the CQFW and explicitly map the approved awards offered in the

University's portfolio against the CQFW levels and minimum credit requirements for each qualification, with cross-reference to FHEQ where there is variation in credit requirement for specific awards of Graduate Certificate/Diploma and the Professional Graduate Diploma in Education. The regulations also set out the level and credit requirements for classification of each award, including the criteria to be met for borderline cases to be raised to the next classification.

66 Adherence to the correct levels of the FHEQ and CQFW for each award is monitored and verified through the various stages of the University's programme approval and validation process, supported by validation templates and checklists to record compliance. Validation panels are required to make a judgement on behalf of Academic Board that the programmes are consistent with the FHEQ and CQFW level descriptors. Approved programme specifications seen by the team refer explicitly to the level of modules within the programme structure diagrams and the mapping of intended learning outcomes to knowledge, understanding, intellectual skills, subject skills and practical, professional and employability skills with the level stated explicitly within individual module specifications.

67 The team examined approved programme specifications and module specifications and noted that they reflected the FHEQ and CQFW level descriptors for higher education qualifications, making explicit reference to the learning outcomes the students are expected to demonstrate on completion of the course which were at the right level. The team was thus able to confirm that the University's current higher education qualifications are offered at the level that corresponds to the relevant level of the qualifications frameworks.

68 The AQH comprehensively sets out arrangements for programme validation, periodic review, modification and closure, programme monitoring, the use of external examiners and working with PSRBs, which are intended to ensure that the management of its higher education awards takes appropriate account of the UK Quality Code, Characteristics Statements, credit frameworks and relevant Subject Benchmark Statements (SBS) as well as PSRB requirements.

69 The University updated its validation and periodic review report templates during the scrutiny period to make explicit the requirement for the Validation Panel to be satisfied that new or revised programmes complied with internal and external reference points when reaching its conclusions as part of the approval process - see further discussion and explanation of changes below. The templates reflect the AQH requirements for validation panels to confirm that programmes are appropriately aligned to relevant PSRB requirements, Subject Benchmark Statements and to the FHEQ and CQFW levels and qualification Characteristics Statements. The University's Supporting a Holistic Approach to Programme Enhancement (SHAPE) guidance, which requires completion of the Initial Programme Proposal Form (IPPF) as part of the validation process, draws the attention of programme teams to external reference points and refers them to the AQH programme validation reference points.

70 The team's scrutiny of validation and revalidation reports confirmed that the programme documentation had been used by the panels as the basis for discussing and confirming with the programme team the appropriateness of alignment with qualification frameworks, Characteristics Statements, Subject Benchmark Statements and PSRB requirements.

71 The University's Collaboration for Reviewing and Enhancing Assessment and Teaching Excellence (CREATE) is a developmental, peer-led process aimed at programme teams who are involved in validation or require support for programme improvement. CREATE workshops facilitate the review of programme learning, teaching and assessment strategies to secure effective programme/module learning outcomes and support

programme teams preparing for validation in terms of understanding internal and external requirements, sharing best practice, challenging existing practices and thoughts as exemplified in a workshop on programme learning outcomes. Professional services staff who met the team confirmed that CREATE provided an effective forum for them to liaise with academic colleagues to discuss programme documentation prior to validation and programme changes, to ensure they were fit for purpose, met external requirements, and contained appropriate outcomes.

72 In line with the UK Quality Code, the AQH which details the arrangements for programme validation stipulates that programme teams should draw on appropriate expertise within the discipline, profession or industry to develop the submission document and that there should be an external assessor as a member of the approval panel. The external assessor is normally drawn from another higher education institution to ensure appropriate knowledge and subject expertise, and their ability to comment on academic standards and alignment with national qualification frameworks. External assessors for validation of apprenticeship programmes are required to have experience of such provision and additional external assessors with an industry/professional background may be appointed to programmes with a strong vocational focus.

73 The team's review of validation and revalidation reports, including those for partners' programmes and observation of validation events, confirmed that panels all included relevant external experts for each specialist area, from other academic institutions and, where appropriate, an industry professional.

74 The AQH takes account of the distinct regulatory requirements to allow programmes to secure PSRB accreditation, including options for either separate or conjoint validation events, via scrutiny by the Academic Programmes Sub-committee (APSC), with support of the Quality and Regulations Team. The validation process allows for scrutiny of PSRB requirements and any related documents prior to submission to the validation panel for consideration. At least one of the internal assessors appointed to the validation panel, drawn from outwith the faculty subject area, should have experience of PSRB-accredited programmes. Existing programmes requiring major modifications require consultation with the PSRB to be included within the completed form.

75 A clearly defined PSRB approval process is outlined in the AQH, with APSC responsible for scrutinising individual PSRB approvals and ensuring appropriate responses are made to any conditions/recommendations, reporting to LTQC. The team observed the June 2023 APSC meeting, which demonstrated consideration of major amendments to several existing programmes/modules to ensure they reflected their alignment to professional body requirements including the LLB programme and nursing module. Faculty Boards of Study maintain oversight of the ongoing status of their PSRB-accredited programmes and the team observed discussion at meetings on the preparation for planned accreditation visits. A University-maintained PSRB register is scrutinised by the Board of Governors.

76 The University makes use of external examiners to assure itself that programmes are designed, delivered and assessed to ensure that appropriate academic standards are maintained. The AQH Chapter 5 outlines the criteria for the nomination and appointment of external examiners to all awards, including programmes offered through collaborative arrangements, together with the processes for their appointment and induction, and reporting arrangements. The External Examiner Handbook details their responsibility for verifying that academic standards are appropriate for the award/modules which the external examiner has been appointed to examine; and to support/advise the institution to assure and maintain academic standards across higher education awards. External examiners also support and advise the institution to ensure that the assessment processes are sound,

operated fairly and in line with its policies and regulations. One of the key roles of both the Chief external examiner and external examiner is to compare performance of students at the institution with that of peers on comparable programmes at other higher education institutions. External examiners' reports include a section asking the external examiner to comment on comparability of academic standards and consistency of awards with the FHEQ, and programme teams are required to provide written responses to issues highlighted in reports.

77 External examiners are required to attend relevant assessment boards to make decisions on student progression and awards for which the board is responsible and this was confirmed through observation of assessment boards. External examiners must also submit an annual report on academic standards and student achievement, and on the soundness and fairness of processes for the assessment and determination of awards. The team's inspection of external examiner reports confirmed that the reports comment explicitly on the suitability of assessment tasks, the academic standards set on the programme and comparability of standards with other providers of equivalent level qualifications in the UK, and the standard of student performance. The reports also identify areas of good practice and contain recommendations for improvement. An annual overview of their reports is produced by the Quality and Regulation and Partnership teams, summarising their findings, for consideration by LTQC and then Academic Board.

78 Under the University of Chester regulations for research degrees currently operated by the University, one internal and one independent external examiner normally examine a candidate. The external examiner is normally an academic from another higher education institution experienced in examining research degree students. The University's draft regulations for postgraduate research degrees also contain similar arrangements, thus promoting comparability of academic standards through the involvement of external peers. Scrutiny of completed documentation demonstrated the fulfilment of required stages of administration and the examination of candidates under University of Chester regulations and confirms the involvement of external examiners.

79 Based on the evidence, the team considers that the University's mechanisms for establishing and then maintaining comparability of academic standards with other providers include explicitly seeking the advice from independent points of expertise.

80 LTQC oversees the University's arrangements for programme approval, monitoring and review, and is responsible for the monitoring of processes for internal monitoring and review and the validation processes of programmes to ensure maintenance of standards and programme enhancements. LTQC is also responsible for ensuring externality of academic quality and standards through external examiner appointments and external assessors for validation and review panels. APSC reports to LTQC, advising on the outcome of PSRB events, proposed major and minor amendments and providing an overview report on the annual monitoring exercise, including whether it has been completed satisfactorily, and action plans implemented appropriately.

81 Clear guidance on validation, monitoring and review procedures is set out in the AQH, which details systematic arrangements for programme validation, periodic review, modification and closure, and the use of external expertise. The AQH includes supporting document templates for use by staff in implementing the various process stages. Training is provided by the Quality and Regulations team for new members of staff joining validation panels, and the University publishes explicit guidelines for validation panel members including roles and responsibilities.

82 The programme approval process involves a number of well-defined stages, managed by the Quality and Regulations team, including the development of an Initial Programme

Proposal form (IPPF) for consideration by the Supporting a Holistic Approach to Programme Enhancement (SHAPE) group, approval by Faculty Boards, internal pre-validation checks and a validation event. Revalidation and periodic review take place every five years. The team's review of documentation relating to programme approval and review, including Initial Programme Proposal forms (IPPFs), validation reports, periodic review reports and accompanying papers confirmed the consistent application of the University's procedures, as described in the approved regulations and associated policies.

83 The team's observation of a validation event also confirmed the consistent application of the University's procedures, as well as the rigour of the process. For example, the revalidation of BA (Hons) Social Work: Qualified Status observed by the team in May 2023 confirmed that the panel considered the credit structure and appropriateness of the levels in terms of FHEQ, CQFW and alignment to the QAA Characteristics Statements for the revalidated programme. The team also noted the use of external expertise in the design and approval of the revised programme, noting the validation panel membership included a Social Care Wales reviewer, an external assessor from another university and a representative from 'Outside In', a focus group that contributes standalone modules to enhance the student experience. The revalidation panel scrutinised the programme specification and individual module specifications in turn, noting the academic rationale for a credit-bearing placement year and amended derogation to the regulations to meet PSRB requirements (Social Care Wales) with confirmation from the partner agency. The revalidation report confirmed that the programme aligned with the Welsh Government's requirements for social work degrees as well as the National Occupational Standards for Social Work (2011) and the Code of Professional Practice for Social Care. The alternate award title of BA (Hons) Social Welfare was reflected in the report (section 4.4) as an alternative, non-accredited route without the required placement hours. Section 4.3 confirmed the panel's verification that the programme aligned with the QAA Subject Benchmark Statement for Social Work and there was appropriate alignment with the FHEQ and CQFW level descriptors. In reviewing the staffing for the programme, the panel stipulated a condition for the programme team to produce a concise overview of its members' registered social work status, with assurance of the ratio of those with registered status in line with the Social Care Wales guidelines.

84 The University implemented changes during the RDAP scrutiny period to its pre-validation and validation processes in response to the recommendations in the report to HEFCW of a Concerns Investigation to ensure that all relevant external reference points are considered fully during the programme development and approval process. The team saw evidence of the implementation of these changes to the published procedures. For example, as part of the updates received by LTQC in June 2023, a paper outlining proposed changes was presented, and a document summarising internal and external reference points was approved as an appendix to the AQH to support programme development and approval explicitly detailing the alignment between the University and external frameworks that set national standards, expectations and guidance for taught awards. Compliance and alignment to the reference point summary was also made explicit within the programme periodic review template, the initial Programme Proposal Form (IPPF), pre-validation checklist and comments template, validation report template and partner report template. At its November 2023 meeting, the Academic Board received further amendments and revisions to the University's updated academic regulations and implementation plan in response to the QAA report to HEFCW. This included the inclusion of a new section referring to the FHEQ, an awards table, summary of study options, credit tariff information and definition of core and optional modules to provide clarity within Section 1 of the General Regulations.

85 Also arising from the QAA report to HEFCW, the University undertook a periodic review and revalidated its MRes in Applied Clinical Research and MRes in Applied Biomedical Sciences Research in June 2023 to ensure alignment with the FHEQ,

Characteristics Statements and requirements for taught postgraduate programmes. The periodic review and revalidation report read by the team demonstrates that the panel considered alignment of the programmes to the FHEQ and the validation panel confirmed that the MRes programmes aligned with the levels stipulated in the FHEQ/CQFW, the aims and structure clearly reflected taught degrees and that the delivery structure and distribution of taught and research credits aligned to the MRes taught award regulations, with the Institute of Biomedical Science reaccreditation being sought post-revalidation approval.

86 Arrangements for programme approval and periodic review of partnership provision are set out in the Academic Partnerships Handbook, which describes the validation and monitoring requirements for partnership provision, including the role of the Academic Partnerships Committee (APC) which reviews initial partnership validation proposals and determines approval for the proposal to move to the next stage. The role of the APC was evidenced in APC papers and minutes which considered the validation outcomes for the partnerships with Bloomsbury Institute in April 2022 and WCDI Shanghai University, recommending approval to the Academic Board.

