

# **The Arts Institute at Bournemouth**

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OCTOBER 2005

## **Preface**

The Quality Assurance Agency for Higher Education (QAA) exists to safeguard the public interest in sound standards of higher education (HE) qualifications and to encourage continuous improvement in the management of the quality of HE.

To do this QAA carries out reviews of individual HE institutions (universities and colleges of HE). In England and Northern Ireland this process is known as institutional audit. QAA operates similar but separate processes in Scotland and Wales.

## **The purpose of institutional audit**

The aims of institutional audit are to meet the public interest in knowing that universities and colleges are:

- providing HE, awards and qualifications of an acceptable quality and an appropriate academic standard, and
- exercising their legal powers to award degrees in a proper manner.

## **Judgements**

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

- the confidence that can reasonably be placed in the soundness of the institution's present and likely future management of the quality of its programmes and the academic standards of its awards
- the reliance that can reasonably be placed on the accuracy, integrity, completeness and frankness of the information that the institution publishes, and about the quality of its programmes and the standards of its awards.

These judgements are expressed as either **broad confidence**, **limited confidence** or **no confidence** and are accompanied by examples of good practice and recommendations for improvement.

## **Nationally agreed standards**

Institutional audit uses a set of nationally agreed reference points, known as the 'Academic Infrastructure', to consider an institution's standards and quality. These are published by QAA and consist of:

- *The framework for higher education qualifications in England, Wales and Northern Ireland (FHEQ)*, which include descriptions of different HE qualifications
- *The Code of practice for the assurance of academic quality and standards in higher education*
- subject benchmark statements, which describe the characteristics of degrees in different subjects
- guidelines for preparing programme specifications, which are descriptions of the what is on offer to students in individual programmes of study. They outline the intended knowledge, skills, understanding and attributes of a student completing that programme. They also give details of teaching and assessment methods and link the programme to the FHEQ.

## **The audit process**

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

The main elements of institutional audit are:

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

## **The evidence for the audit**

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

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

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

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

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## Summary

Creative Arts at Canterbury, Epsom, Farnham, Maidstone and Rochester.

### Introduction

A team of auditors from the Quality Assurance Agency for Higher Education (QAA) visited The Arts Institute at Bournemouth (the Institute) from 24 to 28 October 2005 to carry out an institutional audit. The purpose of the audit was to provide public information on the quality of the opportunities available to students and on the academic standards of awards offered by the Institute on behalf of the University College for the Creative Arts at Canterbury, Epsom, Farnham, Maidstone and Rochester.

To arrive at its conclusions the audit team spoke to members of staff throughout the Institute, to current and former students, and read a wide range of documents relating to the way in which the Institute manages the academic aspects of its provision.

The words 'academic standards' are used to describe the level of achievement that a student has to reach to gain an award (for example, a degree). This level should be at a similar level across the UK.

Academic quality is a way of describing how well the learning opportunities available to students help them to achieve their award. It is about making sure that appropriate teaching, support, assessment and learning opportunities are provided for them.

In institutional audit, both academic standards and academic quality are reviewed.

### Outcome of the audit

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

- broad confidence can be placed in the soundness of the Institute's present and likely future management of the quality of its programmes
- broad confidence can be placed in the soundness of the Institute's present and likely future management of the academic standards of the awards that it offers on behalf of the University College for the

### Features of good practice

The audit team identified the following areas of good practice within the Institute:

- student involvement as advisers in teaching staff appointments
- the Institute's recognition of the contribution of technician tutors to student learning
- the provision of staff development linked to the strategic priorities of the institution
- the provision of library services, and especially the role of the subject librarians.

### Recommendations for action

The audit team also recommends that the Institute should consider further action in some areas in order to ensure that the academic quality and standards of the awards that it offers are maintained.

The team advises the Institute to:

- take timely action to ensure that the validation status of all courses is clearly indicated in all information for intending students.

It would be desirable for the Institute to:

- consider via the Academic Development Unit locally generated enhancement initiatives in order to ensure that these initiatives are evaluated and developed in accordance with the Institute's overall quality framework
- give external examiners the opportunity to discuss across courses both the comparability of student achievement and the parity of assessment processes
- ensure that the arrangements for student representation are included in Institute documentation for students
- give priority to the development of an institute-wide information technology (IT) strategy.

- formalise practice across the Institute for the provision of academic and personal support in order to ensure clarity of information, and consistent and equitable treatment of students
- review peer-assisted learning against the level and detail of intended learning outcomes.

### **Creative arts and design**

In the programme of the audit, one discipline audit trail (DAT) was conducted in Creative Arts and Design. The audit found that for each programme encompassed in the scope of the audit the standard of student achievement in the programme was appropriate to the title of the award and its location within *The framework for higher education qualifications in England, Wales and Northern Ireland*, published by QAA, and that the quality of learning opportunities available to students was suitable for a programme of study leading to that award.

To arrive at these conclusions, the audit team spoke to staff and students and was given information about the Institute as a whole. The team also looked in detail at individual programmes within the DAT, to find out how well the Institute's systems and procedures were working at that level. The Institute provided the team with documents, including student work and, here too, the team spoke to staff and students.

### **National reference points**

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

From 2004 the institutional audit process has included a check on the reliability of the

information sets published by institutions in the format recommended in the Higher Education Funding Council for England's document 03/51, *Information on quality and standards in higher education: Final guidance*. The Institute is meeting the requirements set out in HEFCE's document 03/51 with regard to the coverage, accuracy, reliability and frankness of information provided in this format. The audit team does, however, have one advisable recommendation concerning publicity material for intending students and the need to give clear and consistent indications of the validation status of courses (see above).

# **Main report**



## **Main report**

1 An institutional audit of the Arts Institute at Bournemouth (the Institute) was undertaken during the week commencing 24 October 2005. The purpose of the audit was to provide public information on the quality of the Institute's programmes of study and on the discharge of its responsibility for its awards.

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

3 The audit checked the effectiveness of the Institute's procedures for establishing and maintaining the standards of its academic awards; for reviewing and enhancing the quality of the programmes of study leading to those awards; and for publishing reliable information. As part of the audit process, according to protocols agreed with HEFCE, SCOP and UUK, the audit included consideration of an example of institutional processes at work at the level of the programme, through a discipline audit trail (DAT). The scope of the audit encompassed the Institute's collaborative provision.

## **Section 1: Introduction: The Arts Institute at Bournemouth**

### **The institution and its mission**

4 Founded in 1885, The Arts Institute at Bournemouth is designated as a specialist higher education institution (HEI) providing education in the areas of arts, design and media. The work of the Institute across the creative industries

seeks to contribute to cultural and economic life at regional, national and international levels. The Institute is located in purpose-built accommodation on a site in Bournemouth.

5 Since 2001 all higher education awards offered by the Institute have been validated by The Surrey Institute of Art and Design, University College (Surrey Institute). On 1 August 2005, The Surrey Institute merged with the Kent Institute of Art and Design to form the University College for the Creative Arts at Canterbury, Epsom, Farnham, Maidstone and Rochester (the University College).

6 A revised Memorandum of Co-operation was drawn up in September 2005 between the University College and the Institute detailing the terms under which the Institute is approved by the University College to offer taught courses of higher education at Foundation Degree (FD), undergraduate and postgraduate level, leading to the awards of the University College.

7 The first formal agreement between the Institute and the former Surrey Institute was established in 1994. The progressive development of the relationship led to responsibility for the development of its own regulatory framework being devolved to the Institute in 2002. Following a successful Institutional Review in 2004, conducted by the validating body, the Institute was granted accredited status by the University College, successor to The Surrey Institute. This accreditation grants significant autonomy to the Institute over its own validation, monitoring and review procedures. In its Strategic Plan 2001-2006, the Institute articulates its objective of securing taught degree awarding powers in the medium term.

8 The Institute is organised in three academic schools - Art, Design and Media. There are three service directorates - Academic Services, Finance and Planning, and Institute Services. There are also three development units - Academic Development, Business Development and Regional Development. There is also a small International Development Unit which reports directly to the Principal.

9 The Principal and Deputy Principal together with the directors of schools and the directors of services form the Directorate team (DTM). The Directors' Operational Group supports the Deputy Principal in day-to-day operational matters.

10 All schools offer programmes leading to the awards of BA (Hons) and FD. The further education provision of the Institute is housed entirely within the School of Art, and postgraduate provision is being developed initially in the School of Media. The audit team was told that the Institute's total enrolments for 2005-06 were around 2,164 full-time equivalent (FTE) students subject to the normal process of checking later in the autumn. Of these FTEs, 73 per cent would be enrolled on higher education courses. The Institute offers 12 honours degree courses and five FDs, as well as other intermediate-level provision and a range of short courses.

11 The review of the Institute's Strategic Plan for 2001-2006 provided an opportunity for the institution to review its mission to ensure that it reflected recent achievements and its most current vision for the future. The Institute's mission now is: 'to provide a high-quality professional environment for its staff and students, to allow them to study, research and practise arts, design and media to the highest standards, so that they can contribute to the cultural and economic development of society.'

12 In the SED the Institute contextualised its mission by identifying its core values and aspirations to remain at the forefront of work in the creative arts.

### **Collaborative provision**

13 The Institute does not have any programmes offered under collaborative provision arrangements. Previously, an FD in Professional Garden Design had been developed as a collaborative course in partnership with Kingston Maurward College. However, having satisfied local demand this course was discontinued in 2003 after one intake.

### **Background information**

14 The published information available for this audit included:

- information made available through the Higher Education and Research Opportunities (HERO) portal and the Institute's own website
  - the QAA subject review report for Art and Design (published in October 2000).
- 15 The Institute initially provided QAA with:
- an institutional self-evaluation document (SED) plus appendices
  - a discipline self-evaluation document (DSED) covering the two programmes selected for the DAT
  - the Institute's Academic Quality Handbook for Higher Education 2005-2006
  - a copy of the report of the QAA developmental engagement in Communications, Media, Film and Television studies carried out in 2003-04.

16 During visits to the Institute, the audit team was given on-site access to the Institute's intranet. This access facilitated scrutiny of a range of documents and committee minutes. The team was also provided with internal documents in hard copy and a range of documentation relevant to the selected DAT programmes, including samples of student work.

### **The audit process**

17 Following preliminary meetings at the Institute in 2004 and in July 2005, QAA confirmed that a single DAT in Creative Arts and Design would be conducted during the audit. Following consideration of student numbers and the Institute's pattern of internal review it was decided that the DAT would focus on the two honours degree programmes in Illustration and in Costume for the Screen and Stage.

18 For both these degrees, the DSED documentation comprised self-evaluation documentation produced for internal academic review purposes, together with course handbooks.

