



QAA

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Institutional audit

Canterbury Christ Church University

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Preface

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

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

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

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

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

Institutional audit results in judgements about the institutions being reviewed. Judgements are made about:

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

Audit teams also comment specifically on:

- the institution's arrangements for maintaining appropriate academic standards and the quality of provision of postgraduate research programmes
- the institution's approach to developing and implementing institutional strategies for enhancing the quality of its educational provision, both taught and by research
- the reliance that can reasonably be placed on the accuracy and completeness of the information that the institution publishes about the quality of its educational provision and the standards of its awards.

If the audit includes the institution's collaborative provision the judgements and comments also apply unless the audit team considers that any of its judgements or comments in respect of the collaborative provision differ from those in respect of the institution's 'home' provision. Any such differences will be reflected in the form of words used to express a judgement or comment on the reliance that can reasonably be placed on the accuracy, integrity, completeness and frankness of the information that the institution publishes, and about the quality of its programmes and the standards of its awards.

Explanatory note on the format for the report and the annex

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

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

The report is as concise as is consistent with providing enough detail for it to make sense to an external audience as a stand-alone document. The summary, the report and the annex are published on QAA's website.

Summary

Introduction

A team of auditors from the Quality Assurance Agency for Higher Education (QAA) visited Canterbury Christ Church University (the University) from 15 to 19 March 2010 to carry out an Institutional audit. The purpose of the audit was to provide public information on the quality of the learning opportunities available to students and on the academic standards of the awards that the University offers, including those research awards offered on behalf of the University of Kent. On this occasion the team carried out a hybrid audit. The hybrid process is used where QAA considers that it is not practicable to consider an institution's collaborative provision as part of standard Institutional audit, or that a separate audit activity focusing solely on this provision is not necessary.

To arrive at its conclusions, the audit team spoke to members of staff throughout the University and to current students, and read a wide range of documents about the ways in which the University manages the academic aspects of its provision. As part of the process, the team visited two of the University's partner institutions in the UK where it met with staff and students, and conducted by videoconference equivalent meetings with staff and students from one overseas partner.

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

Outcomes of the Institutional audit

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

- confidence can reasonably be placed in the soundness of the institution's present and likely future management of the academic standards of the awards it offers, including research awards offered on behalf of the University of Kent
- confidence can reasonably be placed in the soundness of the institution's present and likely future management of the quality of the learning opportunities available to students.

Institutional approach to quality enhancement

The audit team found evidence that the University is taking deliberate steps to promote quality enhancement but the process of systematic enhancement at institutional level is in its early stages. Some strategic initiatives have been introduced but their outcomes are not yet fully embedded within the University systems and procedures, and its policies and intentions for enhancement have not yet been communicated consistently among collaborative partner institutions.

Postgraduate research students

Overall, the audit team found that the University's processes and procedures for postgraduate research programmes make an effective contribution to its management of the quality and standards of those programmes and meet the expectations of the precepts of the *Code of practice for the assurance of academic quality and standards in higher education (Code of practice)*, Section 1: *Postgraduate research programmes*.

Published information

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

Features of good practice

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

- the use of the virtual learning environment in supporting students and staff, and its potential for promoting comparable learning experiences across the University's collaborative partnerships.

Recommendations for action

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

The team advises the University to:

- ensure that Academic Board, through its appropriate institutional-level committees, makes full use of the annual and periodic review processes to provide greater transparency and consistency in its oversight of academic standards and the quality of learning opportunities in both its taught and research degree programmes
- review the external examiner template, and the information given to external examiners, to ensure clear reporting about the standards of all awards and programmes, wherever delivered
- ensure that considerations of, and responses to, external examiners' reports are consistently clear, timely, transparent and well documented
- ensure that all award certificates and transcripts reflect fully the precepts of the *Code of practice, Section 2: Collaborative provision and flexible and distributed learning (including e-learning)*
- ensure that each partner institution understands and implements all relevant University regulations and procedures.

It would be desirable for the University to:

- consider the minimum level of structured support required for postgraduate research students in preparation for teaching and assessment
- keep under review the opportunities for faculties to consider the outcomes of service department annual and periodic reviews and their potential to enhance the quality of the student experience.

Reference points

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

- the *Code of practice*
- the frameworks for higher education qualifications in England, Wales and Northern Ireland, and in Scotland

- subject benchmark statements
- programme specifications.

The audit found that the University took due account of the elements of the Academic Infrastructure in its management of academic standards and the quality of learning opportunities available to students, but it should reflect further on *Sections 2, 4 and 7* of the *Code of practice*.

Report

1 An Institutional audit of Canterbury Christ Church University (the University or CCCU) was undertaken during the week commencing 15 March 2010. The purpose of the audit was to provide public information on the University's management of the academic standards of the awards that it delivers, including research awards delivered on behalf of the University of Kent, and of the quality of the learning opportunities available to students.

2 The audit team comprised Professor Paul Brunt, Mr Tim Maxfield, Professor Trevor Nicholls, Professor Clare Pickles, Miss Sarah Riches and Ms Laura Sadler, auditors, and Mrs Sally Walker, audit secretary. The audit was coordinated for QAA by Mr Alan Hunt, Assistant Director, Reviews Group.

Section 1: Introduction and background

3 Canterbury Christ Church University was founded in 1962 as the College of Christ Church, Canterbury. Taught degree awarding powers were granted in 1995, university title in 2005, and research degree awarding powers in 2009. Previously, research degrees were awarded through the University of Kent. As a Church of England foundation the University is a member of the Council of Church Colleges and Universities (England and Wales) and of the worldwide Colleges and Universities of the Anglican Communion group.

4 The University describes itself as 'a learning and teaching-led institution'. Its academic work is located in 25 academic departments, grouped in five faculties: Arts and Humanities; Business and Management; Education; Health and Social Care; and Social and Applied Science. CCCU is one of the UK's largest providers of Initial Teacher Education and education for health professionals, and the Faculties of Education and Health and Social Care account for 62 per cent of its student full-time equivalent numbers.

5 CCCU operates on four campuses: the Canterbury Campus; Salomons Campus, near Tunbridge Wells; Broadstairs Campus; and the Campus at Medway which is shared with the Universities of Greenwich and Kent, and Mid-Kent College. Programmes are also offered at the University Centre Folkestone which is shared with the University of Greenwich. The University also delivers 55 programmes in collaboration with 38 partner institutions in the UK and overseas.