87 The University reviewed and revised its procedures for the approval of academic partners to deliver programmes during the RDAP assessment period in response to the QAA report to HEFCW which recommended that in considering and approving partnerships, the University should ensure wider consideration of the partner's ability to deliver programmes of study of the required quality (see discussion in Criterion A). As a consequence, the Academic Partnerships Handbook was amended and approved to include enhanced monitoring by APC where a proposal was deemed to be high risk by the VCET who had highlighted issues to be addressed by the appropriate approval panel. APC would provide oversight and reassurance that the issues had been addressed, with appropriate mitigation in place to minimise risk as appropriate.

88 The Handbook also includes the updated partner validation report template which has a new section to assure the University of partners' institutional capacity to deliver higher education programmes and provides wider consideration in approval processes of the partner's ability to deliver at the required quality. A Red, Amber, Green (RAG) rated Partnership Risk Management template will provide a record of consideration of all risks with proposed mitigation of the risk to inform the approval processes. The Handbook has also been updated to reflect the role of newly created post of Partnerships Development and Liaison Manager in the initial stages of a new partner proposal prior to submission to VCET.

89 The evidence reviewed above demonstrates that the University has detailed arrangements in place for programme approval and review which take account of external reference points and the requirements of different levels and types of awards. The team saw the effective application of these procedures in examples of reports of validation and periodic review events which took place before the scrutiny period started and through the observation of a periodic review event in May 2023. Based on the evidence available during the scrutiny period, the team formed the view that the changes to programme validation and review procedures implemented by the University to address the recommendations in the Concerns Investigation report are credible and should enable the University to ensure the consistent application of its procedures and alignment with external reference points across all its provision and strengthen the consideration of partner arrangements for programme delivery during programme approval. However, the team was not able to assess the consistent application and impact of these amended procedures in practice by the end of the scrutiny period according to the agreed timelines for the HEFCW/QAA Concerns Investigation as shared with the RDAP scrutiny team.

90 An explicit and close relationship between academic planning and decision making on resource allocation is achieved through the institution's Supporting a Holistic Approach to

Programme Enhancement (SHAPE) process at the initial proposal development stage. This was evident in the Initial Programme Proposal forms (IPPFs) submitted to SHAPE seen by the team, which confirmed detailed consideration of resource requirements including staffing, equipment and learning space, library, and learning resources, prior to approval for progress to the next stages of development. The team's observation of Faculty Board of Studies meetings also showed detailed discussion of completed IPPFs for programmes coming forward for validation and revalidation including costings, with decisions to approve or hold back proposals going forward to the next stage.

91 Senior managers and representatives of the Board of Governors confirmed resource allocation was undertaken at the point of the year when consideration is taken of the overarching budget and planning. The Executive Team would convene meetings to consider plans for the next academic year, including decisions relating to validations, to bring resourcing plans together centrally. A meeting of all relevant stakeholders, including the Chair of the Board of Governors, would reach a conclusion on matters including academic fit, finances and resources to take a proposal forward to validation. The Strategy and Finance Committee also considers the business case for new proposals, and looks in detail at income/expenditure, ensuring there has been appropriate challenge and probing on resources. For example, the business case and costings for the new Veterinary Nursing Clinic was considered by the Strategy and Finance Committee in June 2022 to support a bid for HEFCW funding which would provide the facilities for the new degree programme.

Criterion B3

92 This criterion states that:

The education provision of an institution granted taught degree awarding powers consistently meets its stated learning objectives and achieves its intended outcomes.

93 The evidence shows that the University's strategies for learning and assessment are consistent with stated institutional academic objectives and intended learning outcomes. For example, proposals for new programmes must explain how the proposal addresses the University Vision and Strategy which articulates the institution's academic objectives to offer 'teaching that inspires', 'research that transforms', 'engagement that enables' and 'structure that sustains'. The University sets out its approach to teaching and learning, and the development of curriculum content in the Strategy for Supporting Student Learning and Achievement (SSSLA) which is aligned to the Vision and Strategy domain of 'teaching that inspires' through its commitment to 'relevant curriculum', 'great teaching' and 'innovative assessment', 'personalised support' and 'students as partners'. The University introduced in 2020 an active learning framework (ALF) that is student centred, distributed to all staff and students and is aligned to the University's Vision and Strategy and the SSSLA. Staff receive a handbook on best practice for delivering the ALF.

94 The University also has an Employability Strategy aligned to the institution's Vision and Strategy and intended to ensure that students are prepared for their potential future careers through curriculum and learning activities informed by current practice and the needs of employers. During the programme approval process, programme teams are referred to the SSSLA and the Employability Strategy and must demonstrate how the proposed approach to curriculum design, teaching, learning and assessment is consistent with the aims of the strategies. Programme teams must also demonstrate that proposed learning and assessment strategies at module level are consistent with programme objectives and enable the achievement of the stated learning outcomes. At an APSC meeting observed by the team, a mature and considered approach was taken to any proposed programme or module change to ensure they were consistent with academic objectives and programme intended

learning outcomes. This was evident, for example, in discussion of modules on the FdSc Canine Behaviour Training and Performance and FdSc Practical Wildlife Management.

95 Staff are informed of, and provided with, guidance on the University's approach to programme design, monitoring and review in a number of ways. For example, the AQH provides a detailed description of procedures and requirements for validation, periodic review, programme modification and closure. Staff receive inductions about contributing to validation panels, the roles and responsibilities of panel members, and the requirements needed, as evidenced in the validation panel guidance document and training provided by the Quality and Regulation team. The University's Collaboration for Reviewing and Enhancing Assessment and Teaching Excellence (CREATE) is a developmental, peer-led process aimed at programme teams who are involved in validation or require support for programme improvement. CREATE workshops facilitate the review of programme learning, teaching and assessment strategies to secure effective programme/module learning outcomes and support programme teams preparing for validation in terms of understanding internal and external requirements, sharing best practice, challenging existing practices and thoughts, as exemplified in a workshop on Programme Learning Outcomes. The University has developed a programme to 'Support a Holistic Approach to Programme Enhancement' (SHAPE) to guide staff through the stages of programme design and validation and provide developmental feedback on initial programme proposal documents.

96 The SHAPE meeting observed by the team evidenced that the University takes programme design and monitoring seriously and reviews any changes appropriately - also see discussion in Criterion B2 and Criterion B4. Staff who met the team spoke knowledgeably about policies and procedures for programme design and review and were positive about the benefits of the SHAPE process. Staff are also provided with training and guidance on the Continuous Programme Monitoring and Evaluation process which provides ongoing review of programmes.

97 Responsibility for amending and improving new programme proposals is clearly assigned in the AQH, which sets out the stages new programme proposals must pass through before final approval by Academic Board. The purpose of each stage is well defined and includes the development of an Initial Programme Proposal form (IPPF) submitted to Faculty Boards and SHAPE for consideration and approval, internal pre-validation checks managed by the Quality and Regulations team to confirm that procedural and documentary requirements have been met, and a validation event to ensure the programme meets the University's programme approval criteria.

98 The team saw evidence of the effective implementation of these responsibilities. For example, the team's observation of a SHAPE event to consider the IPPFs and programme submission documents for BSc (Hons) Professional Policing and MA Creative Entrepreneur demonstrated rigorous consideration of the proposals resulting in the identification of changes that needed to be made for the proposal to progress further. Similarly, evidence of validation events confirmed that panels discharged their responsibilities for programme approval effectively, including the identification of action required before final approval was given.

99 Validation reports detail all conclusions and recommendations, together with the rationale for each, supported by a summary of issues discussed by the panel and the outcomes and responses to these. The assigned validation officer follows up on all actions and conditions arising from validation and periodic review events in line with their agreed time limits. Panels are responsible for considering responses to these outcomes and for confirming that conditions have been met. The final validation reports read by the team recorded detailed responses to conditions and recommendations, indicating what changes had been made and where the changes are in the programme documentation. Additionally,

the team saw evidence of confirmation by Panel Chairs that those conditions and recommendations had been addressed satisfactorily in the summary reports of a suite of design and creative media programmes.

100 The University has several programmes with multiple pathways/routes to entry. The coherence of programmes is secured and maintained during the validation and periodic review process to ensure that the overall student experience is one that enables them to achieve their aims and objectives. For example, the validation report for the MA Creative Media Production, which has multiple routes of entry, noted that 'the Panel felt the proposed programme has good coherence and balance, allowing for significant engagement with practice-based outputs'.

101 There is evidence that close links are maintained between learning support services and processes of programme planning, approval and monitoring. The University utilises its learning support services from the earliest stages of programme planning and approval, as evidenced by the work of SHAPE and CREATE. SHAPE guidance provides clear instructions to programme teams to liaise with colleagues from IT and other learning support services in the initial stages of new programme development. Programme teams completing Initial Programme Proposal forms (IPPFs) are required to analyse and provide information regarding the staffing and resource needs of the proposed programme. Learning support services staff also provide advice to programme teams to assist in the development of their proposals. For example, learning support services provide advice on creating and then diversifying reading lists for modules at the earliest stages of programme development. Advice is given on making the programme curricula inclusive and how best to use technology. Validation and periodic review panels are required to scrutinise the availability of learning support and resources for the programme during the approval process and this was evident in the reports of validation and periodic review events seen by the team.

102 Arrangements are in place for ensuring that the learning opportunities provided to those of the institution's students that may be studying at a distance from the institution are adequate. The adequacy of learning opportunities for students at the University's partner institutions is tested during partner programme validation and periodic review events managed by the Partnership Office and monitored on an ongoing basis by academic link tutors appointed by the University for each programme. The team saw evidence of the evaluation of learning opportunities in partner institutions. For example, the validation report for programmes delivered by Bloomsbury Institute Ltd records consideration of the quality of learning opportunities as part of the panel's scrutiny. Academic link annual reports provided for the programmes delivered by MBS College of Crete from 2018-22 record evaluation of the quality of learning opportunities. Partner institutions are also required to submit an annual partner review report, compiled by senior managers at the partner, appraising its partnership with the University across all of its provision. Reports are submitted to the Partnership Office for approval and consideration by the Academic Partnerships Committee. These reports also contain evaluation of matters relating to the quality of learning opportunities as evident, for example in the Annual partnership review of MBS College of Crete.

103 Arrangements for distance learning or e-learning are also evaluated as part of the University's validation and ongoing monitoring process for all students, including those studying at the University. The validation procedures impose additional criteria for consideration during the programme design and approval process to reflect the needs of students and the maintenance of academic standards and quality.

104 All students (including those studying remotely and at partner institutions) are included in mechanisms for feeding back and reporting on the quality of their experiences. Postgraduate research students (including those studying part-time and/or remotely) receive

a handbook to support their learning and are required to submit annual progress reports. Research students are entitled to 10 formal meetings with their supervisor during the year and are invited in their progress reports to comment on the level of interaction with tutors or supervisors. Research students are also encouraged to complete the Annual Research Student Monitoring questionnaire, the results of which are considered at the Research Committee.

105 There is a range of mechanisms in place to ensure that academic standards are monitored and maintained through, for example, programme approval and reapproval processes, annual programme monitoring, and external oversight of academic standards by external examiners as outlined in the AQH and the Partnership Handbook. Validation and periodic review panels which include independent external expertise are required to evaluate the appropriateness of the academic standards being set on programmes and the suitability of the assessment practices to test learning outcomes. The reports of validation and periodic review read by the team confirm that this happens in practice. The University implemented changes to its validation and periodic review procedures during the RDAP scrutiny period to strengthen the explicit acknowledgement of the use of external reference points, including alignment with the level descriptors in the FHEQ, during the programme development and approval process - see discussion in Criterion B2.

106 The Academic Regulations set out the University's approach to assessment and how the institution maintains academic standards through assessment. This includes arrangements for consideration of extenuating circumstances and late submission of work, regulations for the conduct of assessment, and arrangement for marking, moderation and sampling of assessed work. The regulatory framework also includes clear procedures for the recognition of prior certificated and experiential learning.

107 The University engages external examiners for all programmes/modules being delivered. This also covers provision offered collaboratively at all of the University's partners. External examiners are proposed by programme leaders, through completion of a nomination form, and appointments are subject to approval by the head of faculty and the LTQC. The published criteria for appointment include requirements for qualifications appropriate to level and subject, as well as expertise and experience. There are also provisions in place to avoid reciprocal and long-standing arrangements and conflicts of interest to ensure independence.

108 The AQH and External Examiner Handbook detail external examiners' responsibility for verifying that academic standards are appropriate. To carry out their responsibilities, the handbooks state that external examiners should have access to programme outlines, coursework papers, assignment questions and exam papers, a sample of assessed work including grades, assessor feedback to students and internal verification records relating to those assessments. The role includes the moderation of assessment tasks before they are issued to students and provision of feedback on the assessment materials using a standardised template form. External examiners are also required to attend relevant progression and award boards to make decisions on student progression and degree awards for which the board is responsible and must submit an annual report to the programme leader.