19 A briefing visit took place from 4 to 6 October 2005 with the purpose of allowing the audit team to explore with the Principal, senior members of staff and student representatives matters relating to the management of quality, standards and information raised by the SED, the students' written submission (SWS) and other documentation provided in advance to the team. At the close of the briefing visit, the main themes to be pursued in the audit were signalled to the Institute, and a programme of meetings for the audit visit was agreed. The team decided that it did not wish to pursue any thematic enquiries during the audit visit. The team requested some additional documentation to be made available during the audit visit.

20 The audit visit took place from 24 to 28 October 2005 and included further meetings with staff, students and former students of the Institute, both at institutional level and in relation to the DAT. The audit team was Dr B Casey, Mrs P Lowrie, Mr D Noon and Professor N Sammells. The audit secretary was Ms S Lang. The audit was coordinated for QAA by Mr A Bradshaw, Assistant Director.

### **Developments since previous QAA visits**

21 Since joining the higher education sector in 2000 the Institute had not previously been involved in a QAA institutional audit. A subject review in Art and Design had been carried out in 2000 and a developmental engagement in Media provision in March 2004. In May 2005 the FdA (Fashion) was scrutinised as part of the national review of FDs.

22 The University College conducts a quinquennial review of the Institute to consider arrangements for the assurance of academic standards and quality. The most recent institutional review conducted by the University College took place in October 2004 and was the third review of the partnership. As a result of the review the Institute was granted accredited status by the University College 'in recognition of the level of maturity demonstrated by the Institute during that event and the increased confidence in the relationship between the two HEIs'. Accredited status grants significant

autonomy to the Institute over its own validation, monitoring and review procedures.

## **Section 2: The audit investigations: institutional processes**

### **The institution's view as expressed in the SED**

23 The SED expressed the belief that the Institute's 'processes to support the assurance of academic standards and quality are appropriate and effective' and that they are 'aligned with acceptable practice across the sector, are well owned by course teams, who understand their value and purpose.'

24 The SED states that the University College exercises its responsibility for awards at the Institute 'through oversight of and agreed structured involvement in the processes of validation, annual monitoring and periodic review'. The accreditation agreement grants significant autonomy to the Institute over its own validation, monitoring and review procedures but requires that procedures 'are the same as or consistent with the processes operated by the University College'.

25 The Institute had reviewed the experience of subject review and noted that in the past, quality assurance systems had tended to be seen as 'top-down'. Steps had since been taken to develop a culture designed to redress this balance. The SED stated that standards and quality 'are best assured as close as possible to the point of delivery' although, given its size, there is central oversight and management to avoid duplication. The SED went on to describe how through staff-development events, course teams and course leaders had gained greater ownership of quality assurance systems, which are 'informed by good practice across the sector and which take appropriate account of national, external reference points'. For example, course teams are now required to provide regular self-reflective commentaries which are monitored through the Institute's committee structure. The Institute also stated

that engagement with external examiners and panel members provided an additional level of objectivity.

26 The SED identified the strengths of its provision as:

- well-established and well-owned quality systems
- good staff awareness of the Strategic Plan
- a mature working relationship with the accrediting HEI
- awareness of and engagement with, the national context for quality assurance and enhancement
- proactive and supportive staff development
- structured mechanisms to engage with the student community
- established mechanisms to ensure the provision of a well-resourced learning environment
- the development of an effective and innovative strategy for employer involvement in course design and delivery
- structured opportunities for complementarity between courses, with consequent greater simulation of the work environment
- excellent graduate opportunities, including employment rates (with many graduates securing prestigious appointments) and the possibility of business incubation within the Enterprise Pavilion
- high-quality student work, and good student retention and achievement.

27 The Institute, through the SED, also identified a number of areas where improvements could be made or which need to remain under review. Key aspects included the streamlining of action plans and the continuation of staff development to help staff to express their work through the 'language of standards and quality'. Through a reflective and self-critical approach, it concluded that 'there can be confidence in its systems for assuring quality and standards'.

### **The institution's framework for managing quality and standards, including collaborative provision**

28 The University College has delegated certain operational aspects of quality management to the Institute while retaining responsibility for the standards of its awards. The Institute has developed a Quality Policy for higher education based on the Institute's mission. In this Policy, quality is identified as 'a key determinant of the success of the Institute and the experience of studying and working at it'. The Policy states that 'Quality and its incremental enhancement are therefore intrinsic both to the strategic planning process and the day-to-day operation of all aspects of the Institute'.

29 The Quality Policy describes how the framework for managing academic standards and quality involves internal validation, annual course monitoring reports (ACMR), annual service monitoring reports (ASMR), external validation and periodic review, and external examining arrangements. Academic and service areas follow a parallel process for annual monitoring and review leading to the production of an annual Action Plan.

30 The policies, procedures and guidelines to support the framework are detailed in the Institute's Academic Quality Handbook for Higher Education. The Handbook is available both in paper and on the intranet, and is updated annually.

31 In 2001, the Institute developed a curricular framework for the design, operation and award of all undergraduate awards validated by the University College. The framework was updated in 2004 and is contained in a document which is published annually with an associated set of higher education regulations detailing assessment regulations and policies on admissions, progression and awards. This document, Undergraduate Course Framework and Higher Education Regulations, is issued to all students at the commencement of each year of study, and is used in conjunction with the course handbook. All teaching and technician staff

involved in the delivery of undergraduate courses are required to be familiar with this publication. Course leaders are responsible for ensuring that all staff including part-time fractional staff and visiting tutors comply with the requirements of the framework and the Higher Education Regulations.

32 The academic committee structure supports the quality framework, with the Academic Board having responsibility for general issues relating to academic standards and the validation and review of courses. In practice, operational responsibility for quality assurance and enhancement is devolved to the Institute Standards and Quality Committee (ISQ) which reports to the Academic Board.

33 Several committees report to ISQ enabling this committee to have a comprehensive overview of aspects of the Institute's work relating to quality and standards. The reporting committees are Teaching, Learning and Curriculum Development (TLCD), Learning Environment, and the Research, Scholarship and Staff Development Allocations Group. School Boards of Study, Course Examination Boards, the Examination Appeals Group and the [accreditation of prior experiential learning] AP(E)L Group also report to the ISQ. As chair of ISQ, the Deputy Principal (or nominee) is entitled to attend all committees or boards which report through the Academic Committee structure.

34 ISQ is also charged with overseeing the operation of the assessment of students. The Committee receives proposed assessment results from all course examination boards and confirms the results on behalf of the Institute for final formal ratification by the validating body, the University College. The ISQ also monitors student performance by programme and cohort.

35 Recognising the need to consider the effectiveness of procedures in the light of expansion, the Institute made refinements to the committee structure at the start of 2004-05. The executive and academic committee structures were disaggregated and there was a move from an inclusive to representational approach to

committee membership. The operation of the revised structure was reviewed in July 2005. The review found that the new committee structure had led to greater understanding of the purpose of the various committees and an increased sense of ownership among the staff. The Academic Board and all its subcommittees reconsidered their remits and agreed that they were appropriate. The Academic Board has since decided that it will conduct an annual review of the committee structure.

36 The SED stated that 'to avoid unnecessary duplication of systems and processes within a relatively small HEI, the quality framework is managed centrally'. Ultimate executive responsibility for academic standards and quality rests with the Principal. The quality assurance and enhancement processes are led by the Deputy Principal working with the directors of schools and the Director of Academic Services. The Directorate of Academic Services was formed in 2004 to support quality assurance and academic administration and the Director of Academic Services now has responsibility for the day-to-day operation of the quality assurance system.

37 The Academic Development Unit (ADU) was also established in 2004 to support the Institute in quality enhancement and curriculum development projects. The head of the ADU is the chair of the TLCD committee, and ADU plays a key role in the provision of staff development in quality assurance issues.

38 The SED stated that 'In developing systems and processes for the assurance of standards and quality the Institute has encouraged engagement from all members of the academic community believing that standards and quality are best assured as close as possible to the point of delivery'. Each course has a course team that forms a course board for monitoring and reporting purposes. Course boards report to a school board which, in turn, reports to the ISQ.

39 In the light of its scrutiny of relevant documentation and discussions with staff the audit team concluded that the Institute's quality

and standards framework is fit for purpose and operates as intended. The relatively recently formed Directorate of Academic Services and the Academic Development Unit play an important part in ensuring that systems are implemented and that support is provided for staff to enable them to enhance their understanding of and involvement in the Institute's quality agenda. The team agreed that the Institute has made good progress in developing a culture in which due account is taken of the national Academic Infrastructure while there is also ownership of the course among Institute staff.

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

40 In its SED the Institute described the next steps in its development and in the enhancement of standards and quality. These included: streamlining action planning, reviewing its programme specification proforma, enhancing the use of data analysis to support quality assurance processes, developing staff understanding of the 'language of audit', reviewing the admission process, encouraging all subject areas to work with Industry Liaison Groups, implementing progress files, further targeting staff development to support the enhancement of learning and teaching and continuing with progress towards the revised Matrix Quality Standard for Information, Advice and Guidance Services. The audit team found that these developmental areas were reflected in priorities set out on the Academic Development Plan and in the annual Action Plan.

41 Included within the Academic Plan (2005-08) is the development and implementation of appropriate procedures for academic standards and quality which reflect the 'increased autonomy granted to the Institute as an accredited Institute'. The Institute believes that the assurance and enhancement of quality and standards is best assured by close engagement of all staff members and as close to the point of delivery as is possible, working within a common institutional framework. Staff

met by the audit team considered themselves to be fully engaged with quality enhancement through, for example, annual reporting processes, staff development and sharing good practice.

42 The Institute 'seeks a progressive enhancement of the quality of the educational experience'. The key components of the approach include addressing issues arising from ACMR and periodic review, supported by a detailed Teaching, Learning and Assessment Strategy, targeted staff development programmes, and a comprehensive learning infrastructure. In addition each Service Directorate prepares a comprehensive ASMR taking into account feedback from stakeholders and reviews of the effectiveness of services.

43 In its SED the Institute identified other enhancement initiatives. The audit team noted that these developments often derived from the initiative and innovation of course teams. The BA (Hons) Costume for Screen and Stage has developed a peer-assisted learning scheme with final-year students supporting the learning of first and second-year students and, in some cases, children in schools. This initiative was regarded by students as a valuable learning opportunity as was the student peer assessment scheme, involving students in the assessment of other students. While the TLCD had received a short report on peer assessment, the team considered it desirable that locally generated enhancement initiatives, such as these, should include a full evaluation so that they can be developed in accordance with the Institute's quality framework and that any lessons can be considered before being more widely disseminated.

44 It was noted by the audit team that the newly appointed National Teaching Fellow is the first such post in the Institute. The team was informed that consideration is being given to developing new teaching awards to recognise excellence and to promote good practice.