6 In 2008-09 the University had 9,128 full-time students (7,663 undergraduate, 1,415 taught postgraduate and 50 postgraduate research students). There were 7,627 part-time students (4,955 undergraduate, 2,570 taught postgraduate and 102 postgraduate research students). International students number 316 undergraduates, 139 taught postgraduates and 22 postgraduate research students, making a total of 477. Mature students make up 60 per cent of the total. At the time of the audit 3,050 of the University's students were studying in its partner institutions.

7 The University's Strategic Plan 2006-2010 includes the following mission statement: 'Inspired by the University's Church of England Foundation and the aspirations of its students and staff, our mission is to pursue excellence in academic and professional higher education, thereby enriching both individuals and society'. CCCU is committed to an increasing level of internationalisation, and takes a strategic approach to international recruitment. It is actively seeking to establish new progression and partnership agreements overseas and is developing existing links with consortia of community colleges in the USA. All this accords with the Institution's Christian ethos and values and tradition of outreach activity.

8 The Vice-Chancellor leads the Senior Management Team which provides the strategic leadership and management of the University. Senior Management Team members have university-wide responsibilities which may include oversight of one or more of the University's campuses; they manage support departments and senior staff; two of the pro vice-chancellors are also deans of faculties, while three pro vice-chancellors manage other deans of faculties. There are 20 support departments, the heads of which normally report to a member of the Senior Management Team.

9 The previous Institutional audit in March 2004 found that broad confidence could be placed in the University's current and likely future management of the quality of its academic programmes and the academic standards of its awards. The report identified as features of good practice the comprehensive range of student support initiatives contributing to the quality of students' learning experience; the maintenance, during a period of considerable institutional expansion, of a strong collegiate environment across the campuses and partner colleges; and the innovative approach to the first-year curriculum which was intended to improve the confidence and retention of students. The University has extended this good practice, particularly through the launch of its Student First policy in 2009 (paragraphs 32, 52, 53). It has also taken steps to build on the strengths of the collegiate environment across campuses and partner colleges by introducing the annual staff conference, the Collaborative Provision Sub-Committee, and higher education forums, which are meetings between staff of the University and partner institutions.

10 The report made a series of recommendations for action. The University was advised to monitor the effectiveness of its strategic planning of resources and has responded by creating a Resources Directorate, a Planning Office and a revised planning process. The University was also advised to ensure that postgraduate research students receive preparatory training before taking up teaching responsibilities. It stated in the Briefing Paper that this had been implemented, but the audit team found that the response was only partially effective, and recommend that this matter should be reconsidered (paragraph 81).

11 The 2005 audit report also made three 'desirable' recommendations. First, it recommended that the institution complete the proposed review of internal committee and working group structures and their interrelationships, while retaining the benefits derived from the delegation of quality processes to faculties. The University responded by reviewing the committee structure of the Academic Board and by reorganising the Quality and Standards Office.

12 The report also recommended that the University review its nomination process for external assessors on validation and review panels. It has revised the form for nominating external assessors and has set out appointment criteria in the Quality Manual. Finally, the report recommended the clarification of criteria for small-scale validations, and this was addressed through the institution's review of its quality assurance procedures in 2007-08 (paragraph 20).

13 The present audit team concluded that the University had seriously considered all these recommendations and addressed all but one of them fully and effectively. It should reconsider the matter of training for postgraduate research students in preparation for teaching responsibilities.

Section 2: Institutional management of academic standards

14 The University's Academic Board is chaired by the Vice-Chancellor, and is responsible for academic standards and quality in all the University's awards and programmes of study. The Board is advised and supported by its committees; those most directly responsible for academic standards and quality are the Quality and Standards Committee, Academic Planning Committee, Learning and Teaching Committee, and Research Committee. Each of these is chaired by a pro vice-chancellor.

15 Faculties have delegated responsibility for some aspects of the management of quality and standards through their faculty quality committees. The Quality and Standards Committee receives annual reports from faculty quality committees on their management of delegated powers, and annual monitoring of programmes and departments. Through its Assessment Sub-Committee, the Quality and Standards Committee also receives faculties' reports on the external examining process. Reports from faculties to the Quality and Standards Committee varied in their levels of detail, and the audit team recommends that the University review this reporting process so that institutional committees can consistently monitor the delegation of responsibility for quality and standards to faculties.

16 The Pro Vice-Chancellor (Learning and Quality) plays a key role in the management of quality and standards; he chairs the Quality and Standards Committee and the Learning and Teaching Committee, and is responsible for the Quality and Standards Office and the Learning and Teaching Enhancement Unit. At faculty level responsibility for quality matters rests with faculty quality officers who report to the deans of their faculties.

17 Regulations for awards are set out in 'academic frameworks' for undergraduate, postgraduate and research degrees. Different types of provision within a framework are defined by 'schemes' which are governed by 'protocols' and 'conventions'.

18 The University's arrangements for programme approval, monitoring and review were reviewed in 2007-08 and a revised quality assurance framework was implemented from 2008-09 onwards. Details of the new framework, which covers academic and support departments, are set out in the Quality Manual. New programmes are formulated and approved in three phases: planning, development and validation. The planning phase is overseen by the Pro Vice-Chancellor (Academic) and managed by the University Planning Office. Planning forms are scrutinised in detail by faculty quality committees, and the Programme Proposal Sub-committee, with formal approval required from the Academic Planning Committee to proceed to validation. During the development phase programme teams engage with relevant professional, statutory and regulatory bodies and seek the views of external academics. From January 2009 the validation phase has changed from a two-stage process to a single University event.

19 Validation documents comprise a programme specification; a programme template; module descriptors; and appendices which map module intended learning outcomes to programme intended learning outcomes. Outcomes of validation events are reported to the Quality and Standards Committee and Academic Board; neither receives a copy of the full validation report, although the Quality and Standards Committee receives a summary of any conditions or recommendations. This Committee also monitors the validation process by means of an annual report prepared by the Director of Quality and Standards.

20 Under the previous quality framework programmes were validated for five years, at the end of which they were reviewed and revalidated. The University intends that, in future, programmes will be reapproved as part of the Periodic Departmental Review process except in defined circumstances (paragraph 23). The University has also revised its procedures for approving modifications to programmes since the last audit. The Quality Manual sets out the criteria for determining whether the proposed change is a major modification, in which case a validation event must take place, or a minor modification which can be dealt with by the faculty.