109 The team's review of annual external examiner reports confirmed that the reports comment explicitly on the consistency of academic standards with the FHEQ, the comparability of standards with similar programmes in other UK institutions, and the standards achieved by students. Externals are also asked to comment on assessment practices to verify their rigour and appropriateness for testing the achievement of learning outcomes.

110 The University has mapped its assessment marking framework and criteria for assessments across each level of the FHEQ. The Module Evaluation and Moderation Record template requires confirmation from internal and external examiners that assessments are marked in line with the expressed learning outcomes of the assignment/examination and in terms of the marking criteria.

111 The team reviewed the assessment process in operation across a sample of modules at undergraduate and postgraduate levels. This confirmed that the processes for internal marking and moderating marks, and external examining are applied consistently.

112 The team saw evidence of external examiner comments and recommendations being incorporated into the Continuous Programme Monitoring reports and action plans produced by programme teams, overseen by Faculty Boards, LTQC and Academic Board - see discussion in Criterion B2. Student success data is overseen within the academic management and governance structure - see discussion in Criterion A1. In response to the recommendation in the Concerns Investigation report that the University strengthen the reporting of key data sets relating to student success to enable more effective institutional oversight, the University has developed a data reporting matrix on such issues, which identifies what data set is reported, where it is reported and how frequently it is reported. The matrix also proposes new reporting on student attainment and completion for use in annual programme monitoring, and student progression at faculty boards, LTQC, Academic Board and Quality and Academic Standards Committee - see A1.

113 The University's assessment criteria and practices are communicated clearly to students and staff via course handbooks, programme specifications, module specifications, module handbooks and assessment briefs, which contain information on assessment methods, grading criteria, the meaning of grading criteria in relation to students' achievement of learning outcomes, how grades are used in progression and awards decisions, and what happens if a student fails an assessment. Information is available through the VLE and in hard copy. Assessment practices are also clearly defined and communicated in the Academic Regulations and the AQH. Students are provided with guidance on academic integrity and misconduct.

114 The development of a shared understanding between students and staff of the basis on which academic judgements are made is also promoted through the provision of feedback on assessed work. The sample of assessed work seen by the team demonstrated that students receive feedback indicating strengths and weaknesses in relation to their achievement of the assessment criteria. Students reported that they were also able to speak to academic staff in person to gain better understanding of assessment tasks and the outcome of assessment.

115 The suitability of proposed assessment methods to test learning objectives and outcomes for all modes of delivery is checked during the programme approval process. When programmes are delivered, the University has in place checks to ensure that assessment methods are appropriate in relation to intended learning outcomes. For example, external examiners are required to approve the form and content of proposed assessments tasks before being issued to students to ensure that they fulfil the objectives of the module and reach the required standard. In their annual reports, external examiners are asked to confirm whether assessment practices were appropriate in relation to the programme/modules and their intended learning outcomes. Additionally, the Module Evaluation and Moderation Record template requires internal and external examiners to confirm that assessments are marked in line with the expressed aims and learning outcomes of the assignment/examination. The external examiner reports and examples of Module Evaluation and Moderation Records read by the team confirm that these checks take place and that external examiners are content with the suitability of assessments to fully cover all

declared learning outcomes. Samples of student work read by the team demonstrated that assessment practices, marking, grading and feedback to students are clearly linked to module learning outcomes. Based on the evidence, the team formed the view that the University's assessment practices, including the use of internal and external checks of assessment, ensure that assessment fully covers all declared learning objectives and learning outcomes.

116 The reliability and validity of the University's assessment procedures are monitored in a variety of ways, and assessment outcomes are used to inform future programme and student planning. As noted above, external examiners provide an independent view of the suitability and accuracy of assessment methods in testing programme/module learning outcomes, and on the consistency of marking and grading of student work. Both internal and external examiners contribute to the monitoring of assessment procedures through the completion of Module Evaluation and Moderation Records which evidence the first and second marking process, the reconciliation of internal marks, and record the view of the internal moderator. Module and programme teams engage in peer review of assessment tasks to ensure their fitness to measure the achievement of learning outcomes before being issued to students.

117 The effectiveness of assessment methods and procedures are also monitored through the programme Continuous Monitoring and Enhancement (CME) process which draws on external examiner comments, evidence from module evaluations, student success data, student and other stakeholder feedback, and NSS and employability data, leading to the development of annual reports and action plans. The reports and action plans at programme level are used to inform programme and student planning. For example, the team saw evidence of CME reports being considered and discussed at Faculty Board meetings. CME reports, as well as external examiner reports and stakeholder feedback, are scrutinised as part of the periodic review of programmes undertaken every five years, as evident, for example in observation and accompanying paperwork of the SHAPE meeting which considered the periodic review and validation submissions for Creative Entrepreneur and Professional Policing and the periodic review panel meeting for BA (Hons) Social Work: Qualified Status. Assessment outcomes are monitored and overseen within the committee structure at faculty boards, LTQC and Academic Board (see discussion above).

118 A clear mechanism exists for the closure of programmes (either withdrawal or suspension), including consultation with students and relevant stakeholders and arrangements for students to complete their studies or transfer to alternative provision, as appropriate. These regulations are outlined in Chapter 1 of the AQH. There is also a process in place for informing both students and applicants of proposed changes to programmes and, in anticipation of being awarded RDAP, for giving registered postgraduate students the option to either remain registered with the University of Chester or transfer to Wrexham University.

Criterion B4

119 This criterion states that:

An institution granted taught degree awarding powers takes effective action to promote strengths and respond to identified limitations.

120 The University's approach to self-criticality and enhancement is set out in the Enhancement Framework, which is explicitly aligned to the UK Quality Code, and describes how the University manages and assures continuous improvement and the enhancement of academic quality and includes the participation of students, employers, professional bodies, external advisors and University staff in quality enhancement and assurance. The framework

outlines the overall approach, driven by the University Vision and Strategy and the Strategy for Supporting Student Learning and Achievement, and implemented through the management and committee structure, and staff review and development. Also described in the framework are the mechanisms for review and improvement. The team saw evidence of the implementation of effective review activities, including the use of external examiners, external scrutiny, and regulation through PSRBs, feedback from students and employers, continuous programme monitoring, programme validation and periodic review.

121 The University has embedded a number of programme evaluation and monitoring processes within its academic governance and management structure that provide opportunities for critical self-assessment, identification of issues and reporting on the actions taken which are described in the AQH. The institution revised its annual programme monitoring and review processes, replacing the former Annual Monitoring Review with Continuous Programme Monitoring and Enhancement (CPME) from 2022-23 which is intended to enable programme teams to respond to evidence and feedback as and when issues arise so that enhancement actions are timely. The AQH describes the CPME as a key element of the institution's Enhancement Framework and the process by which the institution demonstrates that it has a self-critical and transparent approach to quality and standards within each faculty and operating within, and across, all programmes.

122 To support staff in implementing the CPME process, templates are provided for an action plan and end-of-year report. Programme teams are required to consider and analyse evidence from a wide range of sources as and when they become available. These include external examiner reports, PSRB reports, feedback from students, employers and other stakeholders, module evaluation reports, external examiner reports and responses, student statistics, validation and periodic review outcomes and any issues arising from collaborative arrangements. Confirmation is sought that the programme continues to align with the FHEQ, CQFW, Subject Benchmark Statements, UK Quality Code, apprenticeship Characteristics Statements and PSRB requirements. CPME action plans and reports are overseen within the academic management and governance framework by Faculty Boards of Study, the APSC and the LTQC, with reports to Academic Board. The CPME process is managed and monitored by the Quality and Regulations team.

123 The team reviewed examples of CPME reports and action plans for the period 2022-23 from a range of programmes. The reports were evaluative and incorporated feedback from students and staff, external examiners and utilised student performance and outcomes data in their evaluations. The action plans included RAG-rated actions required against areas such as student voice, recruitment and retention with action owners assigned, progress on action, expected completion date and areas of enhancement. Observations of Faculty Board of Studies meetings confirmed the consideration of CPME reports, identifying common themes arising from subject-level reports, areas of good practice, areas for further development at faculty level and issues for wider discussion and recommendation at institutional level. Faculty meetings also reviewed the effectiveness of the CPME process, noting the strengths and challenges of the new process during the transition year, and highlighted the need for further staff training on the process to ensure greater consistency and compliance of programme teams carrying out continuous review. Senior managers and academic staff were supportive of the new process, noting that the regular subject-level meetings which support CPME were beneficial in identifying good practice as well as areas requiring further development. They also noted that programme teams could now respond to data in real time and identify actions for enhancement in the action plan as they arise, allowing actions to be addressed and closed quickly, and early escalation of issues to institutional level if necessary.

124 In addition to in-year programme monitoring, critical self-assessment was also evident in the University's arrangements for periodic review of programmes every five years - also

see discussion in Criterion B2. The team's observation of the periodic review of the BA (Hons) Social Work: Qualified Status demonstrated a rigorous assessment of the programme, including consideration of admissions, learning outcomes, teaching, learning and assessment, student support, graduate employability, and resources. The review involved external experts from industry and another university, student representatives, and drew on external examiner, student and industry feedback, and student performance and outcome data, resulting in recommendations and conditions for approval as well as identifying areas of commendation.

125 Clear mechanisms exist for reporting student feedback at programme and institutional level - see discussion in Criterion D1.

126 As discussed elsewhere in this report - see Criterion A - the team found that the University takes active steps to review the effectiveness of its governance and committee structures, and that changes introduced in 2023 in response to the Concerns Investigation report put it in a much stronger position and better able to prevent, detect and rectify deficiencies and weaknesses in the management and governance processes. Based on the evidence, the team formed the view that there are in place effective means of reviewing critically the University's performance, and that action is taken in response to internal and external review. The University is taking appropriate steps to strengthen management and governance processes to identify limitations and deficiencies.

127 There are clear mechanisms for assigning and discharging actions identified as part of the programme monitoring processes. This is demonstrated in the new CPME process which monitors and reviews programme learning objectives and outcomes. The action plans which accompany the CPME process clearly identify actions required, action owners, expected completion dates and progress updates. The actions are defined through subject level review meetings, and their implementation and progress are monitored through Faculty Boards of Studies. At its meeting in November 2023, Academic Board received an overview of the operation of the CPME process in its first year of implementation during 2022-23, based on the Faculty Board of Studies CME reports.

128 Clear mechanisms exist for assigning and discharging action relating to the University's programme validation and periodic review processes which assess the curriculum structure, learning and teaching and assessment strategies to ensure they are designed to enable the achievement of the intended learning outcomes of the programme, and are sufficiently flexible to meet the needs of a range of students. Validation panels are required to consider the content and learning outcomes of each module and confirm the appropriateness of the assessment strategy for assessing each of the learning outcomes. Award titles must also reflect the intended learning outcome of the programme. The roles of validation/periodic review panel members are clearly described. Training is provided for new validation panel members who are provided with a Pre-Validation Comments Form that highlights areas for consideration in advance of the validation event.

129 There is evidence that validation panels had discharged their responsibilities to scrutinise agreed learning objectives and intended outcomes at both programme and module levels. For example, the PSRB validation report noted consideration of the aims and learning outcomes in the context of a proposed new programme as part of a joint validation and accreditation event with the Nursing and Midwifery Council. The revalidation panel for two degree/apprenticeship programmes highlighted duplication and strong similarity between the aims of both programmes for which a condition of reapproval was stipulated for the programme team to revisit the programme aims section to provide distinctive aims for each programme, alongside shared aims that applied to both programmes. A condition of reapproval was also stipulated for learning outcomes mapping of the project module to be

reviewed following advice from the external assessor that not all projects would be able to meet the current learning outcomes.

130 The team also observed the revalidation of the Social Work programme which confirmed consideration of the learning outcomes against PSRB requirements. In addition, the team observed the SHAPE meeting, which considered the periodic review report for the Professional Policing programme, providing evidence of the programme team's monitoring and review of learning outcomes based on external examiner reports, student feedback mechanisms, programme data, employers, and the College of Policing.

131 Responsibility for discharging and following up actions in instances where validation events resulted in recommendations and conditions for approval is clearly defined in the AQH. The team saw evidence of clear assignment of responsibility for discharging actions to ensure conditions were met - see discussion in Criterion B3.

132 The team found that the arrangements for assigning responsibility and discharging action in response to external examiners' comments at programme level are clear. Programme teams are required to provide a response to each external examiner report using a template. The examples of these responses seen by the team confirm the inclusion of planned actions in response to external comments, timeframes, and who is responsible for implementation. The external examiner report form completed by external examiners each year asks externals to confirm whether actions arising from previous reports have been addressed and the responses to this question are generally positive in the reports seen by the team.