45 The recently constructed Enterprise Pavilion has provided an opportunity to link the work of the Institute to the regional development agenda in the area of the creative

industries. There is evidence that students are already benefiting from engagement with businesses operating within the Pavilion both in terms of informing the development of the curriculum and through direct contacts with businesses. In the view of the Institute, the Pavilion provides a unique opportunity to both showcase the work of the Institute and strengthen links with industry.

### **Internal approval, monitoring and review processes**

#### **Programme approval**

46 To ensure adequate time for course development the Institute has established a two-year academic planning cycle. In 2004-05 a two-stage planning process was introduced for the development of new courses. The first stage consists of an outline proposal which must be submitted by a school for consideration by DTM and the Academic Board to ensure that the proposal is in line with the Strategic Plan. Proposals which are accepted move to the second stage which is the development of a detailed proposal to be considered by ISQ and the Academic Board. Detailed proposals must be accompanied by marketing and resourcing information, and acknowledgement of the proposal by the directorates of the support services; Academic Services, Institute Services and Finance and Planning.

47 This two-stage process is designed to ensure that detailed work is undertaken only on proposals that are considered appropriate at stage one. At the detailed proposal stage the course developer is required to indicate that in defining the course aims due account has been taken of *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ) and relevant subject benchmark statements. Detailed proposals accepted by the Institute must be notified formally to the University College's Academic Policy Quality and Standards Committee (APQS) for approval to proceed to course validation.

48 Documentation to support the new course proposal normally consists of the Course Context and the Course Handbook. Guidelines

for the development of the two documents are given in the Academic Quality Handbook. The Course Context illustrates the context in which the course will operate and includes: the institutional context and rationale for the proposal; details of subject content; delivery strategies; staff and learning support provision; and arrangements for academic guidance and student support. The Course Handbook is for use by students and explains what the course of study offers and how it will be delivered and assessed. A sample of unit handbooks and a schedule of consultation meetings are also required.

49 Schools are responsible for ensuring that proposed courses are prepared for the validation process. A school event is held prior to the validation panel meeting in order to scrutinise documentation and to discuss with the course team any issues arising.

50 The process of validation is also clearly documented in the Academic Quality Handbook which also contains a validation and review schedule for the academic year and details of forthcoming periodic reviews in the next five years. Proposed courses are scrutinised by a panel formed by the ISQ. The panel must include: two external members, normally one academic and one industrial/professional; two internal academic staff, one from each school not responsible for the proposal; and a representative of the validating body nominated by the chair of APQS. The validation panel is chaired by the chair of the ISQ or a nominee, who should have substantial experience of such events.

51 The Directorate of Academic Services is responsible for the administration and servicing of the validation event. The University College member of the validation panel participates as a full member of the panel, and in addition approves the final report of the validation. The recommendation from the validation panel is made to the ISQ, which takes the final decision on the course and reports this to the University College APQS. Validation is for a maximum of five years after which time a periodic review of the provision will be undertaken.

52 The Institute has identified the type of changes that may be made to validated courses. The Institute distinguishes clearly between those changes which represent major or minor modifications. Major modifications are addressed by consideration at a full validation or review event. Responsibility for the validation of minor modifications is devolved to the Institute's ISQ. Within the minor modifications procedure a maximum of two units per stage may be changed in any one academic year.

53 At the time of the audit the Institute had been operating the current process for validation and review for one year. The audit team was able to scrutinise documentation prepared for review and also subsequent reports of scrutiny events. The team concluded that the approach of the Institute to the validation/review process was thorough and comprehensive. The team considered that procedures detailed in the Academic Quality Handbook are fit for purpose and were being implemented effectively.

### **Annual monitoring**

54 The SED stated that 'all academic provision is submitted to a comprehensive system of monitoring, evaluation and action planning'. The Directorate of Academic Services oversees the process and a timetable for the academic monitoring cycle is developed in conjunction with the validating body.

55 Each year, each course is evaluated using a wide range of indicators. These indicators include: student performance data; comments from external examiners; feedback from students through a variety of mechanisms including the student perception survey (SPS); and unit evaluations. Using a standard Institute template, ACMR is produced by each course leader as chair of the course board. Course Boards develop a quality assurance action plan. This plan forms part of the ACMR and is used to address issues identified through the evaluation process and to report annually to the school board on the implementation of the previous year's action plan.

56 Staff development was provided for staff involved in preparing ACMRs. In February 2005

all course leaders took part in a leadership programme during which they undertook a detailed consideration of the ACMR process. This leadership programme led to the development of guidelines on the preparation of ACMRs.

57 Prior to being submitted to the school board the ACMRs are read by academic reviewers who are normally course leaders from other schools. This process of cross-reading has been implemented for the past three years in order to ensure a degree of critical overview at a distance from the course, and to provide an opportunity for the identification and dissemination of good practice across the Institute. The 'cross-reader' is required to attend the meeting of the course board which considers the ACMR and draws up the action plan. Readers present to the school boards their evaluation pro formas along with an oral report.

58 Each school board holds an extraordinary meeting at which all ACMRs are considered for the undergraduate provision in that school. This meeting is attended by the cross-readers and a representative from the University College. The chair of each school board develops an overview report on the operation of the school's undergraduate provision and includes a school quality assurance action plan along with the report for submission to ISQ.

59 The University College has delegated responsibility to the Institute for the annual academic monitoring required by the ISQ. The annual monitoring meeting of ISQ to consider the school annual reports is attended by a University College representative. Following this meeting the Deputy Principal, as chair of ISQ, produces an overview report and quality assurance plan for the Institute's Academic Board. This report is also presented to the University College annual monitoring meeting of APQS.

60 The Academic Quality Handbook includes the annual quality monitoring schedule and full guidelines on the monitoring process, including the identified academic reviewers for the academic year.



61 Staff whom the audit team met had a clear understanding of the ACMR process and the importance attached to it by the Institute. The team found evidence that course teams and schools are engaging with the process, and that the process was being effectively monitored and led by ISQ. The team concluded that the way in which the ACMR process is addressed in the Institute was in accordance with the statement in the SED that 'the annual course monitoring process and particularly the consideration by the ISQ of School level reports and the subsequent development of the overview report is of central importance to the Institute's systems'.

#### **Periodic review**

62 To retain validated standing all the Institute's higher education courses are subject to a periodic review within five years of the original validation or last review. Under accredited status, the ISQ has responsibility for overseeing periodic review, and it reports the outcome of each review to the University College's APQS.

63 The process for periodic review is analogous to that for validation. A review event is held and the constitution of the review panel is the same as for a validation event. An additional feature is that the review panel meets students and, where possible, former students of the course under review. The documentation for review again requires a Course Context and Course Handbook. The Course Context in this case provides an evaluative commentary on the course since the last review. The commentary reflects upon student achievement and the learning environment required to support that achievement. The context document draws upon the ACMRs for the review period as well as feedback from external examiners, students and employers. A template for the course context has been prepared by the Directorate of Academic Services and is available on the intranet. The review panel report indicates the period of continued validation. The report is considered by the ISQ and the final outcome is reported to the University College's APQS.

64 The SED contained a synopsis of the outcomes of validation and review events held since the latest change in procedures. This synopsis supports the Institute's view that outcomes are mainly course-specific and there were 'no emerging institutional themes'. The Institute's quality assurance action plan specifies that a review of the validation and review processes will be undertaken by ISQ in autumn 2005.

65 The audit team noted that the validation and periodic review processes were amended in 2004 to take account of the increased responsibility for standards and quality delegated to the Institute under accredited status. The team considered that these processes were clearly set out in the Academic Quality Handbook and were being followed correctly. From discussions with staff and scrutiny of periodic review documentation, the team concluded that the procedures for periodic review were secure in principle and successful in practice.

#### **External participation in internal review processes**

66 The Institute's validation and review procedures require that there be thorough scrutiny of proposed new courses or of courses being reviewed by a panel appointed by the chair of the ISQ. The six panel members must include two external representatives together with a University College representative. The two external assessors are normally nominated by the school responsible for the course under review. These assessors are usually one experienced academic and one practitioner of the discipline. External assessors should not have had any formal association with the Institute for the preceding three years. The appropriateness of the panel members and the balance of membership of the panel are considered by the panel chair and confirmed by the chair of the ISQ before arrangements are put in place for the review/validation event.

67 Guidance notes for external panel members detail the terms of reference of the review/validation panels and the role of the

external panel members. The external panel members are asked to consider issues from an external perspective, for example, to consider the standards indicated by the aims and objectives of the provision and the comparability of these standards with those of other awards at the same published FHEQ level.

68 After the review event a report is circulated to the panel members. The accuracy of the report is scrutinised by the panel members. The report must be formally signed off by the panel member from the University College before it is presented to ISQ.

69 The Institute has also decided that the school event to consider preparedness held prior to the validation/review event should normally involve an external consultant and the head of the Academic Development Unit.

70 The audit team was able to verify from documents that the composition of validation and review panels does indeed have a strong element of externality involving a wide range of experienced academics and practitioners from related discipline areas. In discussion with staff and from the documentation the team considered the changes that had taken place since the achievement of accredited status. Reports of reviews carried out under previous arrangements that the team then compared with reports from the current process clearly showed how the Institute was successfully implementing its standards and quality procedures. The team concluded that the Institute made effective use of external advice and was benefiting from the involvement of externals from the professions and from other parts of higher education.

### **External examiners and their reports**

71 The SED described how an external examiner is appointed for each unit which contributes to an award. External examiners are nominated by the course team and have to be approved by ISQ before being submitted to the University College for its approval. These externals are senior academics or practitioners who, in the view of the Institute, are able to compare student

achievement with that on similar courses at other UK HEIs. All external examiners are invited to an induction by the Institute, as well as by the University College, before taking up their role. External examiners are issued annually with an External Examiners' Handbook which sets out the external examining process and relevant regulations.

72 External examiners see a sample of work, normally 20 per cent of all student work at levels 2 and 3, and are asked to confirm that marking standards are consistent and appropriate. In their report template external examiners are asked to comment on that appropriateness with reference to national subject benchmarks and the national qualifications framework; they are also asked to comment on the structure, organisation, design and marking of assessments, and on the coherence of the policies and procedures relating to external examiners and the conduct of the examination boards and assessment process.

73 When external examiners' reports are received by the Institute, they are annotated by the Deputy Principal, and passed to course teams for comment. The reports are formally considered by course teams in each annual course monitoring process, with matters for attention and action noted in the Quality Action Plan. ISQ also receives an overview report on external examiners' reports, and has noted that some of its external examiners' reports are not as clearly evidence-based as it would wish. In these cases, the ISQ has written to the examiners concerned and enclosed a sample report of the type of report which will best serve the Institute and contribute to quality enhancement.