21 The former annual programme review process was known as Programme Quality Monitoring and Enhancement Review (PQMER). The audit team saw examples of PQMER reports and found that the process operated effectively at programme level, but the quality of PQMER scrutiny by faculties, and of their reporting to institutional committees, varied. There was a tendency to report on process rather than issues relating to quality and standards. The Quality and Standards Committee's consideration of faculty reports, as evidenced by the relevant minutes, lacked detail and did not appear to provide the Academic Board with a strong basis for assurance that issues relating to quality and standards at a programme level were being addressed. With effect from 2009-10 the University has introduced a new system of Annual Departmental Review which incorporates annual programme review. A full cycle of Annual Departmental Review had not yet been completed at the time of the audit, so its effectiveness could not be evaluated.

22 Under the new quality assurance framework all departments, academic and support, will undergo Periodic Departmental Review, previously known as Internal Review, once every six years. In November 2009 the University carried out a pilot of the new Periodic Departmental Review process, but the audit team was not given access to the report which was still in draft form at the time of the audit, and thus could not comment on its effectiveness. However, the team was

able to scrutinise Internal Review reports, and concluded that the process was thorough and informed by external perspectives, and provided assurance to the Vice-Chancellor and the Senior Management Team about the strategic direction and health of the relevant department.

23 Neither the full Internal Review report nor the summary is considered by the Academic Board or its Quality and Standards Committee, although reports and recommendations are made to the Senior Management Team. The audit team heard that the University has no plans to change this practice for the new Periodic Departmental Review process (paragraph 20), although programme revalidations through this new process will be reported to the Quality and Standards Committee and Academic Board. However, it was not clear how these bodies would be able to evaluate the effectiveness of action planning as responses to reviews, or consider the effectiveness of the Periodic Departmental Review process as a whole, without seeing the reports of reviews. The team recommends that the University consider ways in which all outcomes of the new Periodic Departmental Review process are reported, so that the Academic Board, through its Quality and Standards Committee, has the clearest possible oversight of quality and standards through a process which takes full account of the *Code of practice, Section 7: Programme design, approval, monitoring and review*.

24 The audit team concluded that the University has made systematic and generally effective use of *The framework for higher education qualifications in England, Wales and Northern Ireland*, and subject benchmarks, and, where appropriate, the requirements of professional, statutory and regulatory bodies, in setting and maintaining academic standards. It has responded positively to the Bologna process: for example, it issues the European Diploma Supplement on request and plans to do so for all graduates in 2010-11.

25 The University's external examining system is defined in a comprehensive External Examiners' Handbook which is regularly updated and has been mapped against the *Code of practice, Section 4: External examining*. External examiners are required to report on the standards of awards in relation to 'national qualification frameworks, subject benchmarks, and other relevant information'; however, neither the Handbook nor the University's external examiner report template specifies which 'national qualification frameworks' and the 'other relevant information' are concerned, and the report template relies on a series of broad questions to prompt this information. The audit team saw a sample of external examiners' reports which were of very variable quality. Some gave perfunctory single-sentence comments in response to the range of general questions posed on the template. Some did not state the range of assessments, nor the sizes of samples scrutinised. Reports on groups of awards, or on programmes delivered in multiple centres, did not always confirm standards achieved in different awards or centres. The team was informed that external examiners saw samples of scripts from all centres of delivery, but centres were not identified. However, this sampling process was not clearly explained in the External Examiner Handbook, and not all external examiners had been provided with complete profiles of all students' marks and grades to enable them to judge how their sample of scripts related to the whole set. The team recommends that the University review with some urgency the external examiner template, and the information given to external examiners, to ensure clear reporting about the standards of all awards and programmes, wherever delivered.

26 External examiners' reports are received by the Vice-Chancellor and the deans of the relevant faculties. They are also scrutinised by the Pro Vice-Chancellor (Learning and Quality) and the Director of Quality and Standards who identify any issues that need immediate attention. Heads of departments are required to ensure that reports are made available to all members of academic staff teaching on the programme, and to student representatives. They are also required to make sure that responses are sent to external examiners about their reports, and that appropriate action is taken in response to all issues raised by them. At the time of the audit programme directors received external examiners' reports; however, department heads did not yet have direct access to these reports, but relied on programme directors to pass them on. The team was informed that, from April 2010, the University planned to give all staff and

students 'full access' to external examiners' reports on a website. The team welcomed this development because it would enable heads of department to fulfil their responsibilities more readily and consistently. The team found that responses sent to external examiners were made mainly by programme directors and varied greatly in quality. It advises the University to ensure that considerations of, and responses to, external examiners' reports are consistently clear, timely, transparent and well documented.

27 The audit team found evidence of effective programme-level consideration of the external examiner's report and of detailed action plans in response. External examiners' reports were included, with discussion and actions plans, in Programme Quality Monitoring and Enhancement Reviews, and these were discussed at faculty level through programme review panels. After this, summary reports were sent to faculty quality committees and subsequently to the Quality and Standards Committee and its Assessment Sub-Committee. The Assessment Sub-Committee is required to consider external examiners' reports, but it was not clear to the team how it could do this consistently because some of the reports which reached it were lacking in detail. The University should give early attention to this issue and ensure that Academic Board, through its committees, makes full use of the external examiner reporting process in its oversight of academic standards in its taught programmes.

28 Assessment of students is governed by the Assessment Policy, the undergraduate and postgraduate frameworks, the General Modular Scheme, the Assessment Handbook and a series of Policy and Procedures for Examinations documents. Departments are required to ensure that all assessments are carried out in accordance with these regulatory documents. Requirements for the composition and conduct of boards of examiners, along with progression and classification rules, are clearly specified in the Policy and Procedures for Examinations. Assessment concessions are clearly regulated and reported to boards of examiners. Regulations on plagiarism are clearly set out. Students confirmed to the audit team that they understood the University's regulations and requirements for assessment and also, in most cases, the marking criteria used.

29 Assessment policies and regulations are reviewed by the Assessment Sub-Committee. Academic staff who assess students may be given full or associate examiner status after appropriate training which is delivered through the Learning and Teaching Enhancement Unit. Only staff with full examiner status can attend boards of examiners. In partner institutions, staff cannot assess on programmes leading to CCCU awards unless they are at least associate examiners, and University staff train them for this.

30 Programme teams use statistical data on student admissions, progression, completion and achievement in their annual Programme Quality Monitoring and Enhancement Reviews. Statistics are supplied centrally, and the audit team noted occasional concerns about late provision. However, the team found evidence that data sets were thoroughly evaluated. General trends are reported through to the Quality and Standards Committee via the faculty quality officers' annual reports. Statistical reports on student admissions are considered by the Senior Management Team and the Governing Body, and the Widening Participation and Student Retention Subcommittee monitors data on admissions and progression.