133 Clear mechanisms are in place for assigning and discharging action in relation to the University's approach to the assessment of learning outcomes. The institution has mapped its assessment marking framework and criteria for assessments across each level of learning from 3-7 and the Module Evaluation and Moderation Record template requires confirmation that assessments are marked in line with the expressed aims and learning outcomes of the assignment/examination and in terms of the marking criteria. The team reviewed a sample of completed student work across all levels of the provision that demonstrated programme learning outcomes mapped to the institution's marking framework, with marks allocated to individual learning outcomes. A sample of completed Module Evaluation and Moderation Records noted consideration of learning outcomes, for example HLT511 Support and Empowerment reflected feedback from the external examiner that assessment methods had been applied rigorously and fairly marked against the intended learning outcomes. The completed form for Emerging Technologies in Psychology PSYON711 noted the one assignment that had previously been submitted, having flagged a high similarity score, did not meet the learning outcomes for the assignment.

134 As discussed above, and elsewhere in this report, the University draws on ideas and expertise from outside and inside the institution in its programme design, validation and periodic review arrangements. Additionally, the Supporting a Holistic Approach to Programme Enhancement (SHAPE) monthly events draw on expertise within the University to guide staff step by step over stages 1 and 2 of the validation process, providing a supportive environment for teams to share and test their ideas with colleagues before taking forward to Faculty Board and the validation event.

135 The team observed the SHAPE event held on 22 November 2023 that supported revalidation proposals for BSc (Hons) Professional Policing and MA Creative Entrepreneur. Documentation provided for the event comprised major modification forms, annual monitoring reports, CME end of year report, external examiner report and responses, annual monitoring report from the College of Policing, together with the completed periodic review template. During the event, programme teams were asked to clarify issues arising from the

documentation relating to student recruitment, proposed changes to title, finances, including programme fee, part-time delivery, and Welsh language. Based on the discussion, Professional Policing was allowed to move to the next stage in the process for faculty approval, but Creative Entrepreneurship was required to make changes in response to the discussions and bring the proposal back to SHAPE event for further consideration. Peer-led CREATE workshops also facilitate the sharing of ideas and expertise relating to programme design and support programme teams in preparing for validation.

136 The University has established a Degree Apprenticeship Stakeholder Group, a Strategy for Degree Apprenticeship Employer Collaboration and Engagement, and a Degree Apprenticeship Engagement Review process to strengthen employer engagement and support the long-term developments of its degree apprenticeship programmes. Alignment of degree apprenticeships to the requirements of the Welsh Apprenticeship Frameworks was undertaken through engagement with employers, supported by the Enterprise team and was informed by student feedback, the Stakeholder Group and annual monitoring (now CPME). Senior academic staff confirmed that the University elicits feedback from external stakeholders, such as employers and alumni, to inform its monitoring processes and enhance its provision. Examples provided included University representation on high level meetings with the Health Board and monthly meetings of the Learning from Occurrences Board which had led to new programme developments.

137 All programmes have external examiners assigned to them, who bring their expertise and experience of similar programmes at other UK institutions and make recommendations for enhancement on programme structure and standards, and teaching, learning and assessment activities. Issues raised within external examiner reports, and actions taken to address them, are recorded within CPME reports which are considered by Faculty Boards of Studies. Responses to external examiner reports are tracked by the Quality and Regulation team which produces an annual overview summary report on external examiner activity and responses for LTQC and Academic Board consideration.

138 The team saw evidence of effective mechanisms for encouraging continuous improvement. For example, within the CPME process, action planning allows programme teams to identify and resolve issues at the earliest opportunity. Enhancement actions identified from the previous academic year are reviewed monthly by the programme team, with new actions added in response to internal and external feedback as an ongoing continuous process. End-of-year CPME reports inform the faculty overview reports for consideration by Faculty Boards of Study which identify common themes, good practice, and areas of further action by the faculty or the institution. The periodic review template requires programme teams to identify any plans for enhancement based on ongoing annual monitoring and the team saw evidence of plans for enhancement based on continuous monitoring in the periodic review submission documents of the BSc (Hons) Professional Policing and the BA (Hons) Social Work. The written responses to external examiner reports show how this expertise is applied to the enhancement of each programme.

139 Good practice is identified and shared through a variety of mechanisms. For example, 'Learning Lunches' have been established to promote the sharing of best practice as part of the SSSLA. The team observed the LTQC meeting in July 2023 which noted the 2022-23 SSSLA action plan, and the achievement of the learning lunches' goal to increase awareness and share best practice, following a review of their impact. It had also noted the intention for further learning lunch sessions to be offered in 2023-24, with the need to capture more specific and measurable impact on learning and teaching. LTQC had discussed the use of surveys to capture feedback on the impact of the learning lunches, noting that staff data on attendance was better in one faculty than another and the need to encourage more academic staff attendance.

140 Staff are encouraged to reflect on, and continuously improve, the quality of their teaching through the peer review of teaching process. Academic managers and academic staff confirmed that engagement with peer review was compulsory and generally viewed it as a positive experience that provided useful feedback for developing their teaching skills.

141 Annual reports submitted to LTQC on the effectiveness of internal processes such as validation and periodic review and the operation of student procedures are effective in promoting improvement. For example, the summary report on Student Procedures cases for 2022-23, which includes analysis of student complaints, academic appeals, student conduct, academic integrity and extenuating circumstances, contains recommendations for enhancement to procedures, staff training and support for students, and includes recommendations for more granular analysis of complaint cases to better understand the underlying issues, and further work to expedite the extenuating circumstances (EC) appeals process through the EC Panel working through the Quality and Regulation team. The team's observation of the LTQC meeting which received the report also noted discussion of ways of encouraging greater involvement of students in the validation process, possibly through remuneration, through course representatives and digital certificates to support employability. Based on the evidence, the team formed the view that effective means exist for encouraging the continuous improvement of quality of provision and student achievement.

Criterion C: Scholarship and the pedagogical effectiveness of academic staff

Criterion C1

142 This criterion states that:

The staff of an institution granted powers to award taught degrees will be competent to teach, facilitate learning and undertake assessment to the level of the qualifications being awarded.

143 A People and Culture Committee is a standing committee of the Board of Governors that carries responsibility for ensuring that the culture and values, and the people-related strategies, policies and practices of the University, effectively support the delivery of the University's strategy. It receives regular reports on the development of professional, academic and research staff.

144 The People Strategy lays out the University's position and plans for attracting, developing and retaining staff with relevant professional expertise. The strategy aligns explicitly with the University's values, to be accessible, supportive, innovative and ambitious. It states the University's commitment to develop and enhance a culture of continuous improvement by providing training and development opportunities and identifying high performing talent enabling long-term development, progression, and succession planning. The strategy was accompanied by a three-year action plan. Progress with the strategy has been monitored by the People and Culture Committee and reported regularly to the Board of Governors. The People Strategy was comprehensively revised in June 2023 when it became the People and Culture Strategy. An update on progress with the first two years of the action plan that supports the People and Culture Strategy shows that most of the actions have been completed. The senior management are aware that the People and Culture Strategy says little about research (it is mentioned in the introduction and nowhere else) and must be updated to reflect the University's research ambitions. The strategy will be updated as part of a comprehensive review of the University strategy and its underpinning enabling strategies that is being brought forward to 2024. A consultation process had already started at the time of the second team visit in October 2023.

145 The objectives of the People and Culture Strategy align with the Strategy for Supporting Student Learning and Achievement, which has an action plan to support the development of teaching that is research informed, and which balances high challenge with high support for students through accessible resources, active learning and digitally enhanced delivery. The measures described include further enhancement of the internal academic staff development programme, and continuing support for teaching qualifications and professional recognition of teaching. Progress with these actions is monitored through performance indicators, including NSS satisfaction scores, academic staff development hours, peer review that highlights best practice and identifies any areas for improvement, and the proportion of academics who hold higher education teaching qualifications or professional recognition. Evidence of ongoing monitoring of the action plan was provided in the form of a paper considered by Academic Board at its July 2023 meeting reporting discussions at the Learning and Teaching Quality Committee (LTQC) in May 2023. The report on the 2022-23 session, and the final report for the strategy, was received by Academic Board in September LTQC. The report included a detailed analysis of achievements, which showed the majority of objectives had been achieved or surpassed.

146 A generic academic job description and a completed example specify the expectations the University places on its teaching staff, including engagement in research and scholarly

activity and contributing to the management of the relevant teaching programmes, as required. Staff are required to bring expertise and experience related to the relevant subject at undergraduate and postgraduate level, and to develop the curriculum. They are expected to collaborate with academic colleagues on subject and programme development, to ensure that the curriculum portfolio remains current, and the assessment procedures are relevant. They must also accept responsibility for ensuring they continue to update their knowledge and skills to be effective in their roles, and to participate in the Performance Development Review (PDR) process, engaging in the setting of objectives in order to assist in the monitoring of performance and the development of the individual.

147 Information provided by the University indicates that staff have relevant academic and professional qualifications. All staff have qualifications at Level 6 or above: 41% of staff have doctoral qualifications and 56% have qualifications at Level 7; 70% of staff have qualifications above the level at which they teach; and 120 members of staff (59%) hold professional qualifications.

148 To encourage all academic staff to hold professional recognition as a Fellow of Advance HE, the University runs an internal scheme that is accredited with Advance HE. This scheme includes workshops and other support for the application process. Just under half (46%) of academic staff are Fellows of Advance HE, comprising two Associate Fellows, 79 Fellows and nine Senior Fellows. The University reviews the number and percentages of staff who achieve Advance HE fellowship through the Strategy for Supporting Student Learning and Achievement (SSSLA) plan.

149 All staff who deliver the University's taught programmes at partner institutions must first be approved by the University. Partnership agreements include the clause 'All staff used in the delivery of the Programme will be subject to agreement and approval by Glyndŵr'.

150 NSS results of student satisfaction, as reported to Academic Board and Faculty Boards, are generally high and above benchmark for teaching, assessment and feedback. Students who met the team were positive about teaching and the competence of staff. External examiner reports confirm the rigour of assessment practice, the standards of marking and quality of feedback to students. Based on the evidence, the team concluded that staff involved in teaching or supporting student learning, and in the assessment of student work, have appropriate academic and professional expertise.

151 There is evidence that staff are actively engaged in the development of their discipline through membership of subject associations and professional bodies. Staff information provides evidence of the academic and professional expertise of staff members and their engagement in external networks relating to research, practice, creative and professional communities. The data shows that 53% of FT academic staff are actively involved in learned societies and professional bodies.

152 The University takes a strategic approach to ensuring that staff have knowledge and understanding of current research and advanced scholarship in their discipline areas to enhance their teaching, and that those involved in teaching on postgraduate research programmes are actively engaged in research and advanced scholarship - this is discussed further in RDAP Criterion 1.

153 The University operates an Academic Development Team and Associates Network that runs a number of projects relating to the development of teaching and learning, all of which are aligned with the Strategy for Supporting Student Learning and Achievement. The core team comprises the Associate Deans for Academic Affairs, Academic Development and Student Engagement, the Interim Academic Lead for Quality and Student Experience (FAST), the Digital Learning Manager, Head of Welsh Medium Academic Development, and the Deputy Vice-Chancellor. ADT Associates are academic staff members who have

volunteered to engage with the projects, and to act as role models for their colleagues. The initiative started with the Active Learning Framework and developed into a core team with associates that work on individual projects in something like task and finish groups. Each group addresses a particular area of interest to the University, such as mentoring and assessment. The groups include all levels of staff. As well as tackling areas for enhancement, the teams also support the development of staff for leadership roles. Faculty found them particularly useful for the development of junior staff and for encouraging staff to engage with the current research and advanced scholarship in their disciplines. At the time of the review, five members of the academic staff were core members of the Academic Development Team and 27 were Associates. Example projects include the TrACE (Trauma and Adverse Childhood Experiences) project, and the CREATE (Collaboration for Reviewing and Enhancing Assessment and Teaching Excellence) project.

154 The evidence reviewed here, *and in RDAP Criterion 1*, confirms that staff have the required knowledge and understanding of current research and advanced scholarship in their discipline areas to inform and enhance their teaching, and that those involved on postgraduate research programmes have active personal engagement with research and advanced scholarship.

155 There are staff development and appraisal opportunities aimed at enabling staff to develop and enhance their professional competence and scholarship. Face-to-face induction is provided to all new starters which includes an overview of the University and faculty research strategies and activities as well as the role and research responsibilities of academic staff. A video and online resources are being developed to support the induction of new members of staff.