74 The Institute also holds external examiners' meetings during their visits. At these events the external examiners are asked to comment on the consistency of standards and to discuss parity of process. The SED also notes the intention to devolve this meeting of external examiners to schools, and the audit team learned that it is envisaged that the meeting should have, primarily, an

enhancement function. The team recommends that the Institute should take the opportunity presented by this meeting for external examiners to discuss comparability of student achievement across the school, as well as the question of parity of process.

75 During the course of its visit, the audit team was able to review a sample of external examiners' reports and to observe how the Institute received, considered, analysed, responded to, and made use of their contents. The team was able to confirm that the *Code of practice for the assurance of academic quality and standards in higher education (Code of practice), Section 4: External examining*, published by QAA, informed the workings of the Institute. Overall, the team came to the view that the Institute's procedures for securing and considering the views of its external examiners are thorough and work well at course and Institute level. The team considered that these procedures contribute to safeguarding the academic standard of the awards offered at the Institute.

### **External reference points**

76 The SED noted that the Institute recognises the significance of the national Academic Infrastructure for the higher education sector, and welcomes the opportunity that it provides to demonstrate consistency within the Institute, and with peers across the sector. However, the SED also acknowledged that the introduction of external reference points to a specialist community with existing practices and documentation presented particular challenges. It pointed to the development of strategies to enable colleagues to consider the emerging Academic Infrastructure in a supportive, collegial environment.

77 The SED acknowledged the Institute's awareness of the potential for undue complexity and unnecessary burden that responding to the *Code of practice* at school level could place on a relatively small HEI. In consequence, the Institute has adopted a central approach to its consideration of the *Code*, based on the principle that its institutional policies and procedures

should reflect the *Code*. Staff are then expected to follow Institute practice and not make additional reference to the *Code*. The general approach has been for the ISQ to establish small groups of relevant staff to identify where practice diverged from the *Code's* suggestions. This subgroup would then consider whether or not Institute policy should be revised, and would make its recommendations to the relevant committee. Each subgroup reported to the ISQ with its findings and a general review of progress in this area was presented to the ISQ, which noted that, while some action was outstanding (for instance, on areas of the *Code, Section 10: Recruitment and admissions* with respect to part-time provision), the intentions of much of the *Code* were well embedded within existing practice.

78 The appropriateness of course level responses to the FHEQ level descriptors and to subject benchmark statements is tested through the validation and review process. External examiners are also invited to comment on the appropriateness of standards set for the award with reference to subject benchmark statements and the national qualifications framework. The comments of external examiners inform ACMRs.

79 In response to the requirement for programme specifications, the Institute developed a common template which applies to all undergraduate courses. Programme specifications are now published in course handbooks and on the Institute's website. The SED noted that ISQ would review the programme specification pro forma in the light of QAA's intended revision to guidelines on programme specifications.

80 The report by the University College on the institutional review of the Institute in October 2004 found that, despite the institutional-level engagement with the *Code of practice*, teaching staff were less familiar with the precepts of the *Code* and some aspects of the Academic Infrastructure, and advised that this lack should be addressed through staff development. The SED acknowledged that some staff, though operating clearly

understood processes consistently across courses, were less familiar with the 'language of standards and quality' and notes that staff development activities have included a focus on this terminology. The audit team found that the staff whom they met were fluent in the 'language of standards and quality', and clearly understood the precepts of relevant sections of the *Code* and the nature and terminology of the Academic Infrastructure.

81 Overall, the audit team considered that the Institute's response to the *Code of practice* has been considered and systematic, helping to promote sound practice. The team also came to the view that the various elements of the Academic Infrastructure had been used effectively by the Institute to set the standards of awards at the appropriate level and to provide pertinent points of reference.

### **Programme-level review and accreditation by external agencies**

82 The Institute had one QAA subject review in art and design in 2000; a developmental engagement of media provision in 2004, and the FdA (Fashion) was scrutinised as part of the national review of FDs in 2005. The Institute was inspected by Ofsted during 2003-04 and a third institutional review was conducted by the then Surrey Institute in October 2004. The BA (Hons) Animation Production degree has been accredited by Skillsset, the Sector Skills Council for the Audio Visual Industries. The Institute, together with the Bournemouth Media School of Bournemouth University, has been designated as a UK Screen Academy. The resulting external scrutiny reports of these various engagements indicate confidence in the work of the Institute, and confirm the appropriateness of the Institute's procedures for quality management and enhancement.

83 Reports resulting from external scrutiny are considered by the ISQ, and issues emerging are addressed through action plans. For example, the audit team saw an action plan arising from the developmental engagement. The ISQ routinely considers what progress has been made as a result of the formulation and

implementation of these action plans. As the Institute has moved to create one central institutional action plan the smaller action plans derived from external scrutiny have been incorporated in the composite institutional action plan.

84 Changes to courses and operations had been made as a result of reports received by the Institute. For example, following the developmental engagement the Institute had introduced a standard template for formal annual responses to external examiners. The response to the outcome of the University College's institutional review of the Institute had been discussed fully at the ISQ and the Academic Board before being communicated to the validating body. As a consequence of the institutional review a programme of staff development was put in place in order to improve staff understanding of the issues of comparability of student achievement across programmes and cohorts and of matters of academic planning. The audit team saw evidence that the Institute engaged fully with external scrutiny and valued the opportunities that external scrutiny provided to reflect on the progress being made as an HEI.

### **Student representation at operational and institutional level**

85 The SED stated that 'student involvement in the life of the Institute is designed to ensure that there are appropriate mechanisms to enable students to represent their views to staff'.

86 Students are represented at school, course and institutional levels. Elected Student Union representatives sit on the Board of Governors as well as on the Academic Board. Elected student representatives sit on course boards and school boards and students are involved as members of working groups.

87 The Institute does not have a system of staff-student liaison committees, but the audit team heard that students consider that their representation at course boards is regarded as an effective system for hearing student views. Emphasis is also placed by the Institute on the

informal opportunities for students to discuss issues with staff. The audit team found evidence of student involvement in Institute committees and learned of examples where student concerns had been acted upon and the results of action fed back to other students.

88 A further example of student representation is the practice whereby students are routinely involved as advisory panel members during the appointment of academic staff. The students are fully briefed on the correct procedures by staff from the Human Resources (HR) office, and they use an agreed format for questioning and feedback.

89 The SWS noted that 'students believe many of the course leaders and lecturers are unaware of how the course reps system should run'. Meetings with Student Union sabbatical officers, students and staff did not confirm this impression to the audit team. However, information about how to become a student representative is not currently provided in course handbooks or on the website. The team was told that students are informed of the opportunities for course representation during induction. Meetings with students confirmed their knowledge of the available systems. However, the team found that the systems of formal representation are not clearly signalled in the documentation given to students.

90 The audit team heard that training for student representatives would be carried out by the Students' Union very soon, and that a guidance booklet was currently being updated.

91 The audit team concluded that students are well represented throughout the Institute. Students have ample opportunities for their opinions to be heard and there are mechanisms for them to engage in the procedures for the assurance of the quality and standards of their courses. However, the team considers that it is desirable for the Institute to take steps to incorporate explicit information on student representation into course and Institute materials.

## **Feedback from students, graduates and employers**

92 The SED stated that 'The Institute particularly values the feedback it receives from students'. Students are invited to comment on their courses and on other services offered by the Institute. Each course team is required to respond to student feedback, and issues raised regarding any central service must be addressed by the relevant director.

93 Feedback is sought from students, graduates and employers in a number of ways. Since 1998, an annual SPS has been carried out within the Institute, and the data are used in the annual monitoring process. The survey examines courses as well as central services such as the library. The Students' Union produced its own report of the student experience in December 2004, the results of which were shared with the Institute. It is intended that this report will be repeated at three-yearly intervals. In 2004-05, final-level students were encouraged to participate in the National Student Survey and there was an above average response rate of 79 per cent.

94 Evaluation forms are issued to students at the end of each unit and issues raised are taken to course boards and then the results of deliberation are reported back to students by means of student representatives in timetabled meetings and by electronic means.

95 Students who met the audit team were satisfied that their concerns were heard and acted upon in a timely fashion. This was also true for graduates of the Institute who reported examples where their concerns had been heard and rectified. For instance, in response to student concerns, additional visiting lecturers had been provided for the Arts and Event Management course, and both current students and graduates spoke of the provision of additional learning resources. Students in the DAT meetings explained that the issue of inadequate space had been resolved following their criticisms.

96 At present there is no alumni association at the Institute although some courses maintain close informal links with their graduates. The setting-up of the Enterprise Pavilion with its business incubation units is beginning to establish another route by which graduates may maintain links with the Institute. The audit team noted the intention of the Institute to develop these links.

97 The Institute is proud of its links with employers and of the long-standing relationship between courses and the workplace. The strong emphasis on vocational relevance, professional standards and practitioner skills on the Institute's courses encourages links with industry. Many staff have previously been practitioners and some continue to practise within their relevant industries. There is evidence of employers providing input into course design (through their presence at validation events), and into the delivery of courses. There has been a history of effective informal links with employers; the development of Industrial Liaison Groups is encouraging more formal input. The audit team noted the strong links to industry evidenced by the list of Governors.

98 Direct feedback from employers is also gained by means of student work placements and student work experience. The work placement policy has recently been revised and employers provide direct feedback to the Institute. The audit team found that many students have the opportunity to undertake work placements or work experience, and that this relationship with professional endeavour is of benefit to students. The team notes the intention of the Institute to develop further its engagement with employers.

### **Progression and completion statistics**

99 In its SED the Institute explained that data on student progression and completion for individual units are considered initially by each Course Examination Board. Each Course Examination Board also considers the range of classifications achieved and compares this with previous achievement on the course. The ISQ then considers course achievement profiles

before confirming student results; it also considers Institute-wide data on retention and achievement and compares these with national achievement data. The ISQ is aware that the relatively small numbers of students on some courses can make variations from pattern appear greater and more important than, in fact, they are.

100 The further consideration of course, school and institute data (including cohort analysis) is part of the ACMR process (undertaken by the ISQ by means of the Annual Overview Report). The SED noted that, in order to improve this process, the use of national benchmarking data is being encouraged. The SED acknowledged that not all staff find it easy to analyse the data presented to them by the Registry, and is considering further training for staff in the analysis of data.

101 The audit team heard that the Registry has been using the new Strategic Information Technology System (SITS) in its admissions processes since November 2004, and that, before extending it in phases across the institution, the Institute is keen to ensure that staff are able to use the new system properly. Academic staff told the team that they were looking forward to the opportunity that SITS would provide for a more sophisticated handling of student achievement, progression and completion data at course level. Registry staff told the team that, although at present there was no explicit link between this data and Institute admissions policies, such a link might be possible as the use of SITS was extended and developed. Teaching staff confirmed that they were confident about the reliability of the data provided to them by central Institute units.

