



Institutional audit

Kingston University

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Preface

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

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

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

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

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

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

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

Institutional audit: report

Audit teams also comment specifically on:

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

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

Explanatory note on the format for the report and the annex

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

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

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

Summary

Introduction

A team of auditors from the Quality Assurance Agency for Higher Education (QAA) visited Kingston University (the University) from 6 to 10 December 2010 to carry out an Institutional audit. The purpose of the audit was to provide public information on the quality of the learning opportunities available to students and on the academic standards of the awards that the University offers.

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

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

Outcomes of the Institutional audit

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

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

Institutional approach to quality enhancement

The University has put in place mechanisms that have the potential to support a systematic and strategic approach to the enhancement of the student learning experience and the achievement of faculty and institutional objectives set out in the Learning, Teaching and Assessment Strategy. Nevertheless, the volume of business that the Quality Enhancement Committee has to consider and the length of time taken to address issues identified through the review process limits the effectiveness of the University's approach to quality enhancement.

Postgraduate research students

The audit team found that the University had sound institutional arrangements for its postgraduate research students, which meet the expectations of the *Code of practice, Section 1: Postgraduate research programmes*.

Published information

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

Features of good practice

The audit team identified the following area of good practice:

- the use of liaison officers in supporting collaborative partners and the strengthening of the role since the last collaborative provision audit.

Recommendations for action

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

The team advises the University to:

- ensure that where actions are identified as a result of internal or external quality assurance processes they are implemented in a timely manner
- review the effectiveness of the annual review and development process to ensure the appropriate monitoring of programmes at field/course level and the necessary oversight at institutional level, as specified in Section F of the Academic Quality and Standards Handbook
- consider whether the business of the Quality Enhancement Committee is sufficiently focused to allow it to fulfil its role in quality assurance as specified in its terms of reference.

It would be desirable for the University to:

- monitor the implementation of its new Admissions Policy and the involvement of staff in appropriate training.

Reference points

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

- the *Code of practice for the assurance of academic quality and standards in higher education*
- the frameworks for higher education qualifications in England, Wales and Northern Ireland, and in Scotland
- subject benchmark statements
- programme specifications.

The audit found that the University took due account of the elements of the Academic Infrastructure in its management of academic standards and the quality of learning opportunities available to students.

Report

1 An Institutional audit of Kingston University (the University) was undertaken during the week commencing 6 December 2010. The purpose of the audit was to provide public information on the University's management of the academic standards of the awards that it delivers and of the quality of the learning opportunities available to students.

2 The audit team comprised: Emeritus Professor B Anderton, Mr A Bagshaw, Dr P Bassett, Ms H Marshall, Professor D Meehan, Mr J Rowson, auditors, and Mrs S Gregory, audit secretary. The audit was coordinated for QAA by Mrs E Harries Jenkins, Assistant Director, Reviews Group.

Section 1: Introduction and background

The institution and mission

3 Kingston upon Thames has been a home for vocational and higher education for over a century. Today's institution, Kingston University, was formed in 1992 under the Further and Higher Education Act (1992) and is based over four sites. In 2010-11, there were over 22,000 students registered on courses leading to University awards, an increase of some 15 per cent since the last audit. Of these students, just over 19,000 were taking undergraduate degrees, 3,400 were on taught postgraduate programmes and 379 were research students. The University has approximately 4,500 students studying through 50 collaborative provision arrangements in the UK and overseas. It operates a Partner College Network with nine further education partners and also has arrangements with a range of other organisations, including overseas partners, specialist providers and private corporations.

4 The University is currently structured around seven faculties, one of which is a joint venture with St George's, University of London. A merger between three of the faculties into a single large faculty is currently underway and will begin operating in the academic year 2011-12.

5 The University's current Strategic Plan (2008-9 to 2012-13) is centred around four core areas: learning and teaching and the curriculum; research and enterprise; student experience; and management and organisation. The portfolios of the senior staff of the University are aligned to these areas to ensure that they inform all University activity. The Plan also identifies three cross-cutting themes: comprehensive scope, academic focus, and fitness for purpose. These themes cut across the core areas to ensure that they are strategically aligned. Progress against the Strategic Plan is reported to the Board of Governors at three-monthly intervals.

6 The mission of the University is to 'promote participation in higher education, which it regards as a democratic entitlement; to strive for excellence in learning, teaching and research; to realise the creative potential and fire the imagination of all its members; and to equip its students to make effective contributions to society and the economy'.