156 The Performance Development Review Scheme (PDR) is framed in terms of the mission and values of the University. The process includes a period of self-reflection, a PDR meeting, normally with the staff member's line manager, and results in a training and development plan. The PDR process is compulsory and intended to stimulate research, develop increased research capacity and encourage academic staff to develop their knowledge and understanding of current research and advanced scholarship. This was all confirmed by academic staff. Personal research plans (PRPs) are part of the PDR cycle intended to support staff to reflect on their research achievements and plan the future direction of their research. Guidance is provided for early, mid-career and experienced researchers to assist in completing the plan.

157 Staff are allocated 170 hours for research and scholarly activity as part of the University's work-load allocation model. Additional time can be granted based on discussion and agreements in relation to research plans and outputs. Senior managers and academic staff reported that the 170 hours' workload allocation for scholarly activity provides an opportunity for keeping up to date with research and professional developments in their discipline. Academic staff were able to provide the team with many examples of their scholarly activity and how this activity directly informs their teaching.

158 As discussed in RDAP Criterion 1, there are several cross-institution forums to support staff and share research outcomes. There is a seed fund to pump prime research projects to enable applications for external grant funding. The University is a signatory to the Research Development Concordat and has developed a comprehensive Researcher Training Development Programme 2023-24 which is open to staff and students and mapped to the UK Researcher Development Framework.

159 To encourage all staff to engage in continuous learning, the University has a policy to support staff to undertake qualifications at Level 5 and above and other relevant short courses through the provision of a partial fee waiver. There is an annual staff development

programme which for 2022-23 included, for example, line manager training, equality, diversity and inclusion, a variety of short courses, lectures on a wide range of topics and Research Office training events. The annual staff conference 'Engage' includes sessions on learning and teaching as well as general wellbeing.

160 According to the Academic Peer Review of Teaching Policy, all staff involved in teaching and supporting learning should participate in a peer-review procedure in the role of reviewer and reviewee at least once every academic year. Academic managers and academic staff confirmed that engagement with peer review was compulsory and generally viewed it as a positive experience that provided useful feedback for developing their teaching skills.

161 Mechanisms are in place to ensure that staff have appropriate experience of curriculum development and assessment design. Experience of curriculum development and assessment design is monitored by the University. The template for a staff member's CVs includes experience in curriculum and assessment design. From the data supplied, over 70% of the academic staff have experience in curriculum and assessment design.

162 The University offers training in managing and organising programmes of study in the form of a 20-credit module - Effective Programme Leadership. This module is designed to support the development of programme leaders and their understanding of the role and responsibilities in organising and managing an academic programme. Up to 2021-22, 42 staff had completed the module, with another 20 staff members attending the module at the time of the scrutiny.

163 The criteria for appointment as a member or chair of an internal assessment panel for validation, revalidation, partner approval, or a programme delivery approval are detailed in the Validation Register Chairs and Internal Assessors 2022-23. For appointment as a panel member, an individual must have experience of curriculum design and development and programme delivery, or curriculum or teaching related research or consultancy. Panel chairs are required to be able to demonstrate suitable experience of external quality assurance gained through any of the following activities: appointment as a QAA institutional auditor/reviewer or subject reviewer; active Professional, Statutory and Regulatory Bodies (PSRB) experience (for example, membership of accreditation panels or national groups); external member of validation events in other higher education institutions; external examiner role at other higher education institutions.

164 Engagement with the activities of providers of higher education in other institutions is recorded on the template for staff CVs, which includes experience as an external examiner, assessor or reviewer. The supplied data shows that 71 (36%) of the academic staff have experience as an external examiner, assessor or reviewer. Of these, 40 staff members have served as external examiners.

Criterion D: The environment supporting the delivery of taught higher education programmes

Criterion D1

165 This criterion states that:

The teaching and learning infrastructure of an institution granted taught degree awarding powers, including its student support and administrative support arrangements, is effective and monitored.

166 The Strategy for Supporting Student Learning and Achievement 2020-2025 (SSSLA) and accompanying action plan is the main mechanism to develop effective learning and teaching activities because it sets out the intentions and ambitions, and an implementation plan in relation to the University's approach to teaching and learning and curriculum content. The Academic Quality Handbook (AQH) describes the processes and procedures in place at programme and institutional level to monitor and review the effectiveness of teaching and learning in relation to stated learning objectives and intended learning outcomes.

167 The SSSLA action plan, approved by Academic Board, is monitored by LTQC and is a standing item on the agenda. The team's observation of LTQC and scrutiny of meeting minutes and associated papers demonstrate active engagement by committee members with the principles outlined in the SSSLA strategy and shows that the University is monitoring its implementation and the appropriateness of measures and targets, as well as identifying areas for enhancement. The final report on the SSSLA action plan 2023-24, presented to Academic Board, notes that the University intends to produce a new teaching and learning strategy with staff workshops planned and about to start.

168 In addition to receiving the SSSLA action plan and the minutes of LTQC, Academic Board monitors the effectiveness of learning and teaching through receipt of data reports on recruitment, retention and progression, overview reports on student complaints and appeals, and external examiner overview reports. The Board of Governors also considers a range of key performance indicators through the year, including the student experience, internal analysis of the NSS results and employability (graduate outcomes data) to consider performance of the University in a national context.

169 Student Voice Forums afford an opportunity for students, including those from partner institutions, to have a bi-directional discussion regarding the quality of teaching and learning on their programmes with university staff. The University has designated Associate Deans for student engagement, and Student Voice reports are discussed at LTQC and Academic Board. The Board of Governors sees the reports of student voice matters via Student Union President reports and the annual student complaints report.

170 The effectiveness of learning and teaching in enabling students to demonstrate intended learning outcomes is monitored at programme level through the Continuous Programme Monitoring and Enhancement (CPME) process which replaced the annual programme monitoring process from 2022-23 academic year to foster ongoing review and reflections, allowing the programme teams to promptly address internal and external feedback and identify enhancement actions. The 'live' CPME action plans undergo regular review and monitoring during monthly programme team meetings. Any noteworthy faculty-wide issues or good practices are reported to the Faculty Board of Studies for discussion and sharing. The use of data on student experience and outcomes is a key part of the process. Partner programmes and students are also fully integrated into this process. All programme-level reports are examined at subject-level review meetings and overview

reports are considered by the Faculty Boards of Study, Academic Programme Sub-Committee, LTQC and Academic Board. Based on the evidence, the team concluded that the mechanisms used to monitor learning and teaching activities are robust and effective.

171 The team found that students are informed of the outcomes of assessment in a timely manner. Module leaders are responsible for monitoring the process for timely assessment feedback. Details of the criteria on which students will be marked, the feedback date and how feedback will be provided are provided in assignment briefs and student handbooks. According to the Assessment and Examination regulations, unconfirmed results should be given to students as soon as possible, and normally within three working weeks from the date of submission. If unexpected events result in that deadline not being met, students are informed of the likely date that feedback will be received. Any marks received are provisional until formally approved by an Assessment Board.

172 A sample of student assessed work from across undergraduate and taught postgraduate programmes during 2021-22 reviewed by the team clearly shows the due date and the actual date students received the feedback, confirming that timeframes were met. This sample provided evidence of timely marking and showed that the feedback on students' performance is generally constructive and developmental, although the quality of written feedback was not consistent across all programmes reviewed. In particular, the team noted some poor use of the English language in some of the feedback provided to students. Additionally, feedback did not always explicitly indicate how marks were arrived at.

173 External examiner reports comment positively on the quality of assessment and its effectiveness in enabling students to know whether learning outcomes are met and where there are opportunities for improvement. Students confirmed that there are opportunities to speak to staff as well as receiving written feedback, and that formative feedback is delivered through 'essay surgeries'. Students also commented positively on video feedback being provided on the Criminology programmes which helped them engage with the feedback. The University's internal reports on the results of the NSS in 2021 and 2022 indicate very high levels of satisfaction with the timeliness and quality of assessment feedback.

174 The University states that engaging students as partners is fundamental to its ethos, and both the Vision and Strategy and the SSSLA include working with students as a priority. The Student Engagement in Quality Assurance and Enhancement Policy and Framework, and Student Guide to Engagement in QAE outline the mechanisms for engaging students, collecting feedback, and feeding back to students. Mechanisms to engage students and collect feedback include student participation in module and programme surveys, student voice forums, programme representative systems, student representation on university committees, as well as participation in validation panels, specially formed task groups and participation in national surveys.

175 Students confirmed they are encouraged to discuss their views at programme level with their module tutors at any time. Their views may also be expressed through the student representatives or via Student Voice Forum meetings. Students also confirmed that they provide anonymous feedback on modules through online Student Evaluation of Module surveys (SEMs) in the first few weeks of the module and at the end of the module on such matters as teaching, academic support, assessment, and resources.

176 There is evidence of the University listening to and evaluating student feedback at programme and institutional level. For example, CPME annual reports and action plans demonstrate consideration of student feedback, drawing on qualitative data from Student Evaluation of Modules (SEM), Student Voice Forum (SVF), NSS outcomes (where available), and NSS associated action plans (where relevant).

177 The Student Union president is a member of the Board of Governors, and there are student representatives on Academic Board, LTQC, Academic Partnerships Committee, Research Committee, Access and Learner Engagement Group, and Faculty Boards of Studies. Committee minutes and the team's observation of meetings confirm student attendance and participation in meetings. Meeting agendas include standing items to receive reports and updates from student representatives. Annual Student Voice reports are discussed at Academic Board and at Board of Governors via the Student Union reports and the annual student complaints report. Observation of a Faculty Board of Studies meeting demonstrated responsive consideration of issues raised by students and decision-making to resolve issues.

178 The University carefully monitors and evaluates NSS results. Where satisfaction rates have fallen below expectation, programme teams develop an NSS action plan. Based on the NSS 2023 results, three subject areas were identified as falling below the benchmark: BSs Computer Science, BA Design Studies, and BA (Hons) Working with Children and Families. NSS action plans are created in collaboration with the Associate Dean: Student Experience, Associate Dean: Academic Affairs, Programme Lead and Programme Team and shared with the Dean. The Student Union is consulted on the actions included within the plan and amendments are made based on student feedback and suggestions. The action plan is monitored throughout the year at programme team meetings, faculty leadership team meetings and the Faculty Board of Studies. These action plans were presented to the Academic Board following review at LTQC in October and November 2023.

179 Strengthening the engagement with students at partner institutions has been a key priority for the Student Union in 2021-22 academic year. The SU Impact Report for 2020-21 confirms an increase in the number of elected course representatives at partner institutions and overall feedback collected. A new post of Students at Partners Officer was introduced to the Student Union. From 2021-22, both the Student Union Vice President and Student Voice Coordinator sit on the Academic Partnership Committee.

180 Feedback from employers is sought in several ways. A strategic approach to the development of new programmes requires dialogue with professional bodies, as well as local employers. Employers sit on validation panels. Formally constituted subject-based liaison groups with employer membership provide effective means of gaining feedback from employers and engaging in dialogue. There is a Strategy for Degree Apprenticeship Employer Collaboration and Engagement intended to ensure employers are engaged in the development of apprenticeship programmes, and three-way progress review meetings involving the employer, the student and University facilitate feedback and dialogue. On the basis of the evidence, the team formed the view that the University is proactive in engaging stakeholders and operates effective processes for obtaining feedback, and that feedback is evaluated and utilised in enhancement processes.

181 Students are inducted into their study programmes through Welcome Week activities which include icebreaking events, opportunities to meet programme staff, introduction to the Student Union, and specific events relating to individual programmes, as well as receiving their programme handbook and other programme information. Students also undertake an online credit-bearing induction module designed to enable them to identify the range of support services available to them, understand the expectations of study at higher education level, and identify their strengths and areas for development.

182 Students confirmed that they were happy with the induction they had received and were able to provide examples of induction sessions that were appropriate to their individual study needs. Student Union representatives explained that they actively reach out to online students during induction week via videos and contact partner institution representatives to raise awareness of the services available from the Student Union.

183 Feedback on induction is sought through Student Voice Forums (SVFs) to ensure the process is effective, with induction being a standard agenda item. Observation of Faculty Boards of Study, and scrutiny of associated papers, confirmed that induction activities are reported on and evaluated through student feedback and attendance data. Based on the evidence available the team concluded that students are effectively inducted into their study programmes, taking into account their different needs, and that induction activities are evaluated to ensure they remain effective.