31 The audit team concludes that confidence can reasonably be placed in the soundness of the institution's present and likely future management of the academic standards of its awards.

Section 3: Institutional management of learning opportunities

32 The University places a very high priority on its students and the quality of the learning experience which it provides for them, and has invested significantly in this area. Its Student First policy, launched in 2009, has led to a number of key changes, the most striking of which are the opening of a new library and learning support centre in Augustine House (paragraphs 45, 53) and the creation of the i-zone, which is a 'one-stop' point of access for student support and advice services. These developments were still new at the time of the audit, but students

expressed appreciation of them while drawing attention to some problems which the University was addressing.

33 The Pro Vice-Chancellor (Learning and Quality) is responsible for the management of students' learning opportunities, with the support of the Director of Learning and Teaching and the Learning and Teaching Enhancement Unit, which leads the development of educational approaches and methods. The Director of Quality and Standards manages the quality assurance system in which the University seeks increasingly to emphasise enhancement.

34 The University's quality assurance framework for the development, approval, monitoring and periodic review of all programmes and academic and support departments is discussed in Section 2 (paragraphs 18 to 23). A revised framework was being phased in at the time of the audit, but records of previous processes were available to the audit team which found that approval and periodic review worked effectively in assuring the quality of programmes and learning opportunities.

35 Under the new quality framework support departments will undertake support department annual reviews. In these reviews they are required to reflect on their role in enhancing the student experience, and to comment on issues emerging from the National Student Survey (NSS) which are relevant to their service. Support department annual reviews will form an important part of the evidence base for support departments' periodic departmental reviews. Currently, periodic review reports on support departments are confidential to the Senior Management Team and are not considered by any of the University's committees, although a summary of the report is provided on the Quality and Standards Office website. The audit team recommends that the University keep under review the opportunities for faculties to consider the outcomes of service departments' annual and periodic reviews and their potential to enhance the quality of the student experience.

36 The University uses a range of external reference points in the development, delivery and review of its academic provision, notably the Academic Infrastructure and its engagements with professional, statutory and regulatory bodies. It has reflected on, and in some cases mapped, its policies, procedures and practices against the *Code of practice* published by QAA. The audit team found that the University's use of the *Code of practice* was systematic and generally effective, but occasionally the institution's practices do not yet fully reflect *Sections 2 and 7* (paragraphs 23, 67, 68).

37 The University gathers feedback from students in a number of ways including internal surveys and the NSS. Module evaluations are used in all programmes, but in varying ways. Results of these surveys and actions taken in response are reported back to students, but this practice also varies between departments. A student satisfaction survey has not been carried out since 2004-05 because, as the institution explained, it has focused mainly on the NSS. However, a new institution-wide survey was piloted in 2009-10 and will be rolled out in April 2011. The University took account of the NSS in designing this new survey.

38 NSS results are used to inform management decisions and developments at institutional and departmental levels. Each department produces action plans based on NSS data, and the University intends that these plans will be firmly embedded in the new quality assurance framework. However, since NSS results do not cover all collaborative provision, the University should consider the application of its own survey to its partnerships.

39 Students are widely involved in the University's quality management systems. Christ Church Students' Union (CCSU) is represented on all major institutional committees and working groups, and representatives have influenced changes of policy in areas such as assessment turnaround times. A Student Forum is held by the University and CCSU, but attendance is poor and students were unaware of it (paragraph 52). During the audit the University and CCSU differed in their understandings of the expected attendance and organisation of this Forum.

40 Student representatives also take part in student-staff liaison meetings. The University has worked with CCSU to improve the working of these meetings by providing clear minimum standards. The audit team found that student-staff liaison meetings operate in all departments and campuses, and in collaborative partnerships. Students met by the team were all aware of their representatives and clear about their roles. Actions taken in response to student representations are reported at the meetings, and some programmes publish minutes of meetings on the virtual learning environment (VLE). Representatives are trained by CCSU, and this process is reviewed through regular meetings between the Pro Vice-Chancellor (Students) and the Union.

41 Programme approval and review panels do not include students (although the University is considering this), but they always meet with students as part of their scrutiny. The audit team noted some variation in the manner in which students were consulted through programme monitoring and review. The new review processes, as described in the Quality Manual, clearly expect the inclusion of student-staff liaison meetings and student representatives; however, faculties are permitted to determine their own methods of programme review, which could leave the role of students open to local interpretation. The University may therefore wish to consider how it uses student-staff liaison meetings systematically to inform programme monitoring and review, particularly in connection with the new process of Annual Departmental Review (paragraph 21).

42 The Learning and Teaching Strategy (2006-10), in the process of revision at the time of audit, 'seeks to effect change by ensuring that teaching within the institution is informed and enriched by its research and knowledge transfer activity'. According to the Briefing Paper the University 'believes' that all staff who teach should be actively engaged in scholarship and, when appropriate, in research which informs the quality of teaching. The audit team found some evidence of staff engaged in these activities. Project funding from the Higher Education Funding Council for England (HEFCE) has been used to set up a Research Informed Teaching initiative, which resulted in the recent publication of a booklet entitled Research Informed Teaching: exploring the concept. The Vice-Chancellor leads an annual three-day staff conference, organised by Staff Development and the Learning and Teaching Enhancement Unit, which discusses developments in learning and teaching and helps to integrate academic and support staff.

43 A Supervisor Development Programme is available to all staff involved in supervision of research students, and is compulsory for all new supervisors. Staff new to research are also invited to take part in the Researcher Development Programme run by the Graduate School.

44 The University makes good use of its VLE to support student learning, particularly in its campus-based programmes, and students express appreciation of it. A Faculty Learning Technology Team in the Learning and Teaching Enhancement Unit helps staff to develop their skills for this, and has widened the use of learning methods such as online discussion and e-portfolios. The University offers no programmes delivered entirely by distance learning, but some may be classed as blended learning. Where programmes rely on significant elements of distance learning, approval processes include a review of distance-learning materials.

45 Library resources at the University are based in Augustine House, a £35million development which opened in September 2009. Library resources had previously received critical feedback from students, but the University expressed its hope that the recent investment and improvements would address this, and the Augustine House library developments were broadly welcomed by the students who met with the audit team. Students were also pleased with library resources available at all other University campuses. Some learning resources are also available electronically and the University has increased the annual budget for books, journals and electronic resources.