Developments since the last Institutional audit

7 QAA's last Institutional audits of the University, in 2005 and 2006 for on-campus and collaborative provision respectively, resulted in judgements of broad confidence in the institution's management of the quality of its programmes and the standards of its awards. The present audit team confirmed that the University had taken appropriate action in relation to both audits, but was concerned about the time taken to complete the agreed actions

arising from the 2005 Institutional audit, for example in relation to the development of assessment criteria (see paragraph 26), the timetabling of learning space (see paragraph 37), and the introduction of the revised appraisal scheme (see paragraph 41). The team concluded that while the University's procedures for considering and responding to issues raised by external quality reviews supported the formulation of action plans, they did not always ensure that actions were completed in a way that was timely. The University is advised, therefore, to ensure that where actions are identified as a result of internal or external quality assurance processes they are implemented in a timely manner.

8 Since 2005 the University has also participated in a number of other QAA reviews, including the Special review of research degree programmes (2006); an audit of an overseas partner in India (2009) and the Integrated quality and enhancement reviews (IQERs) of six further education college partners in 2009-2010. In all instances, the outcomes of the reviews were positive, consideration of the reports had taken place at the Quality Enhancement Committee, and appropriate action had been taken where needed.

9 The framework for managing academic standards and quality is set out in the Academic Quality and Standards Policy and operationalised through a number of key documents, including the Academic Quality and Standards Handbook, the Regulations for Taught and Research Degree Provisions, and the Learning, Teaching and Assessment (LTA) Strategy and related documents. Oversight of the framework is through the University's executive and deliberative structures. Academic Board, chaired by the Vice-Chancellor, has ultimate responsibility for quality and standards, although some authority is delegated to the Quality Enhancement Committee. Academic Directorate is the executive body with responsibility for the management of policies relating to academic affairs, course planning and academic strategy, and how these impact on the student experience.

10 Faculty committees consider issues related to the academic development, quality assurance and learning enhancement of taught programmes, and the quality assurance and enhancement of research degree provision. The precise structure and constitution of the committees vary from faculty to faculty in order to best meet local circumstances; nonetheless, the overall committee structure and functions at faculty level must fulfil the requirements set out by Academic Board. Some variance in practice is reported in subsequent sections of this report.

11 The audit team concluded that the University has an appropriate framework in place for the management of academic standards and the quality of learning opportunities.

Section 2: Institutional management of academic standards

12 The University has a wide range of mechanisms for assuring itself of the academic standards of its awards. These include procedures for programme approval, annual monitoring, periodic review of courses through Internal Subject Reviews and an Internal Quality Audit process. The latter is designed to review the quality assurance procedures delegated to faculties both as a matter of routine or when specific issues arise.

13 The Academic Quality and Standards Handbook provides a comprehensive account of the University's procedures for the management of academic standards. It includes various templates and guidance notes for use by staff. The audit team found the Handbook to be clear and well-written.

14 Proposals for new courses are generally initiated at school level and are then either validated centrally or by the faculty. University-level validations are conducted by a panel

that includes at least two external advisers, while faculty level validations may involve consultation with one external adviser in line with the *Code of practice, Section 7: Programme design, approval, monitoring and review*. The system is well understood by staff and conducted in accordance with the given procedure. Any conditions arising from a validation must be signed off by the Chair of the validation panel before the course may commence. This procedure is being operated correctly and the University has addressed earlier issues relating to consistency of practice in collaborative provision.

15 Amendments to existing courses can usually be approved at faculty level and it is a requirement that students are consulted; members of staff confirmed that this happened as a matter of course.

16 Annual monitoring requires module teams to produce an annual Module Review and Development Plan, which is then sent to the appropriate boards of study in each faculty. The audit team examined several Plans and found they varied considerably in the scope and depth of their reviews, with some offering little useful analysis of teaching and learning. This finding confirmed that of the University's own Internal Quality Audit of annual monitoring practice (2009-10).

17 Boards of study are also required annually to undertake a review of teaching and learning and update their development plan. The University's procedure is for these reviews and plans to be embedded within the agendas, papers and minutes of the meetings of the boards rather than as a single document. The audit team examined the minutes of a number of such meetings from across all faculties and found that the business of these meetings varied considerably and that many failed to conform to University processes. The team also found it difficult in many cases to identify any review of the effectiveness of teaching and learning or any obvious action plans. These failures and difficulties are confirmed both by the final report of a periodic review and by the University's own audit of its annual monitoring process.