102 The SED evaluated trends for 2004-05, acknowledging a fall in the proportion of First and Upper Second class degree classifications to 58 per cent of graduating students (as compared with 63 per cent in 2003-04 and 66 per cent in 2002-03). The ISQ has noted this change and agreed that further investigation is necessary to determine influences on this fall in achievement.

103 In general, the audit team concluded that the Institute was making appropriate use of statistical data in the management of quality and standards, and was taking steps to ensure that staff make the most of the opportunities offered by the further development of its systems.

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

104 The audit team noted the comprehensive set of policies and procedures in place to manage and assure the quality of teaching staff. The HR Strategy is aligned with the Institute's mission and sets out the mechanisms and processes to support the quality assurance of staff in learning, teaching and assessment, and equality and diversity policies. Significant progress has been made in implementing HR policies and practices within the Institute, effectively led by the HR Department. The Director's Management Team takes an overview of the development and implementation of the HR strategy with the TLCD Committee paying particular attention to staff development matters.

105 The Institute sets out to recruit and develop high-quality employees with good qualifications and experience. A rigorous appointments process is in place, with clearly defined job descriptions, person specifications and appointment criteria. All part-time visiting tutors are interviewed prior to appointment. The audit team explored the involvement of students in the staff appointment process. For example, candidates are asked to present a lecture to a student panel that then reports its views to the appointment panel. The panel report is considered by the Institute to be a valuable input to the appointment process, and is also valued by students. The involvement of students in the staff appointment process is an aspect of good practice noted by the team.

106 The audit team found that the induction, buddying and mentoring arrangements for new staff, both full and part-time, are well established and are valued by staff. The importance of providing support to visiting lecturers, who account for 21 per cent of total

teaching hours, is recognised by the Institute. The Institute places emphasis early in the induction process on confirming responsibilities and setting performance management targets linked to the six-month probationary period.

107 The HR Strategy recognises that 'Effective performance management is a key to the future success of the Institute'. An annual staff development review (SDR) process was initiated in 2000 and revised in 2002. The SDR includes all full-time staff, with part-time and proportionate contract staff gradually being included within the scheme. The Institute affirmed to the audit team that this is a formal, and well-documented process, with achievements being recorded, performance reviewed, targets set and staff development needs being identified. The Institute was previously aware of the initial low level of staff engagement and staff confidence in the SDR system. However, the Institute has taken steps to ensure that there is a much higher level of participation (86 per cent in 2004-05), although the Institute also recognises that further support is needed to ensure that all staff participate.

108 Progress has been made on the implementation of a single pay spine and reward system incorporating all staff. This reward system is based upon the Hay job evaluation method. The audit team noted the opportunities for internal promotion, for example, from senior lecturer to principal lecturer and from technician tutor to senior lecturer. However, the arrangements for progression within a scale, including accelerated promotion, were less well understood by staff. The team also noted that the HR strategy does not make specific reference to promotion although the recent creation of new principal lecturer posts, with wider appointment criteria, and also the designation of technician tutors are two developments that demonstrate that progress is being made in this area. The Institute recognises the importance of developing new reward and recognition arrangements within the move to a single pay structure.

109 The audit team explored the role of technician tutors who support students and

demonstrate techniques within specialist areas. The designation of the role of the technician tutor reflects the Institute's awareness of the need to ensure that the staffing profile is responsive to changing needs and circumstances to the benefit of students. The creation of the role of technician tutor was noted by the team as an area of good practice.

### **Assurance of the quality of teaching through staff support and development**

110 The principles of and entitlements to staff development are set out in the Institute's Staff Development Policy (2004), with a programme of activities published annually. Staff development is broadly defined and includes support for taught postgraduate courses, research degrees and conference attendance. The Institute's approach to staff development is built around a cycle of identification of needs, planning staff development activities, implementation and evaluation. The audit team considered that Institute-wide priorities are clearly set out in the Staff Development Policy.

111 A central budget for staff development is managed through the Research, Scholarship and Staff Development Allocation Group (RSSDAG). The RSSDAG receives individual applications for support, and decisions are informed by the quality of the application and the priorities of the Institute. In addition, Institute-wide staff development events are held regularly. A recent QAA developmental engagement noted 'staff development opportunities are a strong feature of the Institute', a view confirmed by the audit team. Staff confirmed the good availability and relevance of staff development programmes and the support provided. However, the team noted that in meetings with staff there was some evidence of a lack of awareness of institute-wide staff development priorities.

112 There has been a strong emphasis by the Institute on ensuring that staff are familiar with the interests and categories of audit in higher education. There has been encouragement for staff to engage in external scrutiny activities such

as external examining. The audit team found that staff were conversant with the processes of external scrutiny and audit, and that this aspect of staff development had been effective.

113 The institutional review undertaken by the University College in October 2004 noted that the staff development programme did not specifically address the issues of research capability or the support which would be required to deliver new postgraduate taught programmes. Since this review, a new Research and Scholarship policy has been approved, and a target has been set for 35 per cent of teaching staff to be engaged in research and scholarship at national level by the end of July 2006, and 45 per cent by 2007. The growing commitment of the Institute to supporting research and scholarship was confirmed by the audit team in meetings with staff. Senior management are aware of the need to manage staff timetables in order to create the opportunity to undertake research and scholarship. The Institute will support this initiative through an analysis of workloads.

114 An in-house teacher training programme is provided by the Institute. This is the Professional Graduate Certificate in Education/Certificate in Education, and has been operating since October 2003. Newly appointed staff with no teaching qualifications are required to take the course and all existing members of teaching staff who are not members of the Higher Education Academy will be required to take it within the next three years. Technician tutors are also encouraged to enrol on the programme. In 2004-05, 65 per cent of members of higher education staff at the Institute had a teaching qualification, were working towards one, or were members of the Higher Education Academy.

115 A teaching peer observation system operates across the Institution. The scheme has evolved and, as well as giving valuable feedback to staff, provides an opportunity to share good practice. In some parts of the Institute, fuller engagement in the process has not yet been completed.



116 There is a high level of commitment to staff development by senior management, as evidenced by the level of resource commitment and the high value placed upon it by staff. In the latest staff survey, 90 per cent of staff approved the level of support for staff development. The audit team concluded that staff development was clearly aligned to the strategic development of the Institute and had evolved to reflect changing needs and priorities. The provision of staff development and links to the strategic priorities of the Institute, in the view of the team, represent good practice.

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

117 The Institute has a single campus and no present collaborative provision. Its distributed and distance methods of teaching are confined to its virtual learning environment (VLE).

118 The Institute has introduced the VLE within the past three years. Its use has been slowly developing across the Institute. A funded project was used to provide a 'VLE champion' whose role has been to demonstrate the potential of the VLE. Although the funding for the project has ended, the work of VLE promotion is continuing. The audit team reviewed documentation and met staff who have been involved in the development of the VLE. The staff seen were enthusiastic and committed to the future use of the VLE but the team did not find evidence of a clear institutional strategy for its use within the Institute. The team heard that all courses would be expected to use the VLE in the future, but that use will not be standardised. At the present time some courses, such as the PGCE, are utilising the VLE as a communication tool while others, such as Graphic Design and Interactive Media have developed its use more fully. The team encourages the Institute to consider a more strategic overview, with a clear strategic direction of the development of the VLE, including setting specific targets.

119 The audit team concluded that at this early stage of development appropriate mechanisms are in place to assure the quality of its VLE but that it would be desirable to include the VLE within the development of an Institute-wide IT strategy.

### **Learning support resources**

120 The SED stated that the Institute's resources are 'appropriate to support learning' and that planning for resources is well integrated into its quality assurance systems through consideration at validation and periodic review. Review events, including the institutional review, had confirmed that resources were fit for purpose.

121 The Institute has had a Learning Resources Policy since 2000. The Policy was last reviewed in March 2005 by a subgroup of the Learning Environment Committee. Resource needs are assessed each year at course level by means of discussions that include the Director of School, and subsequently taken to representatives of The Information, Technology and Communication service to discuss school needs. The Library Strategy was produced to reflect and determine the changing needs and direction of the library. The Library Strategy Committee implements and monitors the Strategy. An important aspect of the strategic direction of the library is its use of subject librarians who are full members of course boards, and the audit team recognised this as good practice.

122 In the SWS and in meetings with the team, students expressed satisfaction with the resources available to them to support their learning. In particular, they were very enthusiastic about the Library, and this resource also scored highly in the SPS.

123 Students had previously identified an issue about insufficient specialist workspace, but students who met with the audit team gave assurances that the issue had been addressed and that more space had been provided.

124 On the matter of information technology (IT) provision, the students met by the audit team were positive and reported general

satisfaction with levels and type of provision. The SED noted a student demand for more computers, but in meetings with the team students gave examples of IT needs being met and improved in a timely fashion and did not report dissatisfaction. Similarly, the SWS identified some issues of student dissatisfaction with IT staff, but this was not confirmed by the students who met the team.

125 The audit team noted that there are very different needs for courses, some requiring much specialised software packages and hardware. The Institute has a policy of 'cascading' IT resources that are no longer sufficient for the needs of specialist courses, so that 'high-specification equipment and specialist software can be supplied to courses as needed'. The team concluded that the Institute has made determined efforts to fulfil IT needs.

126 The audit team found that library is well resourced and that there is a clear system for identifying needs and determining levels of provision. The use of subject librarians is helpful to learning: subject librarians attend course boards and are seen as a part of the course team. They liaise effectively with academic staff to identify needs.

127 The audit team concluded that appropriate mechanisms are in place to assure the quality of its learning support resources. However, the team also noted the varying views around IT provision and IT staff. The team recommends that it is desirable for the Institute to keep its IT provision under review within the development of a general IT strategy.

### **Academic guidance, support and supervision**

128 In the SED, the Institute outlined its support for students by reference to its Student Support Policy. This provides an overview of the ways in which students are given academic guidance and support at the time of application, during induction and throughout their careers.

129 The SED explained that quality is assured, monitored and enhanced through the work of the TLCD. For example, in 2004, a Code of Ethics was introduced as a result of discussion of guidance on confidentiality brought to this committee. The Institute considers its student support services to be good, although it acknowledged that more work needs to be done to ensure that the service is perceived by students as an integrated one.

130 The Institute's Learning Support Policy states that it 'recognises that all individuals may require support at any time in their career and that an ethos based on tolerance and advocacy of individual learning styles will enable all students to fully exploit their talents'. This statement defines the Institute's provision and outlines the principles upon which it operates. Academic staff are provided with a Tutor Guide, which outlines the services available to students and familiarises tutors with the arrangements and processes to be followed.