46 Students are informed about the University's support services at induction and in handbooks. All students have personal tutors, and staff are trained to support students. The Employability and Careers Service works with departments to develop employment related skills in the curriculum. An effective Graduate Skills website is provided. Personal development planning is used, although variably, across the institution.

47 Students who met the audit team were generally satisfied with the learning facilities provided for them, but some expressed concerns about room allocation and timetabling. The University was addressing these issues.

48 The University's Admissions and Recruitment Policy covers all students at the University and those on its collaborative programmes. The policy clearly reflects the *Code of practice, Section 10: Admissions to higher education*, and the University's commitment to equal opportunities. Entry requirements are made clear in programme documentation, and recruitment is managed by the Student Recruitment Office. International students are recruited through the International Office; they are required to provide evidence of their proficiency in English, normally through an IELTS score of at least 6.5 for postgraduate students and 6.0 for undergraduate students. Students may receive up to 50 per cent of the total credit points for an award, using the University's procedures for the accreditation of prior learning (APL). Applications for credit are considered by programme directors, and the process is reviewed by faculty quality committees. The audit team noted some discrepancies in University regulations regarding the role of external examiners in the APL process, and considered that the University would wish to address these.

49 Staff development is managed through the Human Resources and Staff Development Department. Development opportunities, many of them provided by the Learning and Teaching Enhancement Unit, are available to all staff. The Staff Development Committee oversees and reports to the Senior Management Team. Staff met by the audit team were pleased with the opportunities offered. Increasing use is made of the VLE in staff development at the University; while the team noted this as good practice, it was also evident that it could be used more fully in connection with collaborative partnerships (paragraphs 53, 71). Peer mentors are provided for new staff and those changing roles. As a result of a staff survey in 2009 action has been taken to address concerns about promotion procedures and support for sessional staff. Peer observation and review of teaching is also employed to support the quality of the student experience, although the audit team found that this process required further embedding.

50 The audit team concludes that confidence can reasonably be placed in the soundness of the institution's present and likely future management of the quality of the learning opportunities available to students.

Section 4: Institutional approach to quality enhancement

51 The University's approach to quality enhancement is defined as 'the process of taking deliberate steps at institutional level to improve the quality of learning opportunities'. This process is driven strategically by key members of the University's Senior Management Team, notably the Pro Vice-Chancellor (Learning and Quality) and Pro Vice-Chancellor (Students), posts which were created for this purpose, and is implemented at local level through academic and service departments.

52 During 2008-10, the University has focused on assessment as a key enhancement theme, and established an Assessment Enhancement Working Group to guide this. Outcomes include the development of principles for effective feedback, and a maximum assignment return time of three weeks to be implemented by September 2010. Attempts by the University to involve its students in enhancement through the Students' Forum have met with limited success. Students were largely unaware of this Forum (paragraph 39), and of other enhancement initiatives such as Student First (paragraphs 9, 32, 53), and the institution might wish to monitor the effectiveness of its communications with students regarding the steps it has taken to enhance the quality of their learning experience.

53 As part of its Student First policy the University has invested strongly in two major enhancement measures: the new library facilities in Augustine House and the i-zone, a 'one-stop' centre for student support (paragraph 32). It has also put considerable effort into the development and use of its VLE for its students and staff. The VLE provides valuable information on graduate skills, appraisal and professional development, student support opportunities, and the *Code of practice*; it is also a repository for key University documents and templates. The audit team found that the use of the VLE in supporting the learning opportunities of students and staff was a feature of good practice, and noted its potential for promoting comparable experiences across collaborative partners.

54 Departments are required to reflect on their enhancement strategies during annual and periodic reviews, although several reports seen by the audit team contained little evidence of steps taken by departments to enhance quality through systematic planning. Under the new quality framework, the heads of academic and service departments produce annual departmental reviews (paragraphs 22, 35) which include reflections on and plans for enhancement. This offers potential for sharing good practice and reviewing enhancement. However, in order to get maximum enhancement value from this process, the University should put in place appropriate mechanisms at faculty level so that outcomes of service department annual reviews feed into the annual monitoring of its programmes.

55 The audit team found that the institution's approach to enhancement had made little impression upon the activity of partner institutions, some of which were unclear about the University's enhancement agenda. The University may therefore wish to develop further the effectiveness of its communications with partner institutions, and its sharing of good practice, as it continues to implement its new approaches to annual and periodic reviews.

56 The audit team found evidence that the University is taking deliberate steps to promote quality enhancement but the process of systematic enhancement at institutional level is in its early stages. Some strategic initiatives have been introduced but their outcomes are not yet fully embedded within the University systems and procedures, and its policies and intentions for enhancement have not yet been communicated consistently among collaborative partner institutions.

Section 5: Collaborative arrangements

57 The University's register of collaborative provision, which is published on the website, details 55 programmes delivered in partnership with 38 partners. At the time of the audit there were 3,050 students on collaborative programmes. The largest category of partnership involves 17 regional further education colleges. There are also five partnership arrangements with private providers and six with professional institutions (such as hospitals) or public authorities. International collaborations include an arrangement with a government training organisation in south-east Asia, and three partnerships with education or training organisations in mainland Europe. The University also delivers programmes in partnership with three other higher education institutions and three dioceses of the Church of England. In most cases the delivery of the programmes is divided in varying proportions between the University and the partner. Half of the programmes are Foundation Degrees, with a particular emphasis on teaching and the children's workforce, and the remaining programmes include honours degree and postgraduate awards.

58 The Strategic Plan explains that collaborative provision is important to the University in terms of widening access to higher education; progression opportunities; realising the expertise of staff in the institution and its partners; and financial benefit. Collaborative activity is limited to a total of 10 per cent of the University's overall full-time equivalent funded student numbers. Central to the operation of partnerships is the Collaborative Provision Handbook, which sets out strategic level principles and operational level procedures, and takes account of the *Code of practice, Section 2: Collaborative provision and flexible and distributed learning (including e-learning)*.

59 Strategic responsibility for collaborative provision rests with the Pro Vice-Chancellor (Academic) as part of an overall responsibility for academic planning. The Pro Vice-Chancellor (Learning and Quality) has academic responsibility for collaborative provision, exercised through chairing both the Quality and Standards Committee and the Collaborative Provision Sub-Committee. The latter oversees academic standards and quality in collaborative partnerships. A Partner Forum chaired by the Pro vice-chancellor (Academic) has been recently established to enable more partner institutions to be involved in collaborative provision discussions and planning issues with the University. One partner has a longstanding link with the University and is in some ways treated as if it were a faculty. The audit team found that this arrangement was managed effectively by the University and provided a sound basis for the securing of academic standards and quality.