18 Faculties are, in turn, required to monitor their boards of study and to submit an annual report to the Quality Enhancement Committee confirming that all annual review and development procedures have been completed. The audit team found that the relevant section had not been completed in a number of such faculty reports.

19 In the light of these acknowledged inconsistencies and omissions at module, boards of study and faculty levels, the audit team was unable to agree fully with the confidence expressed by the University that the extant annual monitoring processes are working well. The team recognised that the Quality Enhancement Committee and the Internal Quality Assurance report have made a number of recommendations to enhance the procedure. Nevertheless, the potential risk to standards led the team to advise the University to review the effectiveness of the annual review and development process to ensure both the appropriate monitoring of programmes at field/course level and the necessary oversight at institutional level.

20 The University has a well documented Internal Subject Review process based on a six-yearly cycle. Internal Subject Review panels have an appropriate level of independence and externality and are carrying out their remit thoroughly, producing comprehensive and useful reports, many of which are considered fully through the University's deliberative structures. Outcomes of the reviews are largely considered and responded in full by faculties. In one instance, however, the audit team saw faculty board minutes that merely noted that a review had taken place and contained no mention of the panel's recommendations, even though these included remedying the failure of the Board of Study to follow core monitoring procedures.

21 The University has robust external examining processes with appropriate procedures for the nomination, appointment and induction of examiners. Attendance rates at induction have been low in the past, but recent efforts by the University have seen rates rise to 69 per cent for 2009/10.

22 Annual reporting by external examiners is via an appropriate online template and oversight of these reports is undertaken by Academic Quality and Standards and the Academic Registrar on behalf of the Vice-Chancellor, with faculties required to respond to any issues of serious concern raised. New procedures put in place to give the Quality Enhancement Committee fuller oversight of the process are working well and the Committee is being kept informed routinely of outstanding external examiner reports. Boards of study are considering and responding fully to external examiner reports and it is through this route that reports are being made available to student representatives. The audit team encourages the University to assess the extent to which students make use of this mechanism in practice. Overall, the team confirmed that the University is conscientious in its use of independent external examiners and has arrangements that are effective in securing the academic standards of its awards.

23 The University is making effective use of the Academic Infrastructure and other external reference points, with courses mapped against *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ) and subject benchmark statements during the approval process. Programme specifications contain relevant information and are readily available on the University's website.

24 The University has a common set of academic regulations, although variations are allowed, for example to meet the requirements of professional, statutory and regulatory bodies. Any such variances are documented in programme specifications. The two tier system of assessment boards at module and programme levels are working effectively and all summative examinations are marked anonymously; the University is exploring how this might be extended to other forms of assessment. Evidence available to the audit team indicated that the requirement to return written feedback to students within four weeks is not being met consistently across faculties and that some students did not always find the feedback helpful. The University acknowledges these shortcomings and is placing greater emphasis on assessment issues. Students who the team met noted that significant progress has been made in addressing the timeliness of the return of assignments. The University has also responded proactively to the issue of plagiarism, raised by some external examiners and the student written submission, and has introduced a number of initiatives, including establishing a Plagiarism Awareness Week in conjunction with the Students' Union.

25 There have been two significant revisions to the undergraduate degree classification regulations since the last audit. In both instances the University had taken appropriate steps to inform students of the changes and ensure that no individual was disadvantaged. Clear and detailed guidance on the regulations is prominently available on the Student Portal of the University's website and students' attention is routinely drawn to this through student handbooks and guides.

26 The 2005 Institutional audit recommended that the University consider the development of assessment criteria for the benefit of students and assessors. The final guidance for staff was approved at the Quality Enhancement Committee in June 2010. This contributes to the team's recommendation in relation to the timeliness of implementing actions arising from external and internal quality assurance processes (see paragraph 29).

27 The University is making effective use of management information in assuring itself of the academic standards of its programmes and awards. Admissions, progression and completion statistics are considered routinely at module, faculty and institutional level,

although there is some variance of practice across the faculties. The introduction of the new management information system was seen as benefiting this process.

28 Overall, the audit team concluded that confidence can reasonably be placed in the soundness of the University's present and likely future management of the academic standards of its awards.