131 At induction, students are introduced to support services and undergo a 'quick-scan' screening process, administered by the Learning Support Unit. This is designed to assess learning needs, including those needs that may require additional support, such as dyslexia. Most support services are provided by the Student Advice Centre (SAC).

132 The Institute does not have a formal system of personal tutoring, preferring a system of academic tutoring through timetabled meetings. These academic tutorials are regularly timetabled and held; records are kept, signed and dated by the student and tutor.

133 As well as timetabled tutorials held by unit leaders, students are able to approach other members of academic staff and technician-tutors. Some courses favour a system of support by year tutors, while one course has introduced a personal tutor system. The audit team met students who praised the level of support they had experienced as well as the accessibility and openness of the staff. International and mature students met by the team expressed satisfaction that their needs were catered for in the same

manner as their UK colleagues. The team found that tutors, including course leaders, appeared to be generally available to students who can usually meet them for advice on their progress and for oral and written feedback on their assessments.

134 The Institute Learning, Teaching and Assessment policy, which was revised in June 2005, sets out the principles for feedback to students and there is a pro forma for written feedback in the Academic Quality Handbook for Higher Education. Through their representatives on course boards, students are able to discuss levels and types of support provided and the audit team found evidence that written feedback had been raised as an issue, discussed and acted upon.

135 Buddying and mentoring systems are also in place to encourage students to support and advise each other. Students who met the team were positive about the benefits of these schemes for supporting their academic development. A peer evaluation scheme has been piloted, largely to help students understand the grading matrix.

136 Technician tutors are a valued source of support for students. Their role is clearly differentiated from that of lecturing staff in that technician tutors do not assess work and the team found that staff and students were clear about this demarcation. Technician tutors are present in workshops and studios; in addition, they tutor groups and individuals. Their contribution to student support and to an integrated approach to learning was seen as evidence of good practice by the team.

137 The audit team found that there has been a long tradition of informality in providing academic support for students, which can work effectively. The high retention rates provide evidence that support mechanisms are largely effective. However, the team also found variability of practice in the systems that are in place for academic support, with local differences meaning that the first point of contact for students can vary. These variations do not guarantee equality of access for all students and the more informal systems of

support may be difficult to sustain in the light of growing student numbers. Given the variety of means by which students may access support, the Institute may wish to consider developing more consistency of practice.

### **Personal support and guidance**

138 In the SED, a centralised system of support services for students was described and evaluated. The SED stated that 'the Institute has well-structured arrangements to provide welfare and pastoral support, which is coordinated through the Student Advice Centre'.

139 The SAC is the locus for all aspects of personal support and guidance for students and includes disability support, financial advice, counselling, careers advice, accommodation information and advice and a chaplaincy service. As well as providing direct support to students, the SAC plays a role in raising staff awareness on such matters as mental health and disability issues. It also trains staff in matters of policy and legislation changes.

140 In addition, the SAC is the first point of contact for student complaints. The Institute has a Student Complaints Procedure, which was revised in 2004-05 to take account of best practice. The SED stated that the Institute was disappointed by the SPS, which reported that only 65 per cent of students were aware of how to raise a complaint. The Complaints Procedure is explained to students during induction, and published in the Higher Education Regulations as well as in the Student Guide. The majority of complaints are resolved informally, sometimes by students discussing issues with a member of academic staff.

141 The Careers Service operates centrally to offer guidance to students. However, given the nature of many of the Institute's courses, it is common for students to gain advice and guidance more locally, through their academic tutors, by means of common units in Professional Studies and by the interaction with employers gained in work experience or work placements. The relatively low take-up of individual appointments with the Careers Service, has led to a 'non-users survey' being

undertaken in order to understand the reasons for this. The audit team noted this initiative and the Institute's intention to review the Careers Service in the context of the rise in student numbers.

142 The Institute has an Equality and Inclusivity Committee (EIC) reporting to Academic Board. The EIC includes three groups: the Staff and Student Race Equality Group, the Widening Participation Sub-group and the Disability Focus Group. Information about the Equality and Inclusivity Policy and about how to complain about discrimination, is widely available at the Institute and on the website.

143 Student Services are reviewed annually, and the outcomes and actions are evidenced through the ASMRs by service providers. The annual academic course monitoring reports (ACMRs) also include a comment on student support. The Institute also reviews the effectiveness of its policies, including the Student Support Policy through the SPS, the Learning Support and Counselling questionnaires and through informal student feedback.

144 The audit team examined a range of publicly available information for students and staff, discussed policy and practice with staff, and tested students' perceptions of the personal support systems in place for them. They formed the view that students are presented with a comprehensive range of information orally, on paper and on-line, and that they are generally able to access personal and welfare support when needed. However, although the central services are well established, there is some conflation of the support offered by academic staff on courses and the welfare support offered by staff in the SAC. Students are not always clear which is the most appropriate forum for personal support.

145 The audit team concluded that there is a good range of personal support and guidance available to students as well as an abundance of information. However, the team recommends that it is desirable for the Institute to formalise the practice for the provision of academic and personal support arrangements to ensure consistent and equitable treatment of students.

### **Collaborative provision**

146 At the time of the audit there was no collaborative provision led by the Institute. In 2002, the Institute had developed a Foundation Degree in Professional Garden Design, in collaboration with, Kingston Maurward College, Dorchester. This course operated for one intake but having satisfied local demand was discontinued. The accrediting body, the then Surrey Institute, now the University College, had assured itself that this partnership arrangement had been governed by an appropriate Memorandum of Understanding before validating the degree.

147 The International Development Unit is currently exploring the potential for developing collaborative partnership arrangements with overseas institutions, including possible articulation arrangements for advanced standing. The Institute is aware of the need to formalise such arrangements in accordance with the *Code of practice*.

## **Section 3: The audit investigations: discipline audit trail**

### **Discipline audit trail**

#### **Creative arts and design**

148 The scope of the DAT comprised the BA (Hons) Illustration (in the School of Art) and the BA (Hons) Costume for the Screen and Stage (in the School of Design). The basis of the DAT was a DSED covering each course and documentation for the periodic review of each, including ACMRs, the report of the periodic review, the responses of the course teams to their reviews, and course handbooks (including programme specifications). The programme specifications for both courses were clear and comprehensive, reflecting the outcomes of the FHEQ's level descriptors and the relevant subject benchmark statements.

149 Progression and completion data for both courses were available to the audit team. These data are addressed by the course teams

through their respective ACMR process. The team noted that the School Board of the School of Art identified in its response to the 2003-04 Quality Assurance Action Plan a high incidence of referrals for BA Illustration students in the Research Project Preparation Unit, and that the Course Examination Board had agreed that further work needed to be done to support students in this unit. The team found in its meeting with Illustration staff that that they were aware of these statistics and were taking action to address the issue. The team also saw evidence that individual units in both courses were closely monitored, particularly with respect to student feedback.

150 The audit team reviewed external examiners' reports and concluded that these were dealt with in an appropriate and timely fashion, in accordance with the Institute's requirements. The reports are considered as part of the ACMR process for both courses, with action points identified that feed into the Quality Assurance Action Plans for the respective schools.

151 The audit team found that both course teams observe the Institute's assessment strategies and policies, particularly with respect to double marking (as articulated in the Institute's Learning and Teaching Strategy). The team noted that the course team's use of peer assisted learning was commended in the January 2004 periodic review of Costume for Screen and Stage as interesting and innovative and endorsed the opinion given in the periodic review. Students involved in peer-assisted learning spoke positively of their experience to the team. Peer-assisted learning is undertaken as an option by a small number of students each year on the Specialist Practice and Final Major Project units. Final-year students are given the opportunity to teach (although not assess) first-year students, or to teach secondary pupils in a local school with which the Institute has a widening participation arrangement. Peer-assisted learning was developed by the course team partly in order to meet the needs of students interested in a career in teaching, and partly as a response to the growing size of cohorts.

152 Peer-assisted learning takes place alongside costume work and is defined in a Learning Agreement which sets out the balance of what a student will do within the unit (peer assisted learning can count for up to 30 per cent of the assessment weighting for that unit). In reviewing the course documentation, however, the audit team considered that the assessment requirements for peer-assisted learning should be tied more explicitly and securely to the learning outcomes of the respective units, and that the course team should ensure that such assessment (which involves a reflective journal to be kept by the student, and observation of the student's work with other students in class) was at the appropriate level.

153 The audit team viewed a range of assessed work and, in general, was satisfied that the nature of assessment met the expectations of the relevant programme specifications (and associated subject benchmark statement). The team was able, as a consequence, to confirm that the assessment and achievement of students were appropriate to the titles of the individual awards and their place in the FHEQ.

154 Students are supplied with comprehensive handbooks, which have been developed in accordance with guidelines in the Academic Quality Handbook. They contain full descriptions of individual units and safety advice on working in studios and workshops. Students told the team they find these handbooks clear, helpful and exhaustive.

155 Students on both courses spoke warmly of the teaching and support offered to them and of the quality of the learning resources, particularly the library. Student satisfaction with such resources is monitored through unit evaluation. Neither course offers a formalised system for personal support, although students on both courses believed they could find advice on such matters readily and easily from academic staff. The Costume course operates a mentoring and 'buddy' system for students to support each other, and students spoke approvingly of its benefits. Students on this course had also taken part in the peer-evaluation component and said

that they had found it useful in helping them to understand and apply the Institute's grading matrix to each other's work (although their judgements did not form part of the formal assessment requirements for a particular unit).

156 Students on both courses believed that their views were listened to, and were happy with the formal process by which they were represented on the respective course boards. However, neither set of students was aware of the details of the process by which course teams analysed unit evaluation data and identified matters for action as a consequence. Despite this, students were confident that the process worked well in ensuring their views were canvassed and acted upon. The audit team was able to examine course board minutes to confirm that student representatives attended meetings and took an active part in their deliberations where appropriate.

157 Overall, the audit team was satisfied that the standard of student achievement in the courses covered by the DAT is appropriate to the titles of the awards and their location in the FHEQ, and that the quality of learning opportunities is suitable to the courses of study examined, leading to the named awards.

## **Section 4: The audit investigations: published information**

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

158 Information is made available to students in a variety of ways including via the Institute's website, the intranet, published documentation and information given to applicants and students. Additional information is provided for international students, via a dedicated part area of the website, and to students with disabilities. Handbooks, regulations, policies and procedures are increasingly available on the Institute's intranet and some course tutors are making increased use of the VLE to communicate with students.

159 Current and former students were satisfied with the accessibility and quality of the information provided by the Institute. They considered that the information provided to them about their courses and the wider support services was helpful and accurate. The SWS expressed concerns about the lack of clarity of pre-enrolment information on the level of course material charges and the Institute has acted upon this by issuing clearer guidelines for 2005-06 entrants. Students confirmed this improvement when meeting the audit team.