184 The University takes steps to ensure that its learning environment and support materials are adequate to support a diverse student population to perform well on their programme of study. The Active Learning Framework (ALF) was implemented in 2020 in the context of learning from the COVID pandemic. The ALF Staff Handbook explains that is grounded in the University's values of being accessible, supportive, innovative and ambitious and aims to support flexible learning that makes best use of spaces on campus together with digitally enabled learning opportunities designed to be appropriately and inclusively accessed by anyone who needs to, including those with specific learning needs. These aims are also reflected in the Estates & Learning Environment Strategy, Campus 2025.

185 There are established student advisory, support and counselling services at the University. Operationally, the Directorate of Student and Campus Life is overseen by the Executive Director of Operations and is responsible for providing student support services. The 'Being Prepared for Your Studies at WGU' module undertaken during induction, and other induction activities (as noted above) introduces students to available advice and support for disabled students, health and well-being, careers and employability services, fees and funding, and accommodation.

186 The Inclusion Services provide a comprehensive range of support services to disabled students including pre-application visits, assessing students for Disabled Students Allowance, providing specialist support and individual schedules of adjustments. Individual learning plans are approved via Extenuating Circumstances (EC) panels to assure consistency and equity for those students with long-term conditions that impact their ability to study.

187 Evaluation and monitoring of these services are a key part of several strategies developed to drive forward the provision of student advisory and counselling services, and to inform planning and resourcing. These strategies include, for example, the Learner Engagement and Retention Strategy, Widening Access and Engagement Strategy, Employability Strategy, the Mental Health and Wellbeing Strategy, and the SSSLA. The strategies are monitored, and resource needs are identified through the committee structure which draws on students and staff feedback, and which oversees the implementation of relevant strategies and action plans. For example, the papers of LTQC demonstrate active monitoring of the SSSLA and the Employability Strategy, as well as, for example, regular review of the Personal Tutor Framework which has been designed to take forward some of the principles of support and guidance embedded in strategies, including, for example, student mental health and employability. Service areas conduct their own monitoring of the effectiveness of their areas which is considered within the committee structure. This was evident, for example, in the observation of the Access and Learner Engagement Committee, and scrutiny of associated papers, which showed receipt of reports from Inclusion Services and Student Support – Student and Campus Life, detailing activities and analysis of student usage, and demonstrating that the meeting engaged in active consideration of inclusion and mental health services, identifying actions designed to enhance services. The team concluded that the student advisory and counselling services are effectively monitored, and any resource needs arising are effectively considered.

188 The development needs of staff supporting the delivery of higher education are monitored and evaluated through the PDR process. Staff are supported to seek fellowship of Advance HE. The Academic Development Team and Associates Network, which undertakes several educational development projects across the University to support the Strategy for Supporting Student Learning and Achievement and the Active Learning Framework, includes staff from professional services. Support staff can apply for funding to attend conferences/events and undertake qualifications, including doctorates. Professional support staff confirmed that they had opportunities for professional development. Based on the evidence, the team concluded that staff involved with supporting the delivery of provision are given adequate opportunities for professional development.

189 The University's administrative support systems produce a range of data, and this is used in monitoring student progression and performance. This was evident, for example, in the observations of the meetings of Academic Board and scrutiny of the associated papers, which demonstrated receipt and discussion of reports on student recruitment and retention, and on attainment and completion gaps. The minutes of meetings record actions in response to data analysis. At the same meetings, the use of centrally produced data on student-related matters was also evident in receipt of reports on student complaints, appeals and cases of academic misconduct, and in the analysis of external examiner reports.

190 Observation, and scrutiny of LTQC papers demonstrated receipt of updates from the Inclusion Service which included detailed statistical analysis of student cases and contact trends used to plan support and student interventions. Observations, and scrutiny of Board of Governors' papers show regular consideration of recruitment, progression and attainment data, and observation of module and awards boards showed the provision of student outcomes data to allow decisions on progression and achievement to be made, demonstrating the University's administrative systems enable the monitoring of student progression and performance. The team saw evidence of the use of data to enhance quality in the presentation of updates on faculty retention action plans, based on the analysis of progression data at programme level, at the Access and Learner Engagement Committee.

191 The University strengthened the reporting of key datasets relating to student success to enable more effective institutional oversight during the scrutiny period. There is a matrix of dataset reporting to committees to prompt and guide the analysis and discussion undertaken at committees. New reports are also proposed on progression for LTQC, Academic Board and the Quality and Academic Standards Committee, and new reports on attainment and completion gap analysis for the CPME process. However, these had not been implemented by the end of the scrutiny period. The matrix will be reviewed at least once a year as part of the annual review of the Academic Board Handbook. The team concluded that administrative support systems are able to monitor student progression and performance and provide timely information to satisfy management information needs. A new matrix of dataset reporting, and proposed new reports, is likely to strengthen institutional oversight.

192 The team saw evidence that the University's Student Complaints Procedure and Academic Appeals procedures are accessible and used by students. Students are advised about the procedures through induction and information in students guides. The University's Student Complaints Procedure is overseen by the Director of Strategic Planning and Student Administration (SPSA). Students are encouraged to raise concerns, initially through faculty-based feedback systems, such as the student representative system. In its meetings with students and student representatives, the team heard of several examples of changes being made as a direct result of student feedback collected primarily through the 'Unitu' student voice platform. Students understood the processes for making formal complaints and during the meeting students were very complimentary about the support offered by the Student Union in this respect. For complaints resolved at the formal or review stage, the Dean of Faculty or Operational Head, as appropriate, is responsible for monitoring that any actions

arising from the complaint outcome are addressed in a full and timely manner. An action plan is developed by the Dean of Faculty and Associate Dean/Operational Head to ensure that any recommendations made are allocated to specific staff for action and deadlines for implementation set. An example of a complaint received by the University scrutinised by the team demonstrated that this was dealt with according to the published procedure.

193 The Academic Appeals Procedure allows students to appeal against the decision of an Award/Progression Board if they have 'concerns that their academic progress or status has been detrimentally impacted by the decision/outcome of that Award/Progression Board'. The team was told that emails are sent to all students around the time of assessment deadlines and examinations providing information on how to make an academic appeal, with a link to advice provided by the Student Union. Academic appeals must be submitted within 10 working days of results being published. Following submission, the student is notified if their appeal has been rejected or their claim has met the required criteria, thereby moving into the formal stage of the process. In the formal stage, the academic appeal is investigated by an Investigating Officer, appointed by the Director of Strategic Planning and Student Administration (SPSA). The outcome of the investigation is communicated to the student. Information on submitting an academic appeal is included in the University's Student Guide and students who met the team were aware of these processes. An example of an academic appeal from a student scrutinised by the team showed that this was dealt with according to the published procedure.

194 An annual student complaints and appeals report is presented at LTQC which provides several years of comparative analysis by faculty, subject area, academic level, institution, resolution stage and outcomes, and includes observations and recommendations intended to enhance procedures and quality. In response to the recommendation in the report to HEFCW of a Concerns Investigation that the University ensure that its monitoring and oversight of complaints and appeals is fully effective to enhance quality, the University has, since March 2023, introduced regular in-year reporting against the appeals and complaints procedures at LTQC meetings. The team saw evidence of this happening in their observations, and in the associated papers, of the LTQC meetings in July and October. The team concluded that the University has in place effective mechanisms for handling and responding to non-academic complaints and academic appeals.

195 Arrangements are in place to ensure that the information the University produces about its provision is accurate and complete. Information that the University's marketing department produces to promote the University and higher education provision goes through checks to ensure that the information is accurate and in line with a number of regulations including Competition and Markets Authority (CMA) guidance, Welsh Language Standards and Public Sector Bodies Website Accessibility Regulations. All content is managed and controlled by the Communications, Marketing, Recruitment and Admissions (CMRA) department. Information is regularly audited for accuracy. Course information produced by staff teams is checked by the Quality Team to ensure that the information reflects the definitive programme and module documentation generated through the programme approval and modifications procedures and maintained by the Quality Team. The team was sufficiently assured that the University systems are adequate in ensuring that the information produced concerning its higher education provision is accurate and complete.

196 The University's commitment to equality of opportunity for staff and students is embodied in its core values 'to be Accessible, Supportive, Innovative and Ambitious'. The Strategic Equality Plan (SEP) is intended to take forward the University vision and strategy to support the student and staff journey. The strategy is supported by a number of policies, strategic plans and practices that align with the SEP and detail ways in which the University attempts to achieve equality of opportunity. These include the Equality, Diversity and Inclusion (EDI) Policy for Staff and Students, the Strategy for Supporting Student Learning

and Achievement, and the Widening Access and Engagement Strategy. Achievement of the objectives of the Strategic Equality Plan are monitored by the University's EDI Action Group, who meet quarterly to discuss progress made and develop initiatives to further support the achievement of required actions set out within the SEP. Quarterly updates are also provided to the University's People & Culture Committee. The minutes of the EDI Action Group, which includes membership across the University and student representation, record a wide range of activities to support the SEP, including, for example, training for Workplace Carer Wellbeing Champions, activities to support Mental Health Awareness week, a learning lunch delivered by the Digital Learning Team to improve accessibility, consent training, meetings with the University's allocated Stonewall advisor, and activities to support work towards achieving the Race Equality Charter.

197 The team saw many other examples of activities and plans designed to achieve equality of opportunity. The University is developing its Digital Strategy to ensure that the technology helps to broaden and equalise access to learning and learning support. Through its student recruitment and admissions strategies, the University strives to widen access and to ensure it is inclusive and fair and demonstrates to all groups how they can benefit from and gain access to university facilities and resources. The Campus 2025 plan is framed around accessibility needs. The University takes a strategic approach to expand provision that is accessible through the medium of Welsh and that is inclusive to Welsh speakers and learners. The Civic Mission Partnership Strategy aims to ensure that the University is accessible within the region through engagement in a variety of community activities, including establishing a Children's University, and the Enterprise Strategy and the Employability Strategy aim to enhance the employability of graduates through reviewing the curriculum and teaching and learning to ensure that students are given work-related learning opportunities and develop appropriate skills, understandings and personal attributes to enter the workplace. Steps are being taken to ensure Black, Asian and minority ethnic students are being supported to address attainment gaps. The Race Equality Group, a sub-group of the EDI Action Group, chaired by a member of academic staff with lived experience, is working to support the Race Equality Charter through, for example, sharing Black history and celebration events during the year, reviewing and amending module reading lists.

198 Equality of opportunity in access, progression and achievement is monitored through the committee structure as evident in the documentation of Academic Board, which receives reports on completion and attainment gaps analysed by gender, ethnicity, age and disability, update reports from the Access and Learner Engagement Group and reports on Fee and Access Plan Monitoring and Compliance. Changes are being made to strengthen committee oversight of student recruitment, engagement and retention, and access and widening participation through the creation of the Widening Access Group (to replace the Access and Learner Engagement group) reporting to Academic Board, and a new Recruitment and Retention Group reporting to the senior leadership team and Academic Board. The team concluded that the University is determined and takes an insightful approach to foster equality of opportunity and inclusion for its people and its students in every aspect of the institution's activities.

Detailed scrutiny of evidence supporting the additional criteria for research degree awarding powers

Criterion 1

199 This criterion states that:

The institution's supervision of its research students, and any teaching it undertakes at doctoral level, is informed by a high level of professional knowledge of current research and advanced scholarly activity in its subjects of study.

The applicant institution will be required to demonstrate that the staff involved with the delivery of its research degree programmes have substantial relevant knowledge, understanding and experience of both current research and advanced scholarship in their discipline area and that such knowledge, understanding and experience directly inform and enhance their supervision and teaching.

200 Some of the evidence which is relevant to this Criterion is also discussed in Criterion C1.

201 In collaboration with its awarding bodies, the University has developed and effectively operated its own policies and procedures in relation to ensuring that staff have the required knowledge, understanding and experience of research and advanced scholarship to inform their supervision and teaching. The effectiveness of these arrangements is monitored by its awarding body and is evident, for example, in the reports of successful periodic review events with the University of Wales and the University of Chester and the renewal of the University of Chester programme agreement.

202 The University takes a strategic approach to ensuring that staff have knowledge and understanding of current research and advanced scholarship in their discipline areas to enhance their teaching, and that those involved in teaching on postgraduate research programmes are actively engaged in research and advanced scholarship. Knowledge and understanding of current research and advanced scholarship in their discipline area is an expectation placed on all academic staff members at the University, and staff are also expected to undertake research and advanced scholarship and to contribute to the research profile within their faculty through the identification, pursuit and completion of research activity linked to the wider faculty and University research objectives. The University made the decision in 2018 to require new academic staff who already have a doctorate or be nearing completion at the time of joining. One of the drivers for this was the desire to meet the RDAP criteria. Existing staff are encouraged and supported to undertake PhDs and Professional Doctorates. One of the priority actions of the Strategy for Supporting Student Learning and Achievement is to develop a research-informed curriculum. Staff research and scholarship are monitored through the staff appraisal and performance review process - see below.