Section 3: Institutional management of learning opportunities

29 Operationally, the quality of learning opportunities is largely assured through the processes of external examining, validation, annual monitoring and Internal Subject Review, and the audit team saw clear evidence of these processes working effectively, although the completion of actions arising from the Internal Subject Review process was not always timely. In one instance, an issue relating to the standardising of feedback forms identified by the review panel had not been completed some 19 months after the review event and nearly two years after the external examiner had identified the issue originally. This, together with delays in the response by some fields/courses to actions required by the University's quality processes, leads the team to recommend as advisable that the University ensure that where actions are identified as a result of internal or external quality assurance processes they are implemented in a timely manner.

30 The University has embedded the elements of the Academic Infrastructure in its procedures and practices and reviews of each section of the *Code of practice* are undertaken by Academic Quality and Standards every two years; monitored by the Quality Enhancement Committee. The Academic Infrastructure and other reference points are used consistently by the University with course development and in the design of its policies and procedures for the management of learning opportunities.

31 The University provides a variety of opportunities for students to offer feedback on their learning experience, including module and institutional level surveys, annual reviews for postgraduate research students, national surveys, staff student consultative committees, faculty forums and representation at all levels of the University's committee structure. There is some variability in attendance by student representatives at faculty level meetings and the University is working with the Students' Union to address the issue. The University is also considering piloting the inclusion of students on Internal Subject Review panels.

32 At institutional level, the Student Experience Group receives and considers the outputs from all student satisfaction surveys (both internal and external) and is responsible for ensuring that appropriate action is taken and for feedback to be provided to students on the outcomes, for example, through the annual leaflets entitled 'What's new at KU'. Students were confident that their 'voice' was listened to. There is comprehensive and systematic use of National Student Survey results, with the findings disseminated for discussion at both University and faculty level committees. Actions in response to the Survey results are a requirement of the annual review and development plans for each field/course.

33 The audit team formed the view that, overall, the University's arrangements for student involvement in quality management processes are appropriate, and the way in which it engages with students contributes to the effective management of the quality of learning opportunities.

34 The link between research and learning opportunities is embedded in the University's curriculum design and review processes and is having a positive impact on the quality of learning opportunities. Faculties are required to produce an annual Learning, Teaching and Assessment Plan within which initiatives that link research and teaching are

described. Teaching Enhancement and Student Success funds are made available to support the plans. The Academic Development Centre produces a range of materials to support staff and curriculum development. The audit team formed the view that the University's approach to supporting research-led teaching is contributing positively to the quality of student learning opportunities.

35 The University's distance and distributed learning programmes meet the expectations of the *Code of practice* and make a significant contribution to the quality of students' learning opportunities. Although only small in number, appropriate mechanisms are in place to assure the quality and standards of these programmes. The University is leading a JISC-funded project, 'Mobilising Remote Student Engagement', which is hoped to further support such provision. The Masters Award by Learning Agreement Framework is the largest distance learning programme which, although specifically work-based, may also incorporate development activities in the workplace and taught modules. It received a positive outcome in its review by the University's Accreditation and Approvals Board in 2009-10.

36 The University's Campus Development Plan has seen significant improvements in the physical learning resources at the University, which have been welcomed by staff and students. The University's electronic resources are also well regarded and, in particular, students praised the way in which the learning resource centres responded to users' feedback.

37 While enhancements have been made to the extent and quality of learning resources, at the time of the audit there were still pressures on timetabled teaching space, an issue raised in the previous Institutional audit report (2005). In particular, students identified problems with timetabling for those on joint programmes or studying across the University's multiple campuses. The audit team encourages the University to pursue its review and implementation of a new timetabling system in order to maximise the use of the space available.

38 Admissions to the University are overseen by its central Student Admissions and Recruitment Committee, which receives and monitors statistical information relating to the admissions process. The University's commitment to widening participation is supported by the Academic Development Centre, which provides appropriate staff development activities. At the time of the audit, a new Admissions Policy had been devised, but not yet implemented fully, which seeks to reduce the inconsistencies in admissions practice across the University. The audit team concluded that it would be desirable for the University to monitor the implementation of its new Admissions Policy and the involvement of staff in appropriate training.

39 The Institutional audit report of 2005 identified the academic and pastoral support available to students at both faculty and institutional level as a feature of good practice. The current audit confirmed that the University continues to serve its students well in this regard. The Student Support Network brings together student support staff from across the University to share best practice. Faculty-based academic skills centres and employability coordinators were welcomed by students.