60 The University undertook an Internal Review of Collaborative Provision Partnerships in July 2007, and updated its procedures for establishing, maintaining and reviewing collaborative partnerships. Policies and procedures are set out in the Collaborative Provision Handbook. Proposals for new collaborative partners are sent by faculties or departments to the Quality and Standards Office, and are then considered by members of the Collaborative Provision Sub-Committee. A planning form is sent to the Pro Vice-Chancellor (Academic) who decides whether the proposal should proceed to the next stage. The Quality and Standards Office checks the standing and legal status of the proposed partner. Subject to the approval of the Collaborative Provision Sub-Committee, the proposal proceeds to a Collaborative Partner Approval Event which includes a visit to the prospective partner institution. A memorandum of agreement, which commits both parties to processes and practices aligned with the precepts of the *Code of practice*, is prepared.

61 A new partner's programmes, if not already validated by the University, are subject to a separate validation process and incorporated within an annex to the memorandum of agreement. Further new programmes and modifications of existing validated programmes are subject to the University's normal validation and modification processes. The audit team's scrutiny of approval and validation documentation indicated that these approval processes were working as intended and included appropriate external representation on the approval panels.

62 Academic link managers or link tutors provide the key operational connections between the University and its partners. They attend meetings, may assist in the moderation/assessment of student work, and support the annual review process. The audit team found that these arrangements were working effectively.

63 Programmes of study in collaborative provision are subject to an annual review which mirrors the University's internal process and takes place in conjunction with the relevant University faculty or department. These reviews evaluate key documents and data; they focus particularly on outcomes from the previous year including student feedback data, external examiner reports, and completion rates, and they also address other aspects of the programme such as changes to staffing or venues for delivery, publicity, and staff development. Review reports include an action plan. The audit found that annual reviews were effective in identifying appropriate issues for action, and for assuring the University of the health of the programme and partnership. However, their value as a tool for quality enhancement was less well established. Partner staff and link tutors who met with the team were not clear about actions they should be undertaking to advance the University's enhancement priorities.

64 The Annual Review report by a collaborative partner is used to inform the relevant University department's Annual Departmental Review (paragraph 21). The audit found that some of these Annual Departmental Review reports acknowledged partnership provision but gave little detail. Annual Departmental Review reports are summarised by faculties and summary reports are sent to the Director of Quality and Standards, and thence to the Quality and Standards Committee. However, the audit team noted that summaries received by the Quality and Standards Committee were so limited in detail that there was little scope to identify issues or

good practice at partnership level. The recently remodelled Collaborative Provision Sub-Committee will in future receive Annual Review summaries from partners, and this process should be used to strengthen the institutional oversight of partnership provision.

65 All partnerships are subject to a periodic review which follows a similar format to the mechanisms used in the University's departments and evaluates both the partnership arrangement and the provision within it. These reviews, which are initiated by the Quality and Standards Office, enable the University to address the maintenance of academic standards, operational effectiveness and levels of risk. A periodic review panel, with external representation, sees documentation and meets staff, current students, former students and other stakeholders. The panel also receives a subject specialist's report on the venue and resources for delivery of the programme. The outcome of the review and continuation of the partnership may involve conditions. Periodic review reports, which distinguish between the evaluations of the partnership arrangement and the programmes provided through it, are sent to the Collaborative Provision Sub-Committee and the Quality and Standards Committee. The audit team concluded that the system for the periodic review of collaborative partnerships, tied to the renewal of the memorandum of agreement, was an appropriate means of assuring the standards and quality of collaborative programmes.

66 Assessment and examination arrangements for collaborative provision students are governed by the University's regulations and procedures. Collaborative provision arrangements are agreed at the time of validation. Programme teams manage the day-to-day arrangements and ensure that assessment moderation, turnaround, and feedback are appropriate. The audit team found some cases where assessment practice in partnerships was contrary to University requirements, and advises the University to ensure that each partner institution understands and implements all relevant University regulations and procedures.

67 External examiners in collaborative provision are appointed by the University on the same basis as for 'home' programmes. A sample of examiners' reports suggested that programmes were running well, but they did not always identify issues of student performance at different locations or studying in different modes. Responses were made to external examiners, but practice varied considerably in this regard. In some cases there was effective dialogue between the partner, University staff and examiner; but in others the University-based programme director had responded to the external without the knowledge of the partner's senior staff. Such practice seemed to be at odds with the University's principles for collaborative provision, and worked against effective communication and collegiality.

68 External examiners must be present at each board of examiners where student work that contributes to a final award is considered. In some boards this requirement was not met, although written communications had been forwarded by the external examiner. It also became clear that a small number of collaborative provision students presented for credit had not been appropriately enrolled on their programme. The audit team concluded that, barring absence through illness, such incidents represent occasional but significant contraventions of the institution's procedures. The University should make sure that all partner institutions understand and implement fully all relevant University policies and procedures. The team also noted that the degree certificate and transcript for one partner programme did not fully meet the expectations of the *Code of practice, Section 2*, in that the recording of the name of the partner was omitted and the location of teaching was incorrect. The team was told that the European Diploma Supplement for the students in question carried the correct information, but this was not yet provided routinely to all graduates. The University should ensure that all certificates and transcripts comply fully with such requirements and accurately represent the nature of partnership arrangements, and reflect fully the precepts of the *Code of practice, Section 2*.

69 Arrangements for involving partnership students in quality assurance are similar to those at the University. The audit team found some variations of practice across different collaborative partnerships but students did not seem to be disadvantaged as a result. Annual reports from partner institutions showed that students' views were gathered and evaluated. However, there were some inconsistencies in the reporting back of actions taken as a result of feedback provided by students. Some students seemed to be aware that action was being taken, but were not sure what this was. Others said that the processes for informing them about actions taken in response to their feedback could be more systematic. Given these inconsistencies, the University would be wise to keep these arrangements under review.

70 Resources for learning in collaborative provision are investigated in the early stages of the approval process of a new partner. Venue checks are also undertaken by University staff to ensure the suitability of off-campus delivery. While the programme is running, the annual review process and the liaison activities of link tutors provide feedback and comment on the ongoing level of resources. Most partnership students said that they used online library resources and/or other universities' libraries, but some expressed a feeling of disadvantage caused by distance from the facilities offered at the Canterbury Campus. The University's VLE was used in some, but not all, partner institutions. The audit team noted that the University took steps to ensure an appropriate level of resource in all collaborative provision, and encouraged it to inform all students clearly about resource availability and entitlements.