### **Reliability, accuracy and completeness of published information**

160 The Institute's Directory (prospectus) is published annually and contains summary details of each course offered. General information about studying at the Institute as well as course specific information is provided during open days. The Institute's website provides a range of information and advice for both prospective and current students. The audit team heard that in a recent survey of HEI websites the Institute's website was ranked by users as the eighth best site. The team confirmed the competent construction and content of the site, finding the website to be accessible and user friendly.

161 The audit team noted from both the Directory and the Institute's website that new taught postgraduate courses, starting in 2006, were being advertised but that this form of advertising failed to indicate that these courses had not yet been approved. Although a poster used in recruitment included for these courses a statement 'subject to validation' this condition appeared in a very small font as a footnote. The team advises the Institute to take timely action to ensure that the validation status of all courses is clearly indicated on all information.

162 New students receive a formal induction during their first week. The induction includes contributions from the Student Union, Student Support Services, the library and information on IT protocols. These briefings are supported by documentation, including a student guide, issued by the SAC, and a library guide. Course and unit handbooks are also provided to all students as

well as a copy of the Higher Education Regulations and Undergraduate Course Framework (including details of appeals, complaints and disciplinary arrangements). The absence of a contents page in the Student Guide was noted by the audit team.

163 The information provided to students was found to be wide-ranging and detailed, although it was noted by the audit team that there was no reference to the course representation system in either the Student Guide or course handbooks. It would be desirable for the Institute to take steps to ensure that the arrangements for student representation are included in Institute documentation for students.

164 The Institute indicated that progress has been made in addressing the national Teaching Quality Information (TQI) requirements. The Institute's Learning and Teaching Strategy has been placed on the national TQI website, together with a statement on how employers' needs and trends are identified. These statements are clear and accurate. At the time of the audit visit the following subject level data were accessible on the TQI website: entry qualifications based upon Higher Education Statistics Agency's data for 2003-04 and results of the national student survey with an Institutional commentary. The audit team was advised by the Institute that the format and content of internal review reports and external examiner report summaries for 2004-05 had been agreed and deposited with the managers of the TQI HERO website although at the time of the audit these materials were not publicly available on the TQI site. However, the team was able to confirm the accuracy of the material provided to HERO.

## Findings



## Findings

165 An institutional audit of The Arts Institute at Bournemouth (the Institute) was undertaken during the week 24 to 28 October 2005. The purpose of the audit was to provide public information on the quality of the Institute's programmes of study and on the discharge of its responsibility as a UK degree-awarding body. As part of the audit process, according to protocols agreed with the Higher Education Funding Council for England HEFCE, the Standing Conference of Principals SCOP and Universities UK UUK, one audit trail was selected for scrutiny at the level of an academic discipline. This section of the report of the audit summarises the findings of the audit. It concludes by identifying features of good practice that emerged from the audit, and recommendations to the Institute for enhancing current practice.

### **The effectiveness of institutional procedures for assuring the quality of programmes**

166 In 2004 the Institute was granted accredited status by its validating body, the University College for the Creative Arts at Canterbury, Epsom, Farnham, Maidstone and Rochester (the University College), successor to The Surrey Institute of Art and Design. The Institute affirms that this recently granted accredited status recognises the maturity of the Institute and the development of its relationship with the University College. The accredited status grants significant autonomy to the Institute over its own validating, monitoring and review procedures. As a compact institution the Institute has decided to maintain central management of the quality framework through the Deputy Principal working together with the Director of Academic Services and the Directors of School. However, the Institute also has encouraged staff ownership of quality monitoring processes. The recently created Directorate of Academic Services and the Academic Development Unit are playing an increasing role in the operation of the quality assurance system.

167 The Academic Quality Handbook for higher education provides a central point of reference on the Institute's expectations and the procedures to be followed in order to implement quality assurances in programme approval, monitoring and review. The Undergraduate Course Framework and HE Regulations form the basis for the design, operation and award of all the Institute's undergraduate provision at the validated by the University College.

168 The approval of new programmes involves the senior level of management in the Institute to ensure that the proposals are consonant with, and will contribute to, the Institute's mission and strategic objectives. For validation and review, detailed preparation of proposals is undertaken at school level and systems are in place to ensure that resource implications are carefully considered. There is a strong element of externality in the validation/review process through the involvement of qualified and experienced academics and professionals. The Directorate of Academic Services is responsible for the administration of validation events, and outcomes are reported to the Institute Standards and Quality Committee (ISQ) and the University College.

169 The Institute's quality policy requires agreed standard reporting on matters of quality assurance and enhancement. Academic and service areas follow parallel processes for annual monitoring and review. The process for academic provision involves the course leaders in producing an annual course monitoring report (ACMR) which reports on all aspects of the course. The ACMR is drawn up in accordance with a standard pro forma. Prescribed information sources are identified and the report must comment specifically on student data provided by the Registry. Course boards are required to develop a quality assurance action plan and report on progress with the previous action plan as part of the annual monitoring process. The Institute has implemented a system of cross-reading of ACMRs by staff from other schools prior to the submission of reports to school boards. After

consideration of the ACMRs each school prepares and submits an overview report and school quality assurance action plan to ISQ. The issues emerging from the annual monitoring process across the Institute are drawn together by the Deputy Principal as chair of ISQ into an overview report and into an institutional action plan for submission to the Academic Board and the University College Academic Policy, Quality and Standards Committee (APQS).

170 The Institute's process of action planning has given rise to a considerable number of action plans arising from internal monitoring and external scrutiny. The Institute recognises that progress of actions points is difficult to monitor across the various plans, and has consequently put in place a composite action plan. The plan will be available in electronic format that will facilitate the recognition of duplication of issues and the tracking of progress.

171 The audit team concluded that the Institute's arrangements for managing quality and standards are generally fit for purpose and consistent with good practice in the sector. The Institute has established effective systems for the provision of information relating to quality and standards with clear and comprehensive handbooks and further information available on the intranet. The team acknowledges that some procedures are relatively new since they emanate from the recent change to accredited status. The Institute has recognised that these procedures will require review. The academic plan for 2005-08 identifies as an academic priority the further development and implementation of procedures for academic standards and quality to reflect the increased autonomy granted to the Institute as an accredited institution of the University College.

172 The audit team considered that broad confidence can be placed in the soundness of the institution's current and likely future management of the quality of its academic programmes.

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

173 At the Institute, external examiners play a key role in securing academic standards. External examiners are nominated by course teams and have to be approved by ISQ before their names are submitted to the University College for its approval. These external examiners are senior academics or practitioners who are able to compare student achievement with that on other courses nationally. All external examiners are invited to an induction by the Institute, as well as by the University College, before taking up their role, and are issued annually with an external examiners' handbook which sets out the external examining process and relevant regulations.

174 External examiners see a sample of work, normally 20 per cent of all student work at levels 2 and 3, and are asked to confirm that marking standards are consistent and appropriate. In their report template they are asked to comment on that appropriateness with reference to national subject benchmarks and the national qualifications framework; they are also asked to comment on the structure, organisation, design and marking of assessments, and on the coherence of the policies and procedures relating to external examiners and the conduct of the examination boards and examination process.

175 When external examiner's reports are received by the Institute, they are annotated by the Deputy Principal, and passed to course teams for comment. The reports are formally considered by course teams in each ACMR process, with matters for attention and action noted in the Quality Action Plan. ISQ also receives an overview report on external examiners' reports.

176 The Institute also holds external examiners' meetings during their visits, where external examiners are asked to comment on the consistency of standards and to discuss parity of process. The SED also notes the intention to devolve this meeting of external

examiners to schools, and the audit team learned that it is envisaged that the meeting should primarily have an enhancement function. The team encourages the Institute to take the opportunity presented by this meeting for external examiners to discuss comparability of student achievement across the school, as well as parity of process.

177 The audit team was able to confirm that the *Code of practice for the assurance of academic quality and standards in higher education, (Code of practice)* published by QAA, with respect to external examining was followed by the Institute. Overall, the team came to the view that the Institute's procedures for securing and considering the views of its external examiners are thorough and work well at course and Institute level. The audit team considered that broad confidence can be placed in the soundness of the institution's current and likely future management of the academic standards of its awards.

### **The effectiveness of institutional procedures for supporting learning**

178 The Institute, through its SED, indicated its commitment to student centred learning and to its focus on support for students from the time of the initial application, during induction and throughout their careers at the Institute. Support for learning includes a well-stocked Library, a good range of paper-based and electronic information materials, including those being developed on the virtual learning environment (VLE), an effective induction process, dedicated specialist information technology (IT) facilities and specialist workshop space. Academic and pastoral support is provided at both Institute level via a central Student Advice Centre and at course level by interactions with tutors.

179 Effective management of learning support resources is generally ensured by embedding strategic planning for such resources in the Institute's committee structure, with central oversight as well as input and feedback from course level, including feedback from students. Several mechanisms are used to coordinate course and school-level needs with the strategic

direction of the Institute. An example of this is the role of the subject librarians as members of course boards. The audit team confirmed the Institute's view that learning support for students is generally fit for purpose, but encourages the Institute to develop a more explicit IT strategy, including reference to the strategic direction of the VLE.

180 Academic and personal support is informed by the Institute's Student Support Policy and its Learning Support Policy. Students can gain academic support from their course tutors, including unit leaders and course leaders. The Institute does not have a personal tutor system but provides a variety of arrangements both formal and informal by which students may seek support. These include buddying and mentoring by fellow students. Pastoral and welfare support is centrally provided through the Student Advice Centre which encompasses a range of services including support and advice on careers, counselling, disability, finances and accommodation. Students can also access a chaplaincy.

181 Students confirmed to the audit team that their academic and pastoral needs are being met, and were very enthusiastic about the quality of support that they receive from the staff. The team found that students knew about many of the services available but were unclear about whether academic tutors or specialist staff might be the most appropriate point of initial contact. The team concluded that the Institute might wish to consider looking at ways in which greater clarity of information can be achieved.

182 The audit team found a number of processes by which students' views can be captured and by which students can be represented. These include the Student Perception Survey, representation on school and course boards, and on Academic Board and its sub-committees. The team noted the representation of students in staff appointment processes via the practice of including students as advisory panel members. Although there are ample opportunities for students to be represented, the team found that material outlining the processes of representation was

lacking. The team confirmed the Institute's opinion that there are appropriate mechanisms in place to enable students to represent their views to staff but suggests that information as to how this might be done is made more explicit in written materials provided to students.

183 Effective performance management of staff is embedded in systems of staff appraisal and performance review and informs staff development needs at the institution and individual levels. The annual staff development review process (SDR) includes all full-time staff with part-time and proportionate contract staff gradually being included within the scheme. The Institute continues to take steps to ensure that there is a higher level of participation in the SDR process.