40 There is comprehensive information on StaffSpace, the staff portal, to support the University's Staff Development Strategy. Development activities are coordinated by the Development and Training Team in close collaboration with the Academic Development Centre. New academic staff are supported with induction activities and a mentoring system.

41 The Institutional audit report of 2005 recommended as advisable that the University took steps to assure itself that staff appraisal was being consistently and fully deployed.

While concerted effort has been made to improve the uptake and recording of appraisals, the audit team encourages the University to maintain its focus on this area of development. The University will also wish to assure itself that staff engage with the centralised peer observation scheme and, as noted in paragraph 38, are involved in appropriate training relating to admissions.

42 Notwithstanding the issues identified in the advisable recommendation in paragraph 29, the audit team concluded that confidence can be placed in the soundness of the University's present and likely future management of the quality of the learning opportunities available to students.

Section 4: Institutional approach to quality enhancement

43 The University describes its approach to quality enhancement as consisting of three elements: a systematic and strategic approach to developmental change and improvement of the student experience of learning opportunities; embedding quality enhancement in all its activities rather than having a separate quality enhancement strategy; and ensuring key quality assurance processes lead (wherever possible) to enhancement activity linked to the Learning, Teaching and Assessment strategy. To support this approach, the key committees dealing with quality assurance and learning and teaching have been merged into the Quality Enhancement Committee. A review of the agendas and supporting papers of the Committee over the last two years suggests that the Committee has the potential to perform its remit to integrate the consideration of learning, teaching and assessment with quality assurance and enhancement matters. However, the audit team formed the view that the lengthy committee papers and the volume of business on agendas was limiting the Committee's effectiveness and contribution to the enhancement agenda.

44 Key to the University's approach to quality enhancement is its adoption and implementation of a new partnership approach between the Academic Development Centre and the faculties to support student learning based around a planned calendar of discussions between senior staff in the Centre and the Associate Deans in each faculty. These discussions are based on faculty actions plans and have had significant impact on the student learning experience.

45 The University has put in place mechanisms that have the potential to support a systematic and strategic approach to the enhancement of the student learning experience and the achievement of faculty and institutional objectives set out in the Learning, Teaching and Assessment Strategy. Nevertheless, the volume of business that the Quality Enhancement Committee has to consider and the length of time taken to address issues identified through the review process are limiting the effectiveness of the University's approach to quality enhancement.

Section 5: Collaborative arrangements

46 The University defines collaborative provision as any compulsory credit leading to a University award delivered/supported/assessed by a partner. Guidance on all aspects of the University's strategy, operation and management of collaborative partnerships is outlined in the Academic Quality and Standards Handbook. A list of approved collaborative partners is published on the University's website. The majority of the University's collaborative provision is either franchised (where the course is also delivered at the University and/or by a number of partners in a network) or validated provision (where the course is unique to the partner institution).

47 As with on-campus provision, ultimate responsibility for quality and standards rests with Academic Board, with operational oversight delegated to the Quality Enhancement Committee; its membership including representation from the University's collaborative partners. Collaborative provision forms part of the routine business of Academic Directorate and the Quality Enhancement Committee, with similar responsibility held by faculty boards, faculty quality committees (or equivalent), boards of study and executive committees. The latter meets annually to review the operation of the partnership and includes representation from the University and the partner institution. The University has identified that executive committees have not always operated consistently across faculties and the audit team encourages the University in its endeavours to achieve consistency.

48 Collaborative arrangements are governed by an institutional agreement, which outlines the main responsibilities of both the partner and the University, as well as partner entitlements. A liaison document describes in more detail the liaison arrangements for each collaboration. The audit team found that the role of these potentially very useful documents was not always understood by all partner staff and the University is encouraged to continue to assure itself that these documents are being used consistently in the management of all partnership arrangements.

49 Central to the operational oversight of collaborative arrangements are the University academic liaison officers. Partner institutions appoint a comparable liaison person. In response to a recommendation from the 2006 Collaborative provision audit, the University has established a Liaison Officers' Forum, which brings partner officers in the UK together with other key University staff to discuss operational issues and share good practice. Communication with overseas partners is facilitated through the liaison officers, the partnerships website, visits by other staff, including senior staff of the University, and through electronic means. Staff from partner institutions were complimentary about the support they received from the University liaison officers. The audit team formed the view that the use of liaison officers in supporting collaborative partners and the strengthening of the role by the University since the last Collaborative provision audit is a feature of good practice.