71 Partnership staff teaching in collaborative programmes are approved at the new partner validation stage, and are required to engage with appropriate parts of the University's Associate Tutor Programme. Partners are required to inform the University and send curricula vitae, when staff are subsequently added to programme teams. Other staff development opportunities provided by the University are made available to collaborative provision staff. The take-up of such opportunities among the staff met by the audit team was minimal, largely due to distance from Canterbury. The University's VLE provision has the potential to improve the development opportunities for staff in collaborative provision. Where specific needs are identified by the link tutor or through the review process, bespoke staff development may take place; the audit team noted an example of this which followed a comment in an external examiner's report.

72 Collaborative provision students who met with the audit team were generally content with the level of academic and pastoral support they received. They also reported satisfaction with the comprehensive and accurate information they received in their student handbooks. The University's own student support services are available to collaborative provision students remotely, and the team noted that some students had made use of the University's Access to Learning Fund. Students were aware of procedures for appeals and complaints, and understood that they should use the partner institution's own procedures. The University's procedures are used for all appeals.

73 The University makes clear to partners its expectations in terms of the use of its name and logo in publicity materials and websites. Samples of marketing materials and websites showed this was working as intended.

74 From its analysis of documentation and meetings with staff and students at the University and selected partners, the audit team concludes that the University's arrangements for managing its collaborative provision are broadly fit for purpose and effective.

Section 6: Institutional arrangements for postgraduate research students

75 The University was granted research degree awarding powers in August 2009. Since 1988 research degrees had been delivered through an arrangement with the University of Kent as the awarding institution. Under these arrangements there were 169 completions to October 2009. At the time of the audit those postgraduate research students currently writing up their research continued to be registered with the University of Kent and would receive its

awards. All other current students had been offered the option of remaining registered with the University of Kent if they so wished; 20 had elected to do so and the remainder are now registered for CCCU awards. The audit team saw copies of letters to students confirming these arrangements.

76 In preparation for being awarded research degree awarding powers the University put in place a Research Degrees Academic Framework which was approved by Academic Board in September 2009. The Senior Pro Vice-Chancellor has overall responsibility for research and for research degrees, and chairs all research-associated committees. The University has two research degree programmes: the MPhil/PhD and the EdD (Doctor of Education). The Graduate School administers these programmes in conjunction with the departments and faculties where students are based and supervision is provided. The management of research degrees is governed by the Research Governance Handbook and the Code of Practice for Research Degrees Students and Supervisors. Students find the latter a very large and detailed document, and the University may wish to consider producing a more user-friendly summary.

77 The Research Degrees Sub-Committee, which is a subcommittee of the Quality and Standards Committee, monitors research degree programmes and the progression and achievements of research students. It includes senior academics and the Head of The Graduate School. The Research Degrees Sub-Committee also reports to the Research Committee, which deals with research strategy, the work of research units, research funding, studentships and the development and welfare of research students. Its membership includes the faculty research directors and the Head of the Graduate School, and it reports directly to the Academic Board.

78 The audit team found that the research environment is strengthened by the Graduate School, and also the Postgraduate Research Association which is led by research students and supported by the Graduate School. The Postgraduate Research Association provides a series of seminars organised by students, and an annual conference. Specialist research seminars also take place at faculty and department levels.

79 Research students are inducted by the Graduate School which also provides information on the research section of the University's VLE. Each student has a supervisory panel made up of a first and second supervisor and a chair. One of the two supervisors must be an experienced researcher with at least one successful completion as a first supervisor. All inexperienced research supervisors must be trained through the Supervisor Development Programme. QAA's Review of research degree programmes in 2006 reported that the Supervisor Development Programme was good practice, but noted that some supervisors failed to attend. The audit team was told that the Head of the Graduate School was seeking to improve supervisors' attendance.

80 Each student has an annual review meeting before each anniversary of their first registration, and a final review (which may take the form of a 'mock viva') three months before the end of registration. Review reports are sent to the Graduate School and then to the Research Degrees Sub-Committee. Applications for upgrading from MPhil to PhD are also made to this Sub-Committee through the Graduate School.

81 All research students are required to take the first three generic core modules of the Researcher Development Programme. The audit team found that this meets the expectations of the *Code of practice, Section 1: Postgraduate research programmes*. All research students have opportunities to teach. Those who do not already have appropriate qualifications are prepared for teaching as part of a single module in the Researcher Development Programme. This module is designed to enable students to become successful research academics, and it provides only an introduction to teaching and assessment. Students may also take part or all of the University's Postgraduate Certificate in Learning and Teaching (Higher Education), but are not required to do so. The team recommends that the University consider the minimum level of structured support required for postgraduate research students in preparation for teaching and assessment.

82 Procedures for the assessment of research degrees are set out in the Code of Practice for Research Degrees Students and Supervisors (CoP-RDSS). Examinations for research degrees are managed by the Graduate School, which receives nominations for examiners and recommends them to the Research Degrees Sub-Committee for appointment. Information about complaints and appeals procedures is also given in the CoP-RDSS and on the website.

83 The University states that 'research degrees are evaluated annually...by means of a Programme Quality Monitoring and Enhancement Report (PQMER) which is presented annually to the Quality and Standards Committee'. In practice, the PQMER for research degrees is considered along with other reports within one of the faculties, and is then included in a summary report from that faculty to the Quality and Standards Committee. However, the audit team found that the most recent summary report of this kind contained only a reference to the Research Degrees PQMER, but no evaluation of it in the main body of the report. Following the introduction of the new Quality Framework this process will be known as Annual Review of Research Degrees, and the team was informed that this Review will be reported directly to the Quality and Standards Committee. The team recommends that the University keep this process carefully under review to ensure transparent reporting and consistently effective oversight of academic standards and quality of learning opportunities in research degrees.

84 Postgraduate research students provide feedback through the Graduate School. The University participated in the Higher Education Academy's Postgraduate Research Experience Survey in 2009 and is addressing issues raised by part-time students through that survey. Students are represented through the Postgraduate Research Association and two representatives sit on the Research Committee. Students who met with the audit team were positive about the support and facilities provided for their research programmes. They expressed strong support for the Graduate School and especially the Postgraduate Research Association (see paragraph 78), which promotes their interests and collective identity.