203 This requirement for staff engagement in research and scholarly activity is reflected in the University's Research Strategy and the recently approved REF 2028 Strategy and Action Plan, which are primarily concerned with developing the research capacity and capability of staff, growing research outputs, increasing the proportion of academic staff with substantive research-related external engagement, preparing for REF submission, as well as enhancing the research culture. The University's plans are widely understood among staff. In meetings with the team, academic and non-academic staff demonstrated strong awareness and appreciation of the University's priorities for research and their roles in implementing these ambitions.

204 Both faculties of the University are expected to contribute to the University's research agenda. Each faculty has an Associate Dean responsible for leading and supporting research and developing the research culture in their faculty. Faculty research strategies and action plans with defined priorities, measures of success and annual milestones are monitored by Faculty Boards and the Research Committee.

205 Research centres and groups associated with each faculty provide a focus for research and support teaching activity. For example, updates presented to a recent Research Committee meeting from the Advanced Composite Training and Development Centre, the Centre for Water Soluble Polymers, and the Computational Mechanics, Manufacturing Simulation, Design and Optimisation Group, indicate a range of activities, including bidding for projects, undertaking research projects and commercial consultancy, and engaging in collaborative seminar events with other universities.

206 The OpTIC Technology Centre is a business and technology centre operated as part of Glyndŵr Innovations Limited in St Asaph. It aims to links research and development through industry and academia. OpTIC includes a Thin Film Coating facility that is the first of its kind in Wales. The University research groups based at OpTIC have a track record of research grant and commercial income, including EU FP7, EPSRC and TSB.

207 The evidence confirms that staff involved in supervision and teaching of research students have substantial relevant knowledge, understanding and experience of current research and scholarship in their discipline areas. The University collects data on the proportion of full-time academic staff that hold a PhD. The target is to achieve 46% by 2025. There was a steady increase since 2011, up to 43% in 2020-2021. However, the percentage had dropped to 31% by late 2023, due to an influx of staff associated with the new programmes in health, an area where professional qualifications tend to be emphasised over doctoral degrees. In response to this, the University will be encouraging appropriate members of staff to gain a PhD by publication and professional doctorates. Details from staff CVs confirms that 37% of all academic staff (45% of full-time academic staff) possess a doctoral qualification and a further 22% were studying for a doctorate by the end of the scrutiny. The distribution of doctorates is not even across the institution; 43% of the academic staff in the Faculty of Arts, Science and Technology possess a doctorate, compared to just 32% in the Faculty of Social and Life Sciences.

208 Staffing information provided by the University states that 44% of full-time academic staff and 20% of part-time staff have engaged in collaborative research with counterparts in another UK higher education institution in the three years immediately preceding the submission of an RDAP application, and that a significant proportion of full-time and part-time academic staff are engaged in research or other forms of advanced scholarship that are recognised by the wider academic community to be of national and/or international standing. This includes peer-reviewed journal articles and conference proceedings, chapters, books, and exhibitions - see below.

209 Promotion to a readership requires evidence of a distinguished contribution to the advancement of a subject discipline. There are two pathways, one based on curriculum, teaching, learning and student success, and the other in research and/or knowledge transfer, engagement, and enterprise. Personal Chairs are awarded to individual members of staff who have made an internationally significant and distinguished contribution in their field under one of the four pathways, namely: academic leadership of learning and teaching; research and innovation; enterprise, engagement, and knowledge transfer; and strategic leadership. Promotion data shows that seven out of 10 promotions to professor were awarded on the ground of research. Data from staff CVs and the Critical Self-Analysis shows that there are six Readers and eight Professors.

210 A small proportion (10%) of staff were submitted to REF 2021. The units of assessment to which staff were submitted were: UoA 11 Computing (3.5 FTE), UoA12 Engineering (8.7 FTE), UoA20 Social Work and Social Policy (6.87 FTE) and UoA32 Art and Design (3.3 FTE). Twelve members of academic staff in the Faculty of Arts, Science and Technology were submitted (equivalent to 17% of the total) and seven members (8%) of the Faculty of Social and Life Sciences. The small number of staff submitted stems from the way in which the University chose to define eligibility for REF submission. According to senior staff, eligibility for submission to the REF was determined solely on meeting the criteria to be nominated as a principal supervisor of research students, and no other markers of research activity. Using this definition, the University anticipates doubling the proportion of its staff to REF 2028. The REF 2028 Strategy and Action Plan outlines how the University aims to achieve this, through training further staff to be added to the list of those eligible for appointment as principal supervisors, alongside other measures, such as appointing research-active staff and encouraging and facilitating the development of staff to engage in research activity.

211 The document Approval of Individuals as Accredited PGR Supervisor and the University of Chester Quality and Standards Manual define the requirements for approval as a supervisor of a University of Chester research student. The requirements for Principal Supervisors are that the individual holds doctoral level qualification, or holds a master's level qualification with a demonstrable piece of independent research, and either, the individual is a subject specialist and currently research active, as demonstrated by a publication record which includes both recently published work and work in progress, or active involvement in ongoing projects, or the individual is an expert practitioner, demonstrated by 10 years or more of professional experience in a relevant field that includes holding an appropriate senior position, and being involved in ongoing research projects. The criteria for Secondary Supervisors are either that the individual is a subject specialist and currently research active, as demonstrated by a publication record which includes both recently published work and work in progress, or active involvement in ongoing projects, or, the individual is an expert practitioner, demonstrated by appropriate professional experience in a relevant field that includes holding an appropriate senior position, and being involved in ongoing research projects. Information on the number of supervisors shows that 28 individuals meet the requirements for nomination as Principal Supervisors, and 22 meet the requirements for nomination as Secondary Supervisors. Of these, 15 Principal Supervisors and 11 Secondary Supervisors are in the Faculty of Arts, Science and Technology, and 13 Principal and 11 Secondary Supervisors are in the Faculty of Social and Life Sciences. The University has approved its own criteria for the appointment of supervisors should it be successful in its RDAP application.

212 The 77 staff of the Faculty of Arts, Science and Technology reported in the staff data spreadsheet and CVs include four professors and three readers. The corresponding numbers for the Faculty of Social and Life Sciences are 121 academic staff in total, including three professors and three readers.

213 As the data above reveals, the distribution of research activity between the faculties is skewed towards the Faculty of Arts, Science and Technology, as measured, for example, by the distribution of staff eligible for submission to REF 2021, the proportion holding a doctorate, the proportion of professors and readers, or the proportions of Principal and Secondary Supervisors. The difference is largely explained because the proportion of staff with PhDs is lower in the Faculty of Social and Life Sciences compared to the Faculty of Arts, Science and Technology, reflecting a greater preponderance of professional qualifications required to support the delivery of a range of health-related programmes.

214 The University continues to work on developing, embedding and promoting a sustainable research culture and environment in a number of ways. As noted above, each

faculty has associated research centres which provide a clear focus for research and advanced scholarship. The Research Committee monitors faculty research strategies and research centre activities. The University continues to increase the number of research centres and groups, based on areas of strength. For example, the June 2023 minutes of the Research Committee reported that a new institute, the Institute of Research in Youth Work was being launched in the Faculty of Social and Life Sciences. The REF Framework 2028: Strategy and Action Plan contains actions to further develop the research culture and environment, including internal award and reward schemes for research recognition, mentoring for research-active staff below the level of professor, and funding to support and develop new areas of research.

215 The University is increasing the number of research-active staff through workforce planning; the development of its current staff; the recruitment of staff who already hold a doctorate and can demonstrate engagement with research; and by ensuring that job descriptions for academic staff refer explicitly to the requirement to undertake research and advanced scholarship.

The applicant institution will be required to demonstrate that the staff involved with the delivery of its research degree programmes have staff development and appraisal opportunities aimed at enabling them to develop and enhance their knowledge of current research and advanced scholarship.

216 Academic staff are allocated a minimum of 170 hours for Research and Scholarly activity; this figure may be increased according to the requirements of the agreed personal research plan or, for example to finish a book, or to write up the PhD. Personal Research Plans (PRPs) were introduced in October 2017 to encourage and support staff in their research. A template and exemplars were provided. The PRPs are used in the University's compulsory PDR process to encourage academic staff to develop their knowledge and understanding of current research and advanced scholarship. The papers submitted in advance of each PDR meeting include either a scholarship plan, or PRP. Academic staff reported finding the PDR process helpful in clarifying their ambitions and the support required to attain them. The objectives set in the PDR are revisited regularly throughout the year to monitor progress. The plans have generally been well received by the academic staff and around 70% of the staff now have one. Academic staff found their Faculty Deans very supportive in the provision of time off teaching and other duties for data collection, writing up, or for professional development activities. The PRPs identify the support requirements of each member of staff so that the Deans and line managers are aware of the ambitions of each. Senior academic staff reported that the PRP process helped them to manage those that reported to them.

217 At its April 2023 meeting, the Research Committee considered and approved a paper proposing changes to recruitment, induction, probation, professional development review, the PRP, and the workload allocation model, designed to embed research more explicitly in the University's human resources processes. The changes include specific consideration during the recruitment process of an individual's potential to supervise research students, enhanced inclusion of research activity in the professional development review, refinements to the personal research plan, and changes to the workload allocation model to facilitate research and scholarly activity. PRPs are now submitted to the Research Office. Following this, there have been changes to the PRP format. The Research Committee considered an update on the changes in April 2023, which reveals that most of the changes have been implemented, and that a review of the current guidance and workload allocation model for the framework for research and scholarly activity would follow.

218 A mentoring scheme for research supervisors was piloted in 2017, with the aim of building research capacity. A pilot scheme was run with a selection of staff across the

University. A review of the pilot scheme recommended a second round of mentor training in Summer 2019. At the time of the first team visit, staff were being recruited to a refreshed scheme that had been broadened to include a wider range of staff.

219 As noted above, the University maintains a number of research centres/groups which provide a focus for research and innovation and deliver seminars and training to both staff and students to encourage staff engagement in research and support the development of a research culture.

220 The University has a seed fund for staff, to pump prime research projects to enable application for external grant funding and has supported staff to engage in scholarship and research activities. Staff may also apply for funding to attend conferences.

221 The University is a signatory to the Research Development Concordat which aims to support the development of researchers in the UK and has developed a Researcher Training Development Programme 2023-24 mapped to the UK Researcher Development Framework. The programme is available for staff and postgraduate research students, with some staff-only sessions, and includes a comprehensive range of training, development and support activities for staff at different stages of their research careers.

222 There are a number of forums for supporting staff and sharing research outcomes, including coffee mornings, an Openhouse for Research, the annual Visualising Research competition, Bite-Size Learning Lunches, and invited external lecturers.

Metric tests

223 The University's analysis of staff activity for 2019, 2020 and 2021 against the metric criteria, the definitions used in the analysis, and the resulting data were provided in the Critical Self-analysis. A detailed spreadsheet analysis of the grade, experience, activities and achievements of the academic staff was also provided as a separate document to support the University's submission. The team was provided with the database containing the CV information of all staff which provided the detailed information about activities relating to the University's definitions of research and advanced scholarship used in the metric tests. The database included explanatory notes and live links to publications and other outputs where available. Scrutiny of the CV database showed that the University's own analysis against the metric measures was consistent with the team's analysis.

The applicant institution will be required to provide evidence that a significant proportion (normally around a half as a minimum) of its full-time academic staff are active and recognised contributors to subject associations, learned societies and relevant professional bodies.

224 The Critical Self-analysis (CSA) provides detailed definitions of the way in which the University interpreted the terms: professional body; learned society; and subject association. The definitions provided align with general understanding of the terms across the sector. The CSA also defines the University's understanding of 'active and recognised members' in terms of participation in activities that enable academic staff to develop their own and peers' expertise, knowledge, or practice in their academic disciplines, or enhance their subject's or the University's research environment.

225 The CSA shows that, in the year to November 2021 and in the previous two years, 53%, 59%, and 50%, respectively, of the full-time staff are active and recognised contributors to professional associations, learned societies or subject associations. The team's analysis of staff CV information supports the analysis provided by the University in the CSA and provides the CV information required to substantiate the claim. This evidence

shows that 48% of the academic staff (53% of the full-time academic staff) met the criterion. The team therefore concluded that the metric test is met.

The applicant institution will be required to provide evidence that a significant proportion (normally around a third as a minimum) of its academic staff have recent (i.e. within the past three years) personal experience of research activity in other UK or international university institutions by, for example, acting as external examiners for research degrees, serving as validation/review panel members, or contributing to collaborative research projects with other institutions.