50 Requirements for meeting the expectations of the Academic Infrastructure and external reference points match those for on-campus provision. The University has recognised the need to do further work with its partners in this area, and has put appropriate staff development in place. The University has also strengthened its requirements for partners to demonstrate their alignment with appropriate sections of the *Code of practice* as part of the approval process.

51 The University has in place appropriate systems for the approval, monitoring, review and termination of its collaborative partnerships and programmes which meet the expectations of the *Code of practice*. The procedures for the approval, monitoring and review follow the same processes as for on-campus provision, with some additional quality assurance requirements. All collaborative programme approval processes include appropriate externality and distinguish between the approval of a partner organisation and of programmes, the former requiring evidence that the University is of appropriate standing and both processes emphasising the integrity of academic quality and standards. Approval procedures are monitored annually by the Quality Enhancement Committee with appropriate action being taken, for example in relation to tardy responses to approval conditions.

52 In the light of the 2006 Collaborative provision audit, the University introduced a new annual institutional monitoring process in the academic year 2009-10. The first reports from the process utilised an appropriate range of qualitative data and the audit team formed the view that the process has the potential to be a useful addition to the University's means of ensuring institutional oversight of its collaborative partnerships, but that it was too early for its effectiveness to be evaluated fully. Similarly, the University has increased its support for

those responsible for annual monitoring and appropriate staff development and ongoing support has been provided. Staff at partner institutions were clear about their roles in the production of annual module review and development plans, although less clear about faculty review and development plans.

53 Internal Subject Review provides a robust mechanism for scrutinising collaborative provision and normally includes a separate visit to collaborative partners.

54 The University's revised Institutional re-approval process, implemented from September 2009, is based largely on the outcomes of institutional monitoring reports over the past five years plus other relevant information. The revisions look to have enhanced the re-approval process, although it is too early to be able to assess its effectiveness fully. Institutional agreements are renewed as part of the re-approval process, although the University has experienced difficulties in ensuring that all institutional agreements are signed and renewed in a timely manner and have recently instigated a new process to address this, including, if necessary, temporary suspension of recruitment to relevant programmes.

55 Procedures for the appointment and induction of external examiners and their reporting largely replicate those for on-campus provision. For franchise provision the same external examiner is normally used; separate examiners may be used for validated provision. If a programme is delivered and/or assessed in a language other than English a bilingual external examiner is appointed. Staff from partner institutions meet external examiners, receive their reports and contribute to responses as appropriate.

56 Responsibility for the setting and moderation of assessments varies according to the specific partnership arrangement. Staff from partner institutions were clear about the University's assessment procedures and requirements. Students were also clear about assessment criteria, were aware of plagiarism guidance and were generally content with the timeliness and usefulness of the feedback they received on their assessment tasks.

57 Samples of certificates and diploma supplements relating to collaborative provision meet the expectations of the *Code of practice*, with the name of the partner included on the certificate and the language of delivery and/or assessment and location of study on the diploma supplement.

58 Institutional agreements confirm that the University retains overall responsibility for admissions, although in practice this may be delegated to partners. There is no mandatory University-wide training for staff in partner colleges who deal with admissions, although support may be provided on a voluntary basis. In the light of the introduction of the new Admissions Policy, the audit team consider it desirable that the University monitors partner staff involvement in the appropriate training. Collaborative students are enrolled on the University's student administration system, although partners might also hold their own records.

59 Partner institutions' responsibilities for student support are set out in institutional agreements and confirmed through the University's approval and review processes. They include the provision of academic and pastoral support for students; specified programme-related information including handbooks; and local learning resources. Students whom the audit team met confirmed their general satisfaction with the support provided and confirmed that they receive a range of information both pre and post enrolment, which they considered generally accurate and helpful. All had undergone an appropriate induction.

60 Students were also generally satisfied with the opportunities to provide feedback through module evaluation questionnaires, staff student consultative committees and other committee structures, and were clear that action is taken as a result of this feedback. The

audit team concluded that the University has appropriate mechanisms in place to ensure that partners gather feedback from students and that this forms part of the evidence base for the University's monitoring and review processes. Some of the student representatives in partner institutions geographically close to the University had undertaken training through the University's Students' Union.