85 Overall, the audit team found that the University's processes and procedures for postgraduate research programmes make an effective contribution to its management of the quality and standards of those programmes and meet the expectations of the precepts of the *Code of practice, Section 1: Postgraduate research programmes*.

Section 7: Published information

86 The Student Recruitment Office in the Department of Marketing has responsibility for prospectus development, promotion of programmes and the management of communication with potential students. It is thus also responsible for the accuracy and completeness of all published information to prospective students, although the responsibility for the accuracy of programme information, including that at partner institutions, rests with academic departments. Prospectus content is prepared by academic departments, which also check information supplied by partner institutions, before forwarding all copy to Marketing. This Department takes responsibility for the accuracy of all published material on the basis of the information signed off by heads of departments. The University's Web Development Unit is responsible for the design, implementation and administration of the institution's website. The Department of Marketing monitors partner institutions' websites to ensure the accuracy of marketing information. The audit team checked examples of these websites and found that their information about University programmes and progression opportunities was complete and accurate.

87 The Graduate School is responsible for information relating to the recruitment and selection of prospective research students, including the Research Prospectus, in conjunction with Marketing. The International Office has responsibility for the accuracy of information provided to students outside the UK, under the oversight of Marketing. The University plans to enhance the quality and consistency of its international publicity materials, and the quality of support information and booklets for international students.

88 During the audit, students confirmed that published information in prospectuses and the website had been accurate, and that programmes had met their expectations.

89 The Registry, through its data management office, has responsibility for the management of the student record system. The student intranet, known as StudentNet, gives access to a range of services including the updating and checking of personal data held by Registry. Student registration is carried out through the Examinations and Records Office which conducts checks on the data held. These processes appear rigorous, but the audit team found that registrations of collaborative partnership students had not always been carried out properly. The University should ensure that all partner institutions understand and implement its requirements.

90 The Planning Office has responsibility for assuring the accuracy of Higher Education Statistics Agency (HESA) data, and this is signed off by the Pro Vice-Chancellor (Academic). The audit team confirmed that appropriate and accurate information had been supplied to HESA and uploaded to the Unistats site.

91 All students receive programme handbooks before starting their studies. Students who met with the audit team confirmed that their handbooks were accurate and helpful. These handbooks are provided online, but the student written submission recommended that the University should consider printing first-year handbooks, and some programme teams have agreed to produce slimmed-down hardcopy versions, supplemented by the VLE. The University does not at present oversee the content of programme handbooks. It intends to review this position, and to produce online templates to ensure that links to all appropriate policies and procedures are covered. However, student handbooks for collaborative programmes are prepared by the University, and students confirmed that they were satisfactory (paragraph 72).

92 The audit team found that reliance could reasonably be placed on the accuracy and completeness of the information the University publishes about the quality of its educational provision and the standards of its awards, in accordance with HEFCE requirements (*HEFCE 2006/45, Annex F*). It also makes external examiners' reports available to students through its VLE or at student-staff liaison meetings.

Section 8: Features of good practice and recommendations

Features of good practice

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

- the use of the virtual learning environment in supporting students and staff, and its potential for promoting comparable learning experiences across the University's collaborative partnerships (paragraphs 44, 49, 53, 71).

Recommendations for action

94 Recommendations for action that is advisable:

- ensure that Academic Board, through its appropriate institutional-level committees, makes full use of the annual and periodic review processes to provide greater transparency and consistency in its oversight of academic standards and quality of learning opportunities in both its taught and research degree programmes (paragraphs 15, 21, 27, 64, 83)
- review the external examiner template, and the information given to external examiners, to ensure clear reporting about the standards of all awards and programmes, wherever delivered (paragraph 25)
- ensure that considerations of, and responses to, external examiners' reports are consistently clear, timely, transparent and well documented (paragraphs 26, 67)

- ensure that all award certificates and transcripts reflect fully the precepts of the *Code of practice, Section 2: Collaborative provision and flexible and distributed learning (including e-learning)* (paragraphs 36, 68)
- ensure that each partner institution understands and implements all relevant University regulations and procedures (paragraph 66, 68, 89).

95 Recommendations for action that is desirable:

- consider the minimum level of structured support required for postgraduate research students in preparation for teaching and assessment (paragraphs 10, 76, 81)
- keep under review the opportunities for faculties to consider the outcomes of service department annual and periodic reviews and their potential to enhance the quality of the student experience (paragraphs 35, 54).

Appendix

Canterbury Christ Church University's response to the Institutional audit report

The University welcomes the QAA's judgement that confidence can be placed in the present and future management of both the standards and quality of its awards. The University is keen to continually improve the way in which it manages and delivers its services to students and engagement with audit is seen as integral to this process.

The University is more than happy to accept the majority of the findings where the audit team found that improvement could be made. The simple error where a single transcript did not contain the name of the partner has already been corrected (Report, advisable 4) as has the matter where one partner was not applying submission deadlines in accordance with University guidelines (Report, advisable 5). The University is pleased to note the audit team's view that the institutions external examining process was broadly effective. However we are considering how we might revise the external examiner template to ensure greater consistency of external examiner reports - recognising however that some variability is inevitable given the individuality of external examiners. We are also revising the manner in which external examiners reports are dealt with both by departments and through the committee structure (Report, advisable 1, 2 and 3).

We believe that the audit team did not fully comprehend the way in which Academic Board and its constituent committees are informed of the outcomes of both annual and periodic review of departments. Nevertheless the University will give due consideration to the suggestion that either the reports themselves or a digest should go through the committee structure (Report, advisable 1).

We will give due consideration to enabling faculties to best use the outcomes from periodic reviews of support departments – possibly by making the reports fully available to faculties (Report, desirable 2). Under the new quality arrangements, set out in the Quality Manual, annual support department reports are already scheduled to be shared with faculties. We believed we had addressed the matter of support for postgraduate students who teach but we will revisit this to see if additional support is required (Report, desirable 1).

The matter where the University fundamentally disagrees with the audit team is in relation to programmes delivered across the University campuses. Where a programme is taught by the same staff, uses the same University resources and has the same assessment the University does not believe that standards are potentially threatened if an external examiner does not know which campus the student is based at – the audit team believed differently.

The Quality Assurance Agency for Higher Education

Southgate House
Southgate Street
Gloucester GL1 1UB

Tel 01452 557000
Fax 01452 557070
www.qaa.ac.uk

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