184 The audit team explored the role of technician tutors who support and demonstrate within specialist areas but do not assess students. Technician tutors make a significant contribution to supporting learning. The designation and recognition of their role reflects the Institute's awareness of the need to ensure that the staffing profile reflects changing needs and circumstances to the benefit of students. This was noted by the team as an area of good practice.

185 The principles of and entitlements to staff development are clearly set out and are informed by strategic priorities. Staff development is broadly defined by the Institute and recently there has been a relative shift from the 'language of audit' to a stronger emphasis upon research and scholarship in support of plans to offer post-graduate courses for the first time. Staff development is well resourced by the Institute, and staff confirmed the strong support provided to them. The audit team noted that staff development was clearly aligned to the strategic development of the Institute and had evolved to reflect changing needs and priorities. The provision of staff development and links to the strategic priorities of the Institute represent good practice.

186 Completion of the in-house teacher training programme is a requirement for those staff without a formal teaching qualification or who are not members of the Higher Education Academy. Staff also receive support through a peer teaching observation system. This scheme has evolved over time and provides an opportunity to share good practice. However, in some parts of the Institute, whilst a fuller engagement in the process has recently occurred, equal engagement across all courses has not yet been achieved.

187 Overall, the findings of the audit team indicate that the Institute provides a comprehensive set of support and guidance services and that institutional procedures for supporting learning are in place.

## **Outcomes of the discipline audit trail**

### **Creative arts and design**

188 The scope of the discipline audit trail (DAT) comprised the BA (Hons) Illustration (in the School of Art) and the BA (Hons) Costume for the Screen and Stage (in the School of Design). The basis of the DAT was an self-evaluation document (SED) for each course and documentation for the periodic review of each, including ACMRs, the report of the periodic review, the responses of the course teams to their reviews, and course handbooks (including programme specifications). The programme specifications for both courses were clear and comprehensive, reflecting the outcomes of *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ) level descriptors and the relevant subject benchmark statements.

189 Progression and completion data for both courses were available to the audit team. The team also saw evidence that individual units in both courses were closely monitored, particularly with respect to student feedback.

190 The audit team reviewed external examiners' reports and concluded that these were dealt with in an appropriate and timely fashion, in accordance with the Institute's requirements.

191 The audit team found that both course teams observe the Institute's assessment strategies and policies, particularly with respect to double marking (as articulated in the Institute's Learning and Teaching Strategy). The team noted that the course team's use of peer assisted learning was commended in the January 2004 periodic review of Costume for Screen and Stage as interesting and innovative, and endorsed this view.

192 Students are supplied with comprehensive handbooks. In reviewing the course documentation, however, the audit team found that the assessment requirements for peer assisted learning should be tied more explicitly and securely to the learning outcomes of the respective units, and that the course team should ensure that such assessment was at the appropriate level.

193 The audit team viewed a range of assessed work and, in general, was satisfied that assessment was properly conducted, and that it met the expectations of the relevant programme specifications (and associated subject benchmark statement).

194 Students on both courses spoke warmly of the teaching and support offered to them and of the quality of the learning resources, particularly the library. Student satisfaction with such resources is monitored through unit evaluation. Students on both courses believed that their views were listened to, and were happy with the formal process by which they were represented on the respective course boards.

195 Overall, the audit team was satisfied that the standard of student achievement in the courses covered by the DAT is appropriate to the titles of the awards and their location in the FHEQ, and that the quality of learning opportunities is suitable to the courses of study examined, leading to the named awards.

### **The use made by the institution of the Academic Infrastructure**

196 The SED noted that the Institute recognises the significance of the national Academic Infrastructure for the HE sector, and welcomes

the opportunity that it provides to demonstrate consistency within the Institute, and with other higher education institutions (HEIs).

197 The SED recorded the Institute's awareness of the potential for undue complexity and unnecessary burden that responding to the *Code of practice* at school level could place on a relatively small HEI. In consequence, the Institute has adopted a central approach to its consideration of the *Code*, based on the principle that its general policies and procedures for use at all levels should reflect the *Code*. Staff are then expected to follow Institute practice and not make additional reference to the *Code*. The general approach has been for ISQ to establish small groups of relevant staff to identify where practice diverged from the *Code*'s intentions. ISQ has noted that, while some action was outstanding (for instance, with respect to the *Code, Section 10: Recruitment and admissions for part-time courses*), the intentions of much of the *Code* were well embedded within existing practice.

198 The consideration of course-level responses to the FHEQ level descriptors, and relevant subject benchmark statements, is tested through the validation and review process. External examiners are also invited to comment on the appropriateness of standards set for the award with reference to subject benchmark statements and the national qualifications framework. The comments of external examiners inform ACMRs.

199 In response to the requirement for programme specifications, the Institute developed a common template which applies to all undergraduate courses. Programme specifications are now published in courses handbooks and on the Institute's website. The SED notes that ISQ will review the programme specification pro forma in the light of QAA's intended revision of the guidelines on programme specifications.

200 Overall, the audit team considered that the Institute's response to the *Code of practice* has been considered and systematic, helping to promote sound practice. It also came to the

view that the various elements of the Academic Infrastructure had been used effectively by the Institute to set the standards of awards at the appropriate level and to provide pertinent points of reference.

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

201 The SED provided a detailed and accurate overview of the Institute's structures, processes, values and aspirations. It described the recent history of the Institute's relationship with its accrediting body and outlined significant developments in relation to quality reviews to date.

202 The SED reflected upon the Institute's ability to manage change, and it provided a considered critical analysis of its current quality assurance and enhancement systems. It identified a number of areas for further development and review. The SED stated that the Institute had confidence in its abilities to manage its own quality and standards as a mature specialist provider. The SED provided examples of the Institute's strengths.

203 The SED cross-referenced many of its statements to documentary evidence such as Institute committee papers and policies. It also provided a number of appendices, which were useful to the audit team in its investigations.

204 The Institute, through the SED, did not fully develop a commentary on some aspects of its work such as the appointment and promotion of staff and its progress in relation to the provision of information for publication. In these respects, the audit team found that the SED underplayed some of the Institute's strengths.

205 The audit team considered that the SED might have been fuller and more precise about some of the Institute's broad visions and strategies, for instance its general IT strategy, including the development of the VLE.

206 However, overall the SED and DSED together gave a sound and accurate picture of the Institute's processes and structures and provided confidence that the Institute had the capacity to reflect on its own strengths and limitations, and the ability to enhance quality and standards.

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

207 The Institute has identified a series of institution-wide enhancement initiatives linked to its strategic priorities and to the next steps in the development of the Institute. To take these enhancements forward there are mechanisms in place both in the annual academic planning and review cycle and in the longer term. Annual course and service monitoring are well embedded through the production of ACMR and annual service monitoring reports (ASMR). These reports were found by the audit team to be both reflective and developmental. The three-year Academic Plan (2005-08) and the Annual Action Plan take an institute-wide overview and ensure that plans and actions are coordinated. In its meetings with staff the team noted that the Institute's view of the importance of the full engagement of staff in the enhancement of quality and standards was clearly evident.

208 The audit team was interested to explore a number of locally generated enhancement initiatives cited. For example, in the BA (Hons) Costume for Screen and Stage a peer assisted learning scheme had clearly benefited those students who had participated. However, the team found no evidence of a comprehensive evaluation of this initiative. In other cases, for example, Peer Assessment, while there had been some evaluation by the Teaching Learning and Curriculum Development Committee, follow-up might have been stronger. To support the development of new enhancement initiatives, particularly those which are locally generated, the team considers it desirable that the recently established Academic Development Unit has more direct involvement in order to ensure fuller evaluation and development in accordance with the Institute's quality framework.

209 The audit team noted the recent

appointment of a National Teaching Fellow within the Institute and noted the intended use of internal teaching awards to encourage excellence in learning and teaching, to disseminate good practice and to provide staff development opportunities.

### **Reliability of information**

210 The Institute has made progress in addressing the [Teaching Quality Information] TQI requirements. Summaries are published on the Institute's learning and teaching strategy and on how employer needs and trends are identified. These statements were found to be clear and accurate. At the subject level the Institute has provided a commentary on the results of the national student survey. Information has been supplied to Higher Education and Research Opportunities for internal review reports and external examiner report summaries for 2004-05. These documents were found to be accurate in providing information on the quality of provision and the standards of awards.

### **Features of good practice**

211 The following features of good practice were noted in the Institute:

- i student involvement as advisers in teaching staff appointments (paragraph 105)
- ii the Institute's recognition of the contribution of technician tutors to student learning (paragraphs 109, 136)
- iii the provision of staff development linked to the strategic priorities of the institution (paragraph 116)
- iv the provision of library services, and especially the role of the subject librarians (paragraphs 121, 122).

### **Recommendations for action**

212 Recommendations for action that the audit team considers it advisable for the Institute to address are as follows:

- i taking timely action to ensure that the validation status of all courses is clearly indicated in all information for intending

students (paragraphs 161, 163).

213 Recommendations for action that the audit team considers it desirable for the Institute to address are as follows:

- i considering via the Academic Development Unit locally generated enhancement initiatives in order to ensure that these initiatives are evaluated and developed in accordance with the Institute's overall quality framework (paragraph 43)
- ii giving external examiners the opportunity to discuss across courses both the comparability of student achievement and the parity of assessment processes (paragraph 74)
- iii ensuring that the arrangements for student representation are included in Institute documentation for students (paragraphs 89, 91)
- iv giving priority to the development of an institute-wide information technology strategy (paragraphs 118, 119, 127)
- v formalising practice across the Institute for the provision of academic and personal support in order to ensure clarity of information, and consistent and equitable treatment of students (paragraphs 137, 144, 145)
- vi reviewing peer-assisted learning against the level and detail of intended learning outcomes (paragraph 152).

## **Appendix**

### **The Arts Institute at Bournemouth's response to the audit report**

The Arts Institute at Bournemouth welcomes the Quality Assurance Agency's report, and the expression of broad confidence in the soundness of its present and likely future management of the quality of its programmes and the academic standards of its awards. We also note with pleasure the confirmation that the courses considered through the discipline audit trail offer a suitable quality of learning opportunities, and that the standard of student achievement is appropriate to the title of the award and its location within the FHEQ.

We particularly welcome the examples of good practice identified. While these accord with our own views, informed through staff and student feedback, it is gratifying to receive additional confirmation from the audit team that appropriate steps are being taken to deliver against the Institute's strategic priorities.

We note the recommendations of QAA as articulated in the report. We shall consider the full report in detail and identify appropriate actions in response, which will be integrated within the Institute's Composite Action Plan.

The Institute thanks QAA for its professional approach to the Audit, and the thoroughness and thoughtfulness displayed by the audit team in reviewing arrangements for the management of standards and quality. We look forward to reporting progress against the actions arising from the audit in due course.