226 The data for full-time staff at the University in 2019, 2020, and 2021 was 41%, 46%, and 44%, respectively. If all academic staff are included, the proportions fulfilling the criteria are 32.4%, 37.7%, and 36.0%. The additional CV information provided by the University confirms the 2021 figure and provides the CV information required to substantiate the claim; 36% of the academic staff (43% of the full-time academic staff) met the criterion. The team therefore concluded that the metric test is met.

The applicant institution will be required to provide evidence that a significant proportion (normally around a third as a minimum) of its academic staff who are engaged in research or other forms of advanced scholarship, can demonstrate achievements that are recognised by the wider academic community to be of national and/or international standing (e.g. as indicated by authoritative external peer reviews).

227 In its CSA, the University bases its definition of research on wording from the 2021 'Research Excellence Framework Assessment' framework and guidance on submissions, which states '...Research is defined as a process of investigation leading to new insights, effectively shared. It includes work of direct relevance to the needs of commerce, industry, and to the public and voluntary sectors; scholarship; the invention and generation of ideas, images, performances, artefacts including design, where these lead to new or substantially improved insights; and the use of existing knowledge in experimental development to produce new or substantially improved materials, devices, products and processes, including design and construction'.

228 The University also includes research related to improving professional practice in, for example, education, health, and social work, where processes of critical enquiry and self-reflection are used to improve personal and professional practice. The CSA lists the activities and outputs that were used to indicate research activity. These include:

- experience of research activity in other UK or international universities
- authorship of books and book chapters
- publication in peer-reviewed international journals or conference proceedings
- commissioned exhibitions, performances, broadcasts, photography or artworks, or web-based works
- published or performed creative writing
- published patent applications or grant of patents
- receipt of funding for research from a research council
- work involving the discovery, invention, or improvement of new systems, processes, or devices
- interaction with business, industry, the professions, and the public sector, which results in new products or procedures
- licence agreements
- editorship of journals or editorial Board membership
- refereeing specialist journals or grant proposals
- membership of grant allocation panels
- research degree supervision.

229 The definition of advanced scholarship used by the University is the critical reinterpretation, application, and transfer of existing knowledge.

230 Using these definitions of research and scholarly activity that are nationally or internationally recognised, the University's analysis in the CSA shows that the proportion of full-time academic staff that can demonstrate such activity for the three years are 60%, 66%, and 59%. The corresponding proportions for all academic staff are 50.3%, 50.6%, and 51.5%.

231 The CV information provided by the University in response to a request from the team confirms this and provides the CV information required to substantiate the claim. This shows that 52% of the academic staff (59% of the full-time academic staff), and 79% of the staff defined as engaged in research or scholarship for Metric 2 met Metric 3. The team therefore concluded that the metric test is met.

Criterion 2

232 This criterion states that:

The institution satisfies relevant national guidance relating to the award of research degrees.

The applicant institution will be required to demonstrate that it satisfies, or has the capacity to satisfy, the expectations of the Qualifications Frameworks in relation to the levels of its research degree programmes.

233 At present, the responsibility for ensuring that research degrees delivered by the University align with the FHEQ lies with its awarding body, the University of Chester. The University of Chester monitors its partnership with Wrexham University through periodic review of the partnership and Joint Programmes Committee meetings.

234 In anticipation of gaining RDAP, the University has approved its own academic regulations for the award of postgraduate research awards, and these are aligned to the FHEQ - see discussion in Criterion B1. Transition arrangements for the migration of students wishing to graduate with a research degree from the University of Chester or Wrexham University have been discussed at research meetings and regulations are in place to give registered postgraduate students the option to either remain registered with the University of Chester or transfer to Wrexham University.

235 Comparability of standards and alignment with qualifications frameworks on research programmes is monitored using suitably qualified external and internal examiners. The team's scrutiny of examples of completed PhD theses, joint internal and external examiner report forms on PhDs, including those conducted under University of Wales' regulations, and professional doctorates demonstrate the consistent application of Wrexham University's assessment process and student achievement at the appropriate level.

236 Based on the evidence, the team formed the view that the University satisfies the expectations of the Qualifications Frameworks in relation to the levels of its research degree programmes.

The applicant institution will be required to demonstrate that it satisfies, or has the capacity to satisfy, the expectations of the UK Quality Code for Higher Education.

237 As noted in Criterion A, and explored elsewhere in this report, the University undertakes regular mapping of its processes against the expectations of the UK Quality Code and associated guidance, and its regulations, policies and procedures, including those

which apply to the training of postgraduate research students, are set in that context. Additionally, the University has mapped its postgraduate research processes to the UK Quality Code, Advice and Guidance, Research Degrees.

238 Governance and academic management systems for research programmes are clearly defined - see also A1. The Research Committee plays a central role in the oversight of the University's research activities and reports to Academic Board on research degree programmes. The University Research Degrees Subcommittee reports to the Research Committee and considers student business such as admission, progression, annual monitoring, recommendations for awards, and requests for interruption. The Research Ethics Committee has delegated powers from the Research Committee to consider proposals from postgraduate students. Guidance documentation and templates for application for ethical approval were provided to the team. The University is a signatory to the UK Concordat to Support Research Integrity and produces an annual report on Research Integrity to the Board of Governors.

239 The Research Office, led by the Head of Research Services, is responsible for researcher training and ethical approval of research (both at postgraduate and undergraduate level) through the Research Ethics Subcommittee. The Researcher Development Tutor generates the training programme for research students - see below. The research student journey from admission to graduation is fully supported by the University's administrative systems.

240 The team found that the University provides clear and accessible information to research students and staff. Information about research degrees, the application and admissions process, and arrangements for research support is published on the University website. Students are provided with a handbook at enrolment, which provides key information, including arrangements for assessment, and directs them to other resources, such as the relevant regulations. Relevant regulations, forms and guidelines for Postgraduate Research provision are available on the Student Administration portal which is regularly updated. Staff and students are contacted by an officer from the Strategic Planning and Student Administration Directorate or the Graduate Development Officer, as appropriate, on matters affecting postgraduate research students, including dates of skills training programme events and changes to policies or procedures affecting them or their students' studies. The entitlements and responsibilities of research students are clearly laid out in the research degree regulations and student handbooks. The admissions process, which includes an interview by a panel comprising the relevant Faculty Dean/Associate Dean and the supervisory team, considers the candidate's subject knowledge and expertise, whether there is a suitable match between the applicant's area of research and subject expertise within the University, and whether the physical facilities and learning resources available are appropriate. Postgraduate research students reported that they found the application and admissions process to be clear and informative, they had received information about regulations and assessment, and they have regular and easy contact with their supervisors, as and when required.

241 The University provides a supportive and inclusive environment for its research students and students are afforded opportunities for professional development in several ways. As noted in C1 and RDAP Criterion 1, research centres are associated with each faculty and upon admission research students are affiliated to a research centre which reflects their specialism. The University is a signatory to the Research Development Concordat and has a researcher development programme mapped to the UK Researcher Development Framework. The programme commences with initial induction and is ongoing throughout the student's enrolment. It includes sessions on research methodologies, researcher integrity, ethical approval, through to preparing for the Viva. The evidence confirms that sessions are well attended and that student feedback on their experience is

positive. The University also recently piloted a Confident Research Programme, building on the researcher development programme to enable students to achieve a postgraduate certificate.

242 Students are encouraged to participate in a variety of fora and activities to support networking, and share their experience, knowledge, expertise and research. These include coffee mornings, an Openhouse for Research, the annual Visualising Research competition and invited external lecturers.

243 The University responds to student feedback to improve the research environment. Postgraduate students are represented on the Research Committee and minutes of the meetings demonstrate systematic consideration of feedback from student representatives and resolution of issues raised by students. Historically, the University has operated its own Postgraduate Research Student Experience Survey. In 2023, the University started to engage with the nationally operated PRES. The results presented to the Research Committee in 2023 show that the response rate was low - 10 students out of a potential 49. Nevertheless, 80% of students who responded are satisfied with their research environment and researcher development opportunities. The action plan to take forward areas for development includes raising awareness of funding for conferences, organising research 'coffee and cake' mornings for students only, and providing more training on writing for publication. Responsibility for actions is clearly allocated with measures of success and timeframes.

244 The University's Student Complaints Procedure and Academic Appeals procedures are accessible and used by research students. An example of a complaint from a research student received by the University demonstrated that this was dealt with according to the published procedure. The University has only received one academic appeal from a research student since 2019-20. The application form, the investigation report and the outcomes letter demonstrated that this was resolved in accordance with the published procedures. A summary of student complaints and academic appeals is reported to the LTQC - see D1.

245 To promote equality and inclusion, all staff are encouraged to take part in equality, diversity and inclusion (EDI) training as part of their ongoing professional development and/or induction training. There are well attended monthly sessions including key concepts relating to EDI, an understanding of the implications of the Equality Act and who is protected, an overview of the differing types of discrimination, an understanding of attitudes/stereotypes and bias, and an appreciation of the importance of using acceptable language. Postgraduate research students have full access to the University's student support infrastructure (see D1), which includes inclusion services to support disabled students.

246 The team found that supervisors are appropriately skilled and supported. For University of Chester registered students, the supervisory team is proposed via the admissions approval process and agreed by the University of Chester's link tutor for Wrexham University. The supervisory team is required to consist of at least two people. One of the supervisors on the team is identified as having the greatest proportion of responsibility and will be identified as the Principal Supervisor with duties associated with that role. The Principal Supervisor must be a contracted member of staff of the University. The documents Approval of Individuals as Accredited PGR Supervisor and the University of Chester Quality and Standards Manual clearly define the requirements for approval as a supervisor of a University of Chester research student which includes undertaking research and advanced scholarship. In anticipation of being granted RDAP, the University has developed its own regulations for the appointment of supervisors. Information provided by the University in October 2023 shows that 27 individuals meet the requirements for nomination as Principal Supervisors, and 22 meet the requirements for nomination as Secondary Supervisors. The

register of supervisors and supervisor workloads are monitored by the University Research Degrees Subcommittee reporting to the Research Committee.

247 There is an established programme of doctoral supervisor training that covers student selection, admissions, interviewing, monitoring, progression/transfer, and examination ultimately leading to the approval of an individual as an accredited PGR supervisor. This also applies to anyone who is an external (to Wrexham University) Secondary Supervisor. The University also arranges supervisor update training sessions, if regulations change or for other specific reasons, such as, for example, a recent change whereby the University of Chester will now allow the University to chair vivas, where previously all viva chairs were from the University of Chester.

248 There are well-defined regulations and mechanisms for monitoring and supporting students' progress as set out in the University of Chester's Quality and Standards Manual. This stipulates the requirement for each student to engage in an annual monitoring process, the requirement for an MPhil-to-PhD transfer viva, and a requirement to attend regular supervisory meetings.

249 Supervisors are required to meet their students regularly and to formally record the meeting. For the degrees of Master of Philosophy (MPhil) and Doctor of Philosophy (PhD), students must meet their supervisor at least 12 times per annum (once per month) for full-time students and at least six times per annum (every two months) for part-time students. Transfer from probationary PhD to confirmed PhD occurs between months 12 and 18 (months 18-24 for part-time students) following discussion with the supervisory team and successful completion of a research-led viva and completion of sufficient forms demonstrating engagement with their studies, as evidenced by examples of supervisory reports.

250 In addition to regular meetings with supervisors, University of Chester registered students are required to complete an Annual Progress Report (APR) on the anniversary of their enrolment where they will be asked to reflect on their progress since the last review and highlight any milestones met or issues encountered. The Principal Supervisor also completes a section on the form, and both reports are reviewed by an Independent Assessor. Scrutiny of progress reports is undertaken by the University Research Degrees Subcommittee.

251 Based on the evidence reviewed above, and elsewhere in this report, the team formed the view that the University satisfies the expectations of the UK Quality Code and the associated advice and guidance for postgraduate research degrees.

The applicant institution will be required to demonstrate that it satisfies, or has the capacity to satisfy, the expectations of research degree management frameworks issued by relevant research councils, funding bodies and professional/statutory bodies.

252 The University does not currently have research council-funded studentships and is therefore not required to implement any research degree management frameworks. In anticipation of increasing student numbers and the number of research grants, the University has mapped its processes against the UKRI Training Grant Guidance and the UKRI Statement of Expectations for Doctoral Training. The team's scrutiny of the mapping and the available evidence indicates that the University has relevant policies and procedures in place and the capacity to satisfy the expectations and guidance.

Criterion 3

253 This criterion states that:

The applicant institution has achieved more than 30 doctoral degree conferments, awarded through partner universities in the UK.

254 The University has achieved 258 doctoral degree conferments, awarded through partner universities in the UK.

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