61 Partner institutions are responsible for the appointment of staff and for human resource policies and procedures. Scrutiny of curriculum vitae of staff teaching on a University award forms part of the approval and review processes; executive committees have an ongoing commitment to verify staff qualifications, to agree any resulting staff development requirements, and approve the curriculum vitae of new staff. Staff from partner institutions confirmed they were aware of these requirements and that the process was generally operating in line with University requirements.

62 The University provides a wide range of staff development opportunities for staff in partner institutions and requires that staff development plans form part of the documentation for validation and Internal Subject Review. Nevertheless, the University has no means of monitoring participation rates and the audit team heard a rather mixed picture from staff about their involvement. The University might wish to consider whether a more formal process of recording uptake would be a useful addition to its arrangements for the oversight of collaborative provision.

63 The University retains overall control of publicity and marketing of its courses, with institutional agreements setting out individual responsibilities. All publicity material must be submitted to the University for approval prior to publication. The University has a formal process for the promotion and marketing of collaborative provision, which is understood by staff in both the partner institutions and the University.

64 The audit team concluded that confidence can reasonably be placed in the soundness of the University's present and likely future management of the academic standards and quality of learning opportunities in programmes delivered on its behalf by collaborative partners.

Section 6: Institutional arrangements for postgraduate research students

65 The University's Strategic Plan identifies growth in postgraduate research student numbers and completions as an indicator of success, and numbers on doctoral programmes have grown from 281 in 2007-08 to 379 in 2009-10, with additional numbers on professional doctorates.

66 Responsibility for academic standards and quality of learning opportunities on postgraduate research programmes is delegated by Academic Board to the University Research Degrees Committee. Operational responsibility is devolved to faculty research degrees committees who produce annual reports, which are considered thoroughly by the University Research Degrees Committee. The University has recently developed a process for periodic review of postgraduate research programmes in each faculty. Students are registered in faculties but they also gain support, guidance and training inputs from the Graduate Research School, whose Director is responsible for coordinating faculty activities to align with University policies.

67 University policy is to ensure that research students are located in a supportive research environment and its research centres (foci for its research strengths) are integral to this. Although only 43 per cent of research students are associated with a research centre,

students gave a positive account of the research environment, were able to detail specific resources and equipment available to them, and had generally found the University responsive where access to additional facilities had been required. Recent University initiatives to enhance the research environment, notably dedicated graduate centres on each campus (providing study space, computing facilities, seminar/training areas and social space) were also well regarded by students.

68 Around 40 per cent of research students are part-time and the University has identified this high proportion as a factor in lowering overall completion rates. It proposes to increase support for part-time students in a variety of ways and the audit team would encourage the University to take this initiative forward. There are also part-time students based overseas typically with an external overseas supervisor, although the principal supervisor is always a member of University staff and there is also a third supervisor in place. The University regards these as individual arrangements and checks the appropriateness of local resources on a case-by-case basis. In some instances, students are associated with an overseas institution. The University has chosen not to treat these as collaborative provision as this would be too disproportionate for what are currently small numbers. However, the team believes such overseas provision when linked to external institutions would benefit from the additional protection that a collaborative agreement may provide.

69 Comprehensive information is made available to potential research students on the University's website. Admission is managed by the relevant school, with registration normally approved by faculty research degree committees, although approval from the University Research Degrees Committee is also needed for overseas-based students and entrants with non-standard qualifications.

70 Postgraduate research students have a programme of mandatory and optional training in each year of study, with faculties providing discipline-based training. The University's Research Student Experience Survey 2009 indicated that a significant number of research students had not undertaken such training programmes. The University had responded by monitoring attendance. Opportunities for personal development planning are provided to students, although uptake is low. Students who undertake teaching and assessment duties or support learning more generally, receive appropriate training.

71 The University had sought to address research student concerns relating to career development, and students who met the audit team were positive about the support they receive, with some highlighting the role of the faculty employment coordinators. Support for enterprise and the translation of research outcomes into business opportunities was also welcomed.

72 The University has clear guidance arrangements relating to the size and composition of supervisory teams, involvement of external supervisors and avoidance of excessive supervisory workloads. Responsibilities of the supervisory team are clearly communicated to students and staff through the University Code of Practice in the Research Student Handbook. New supervisors are required to undertake a one-day training workshop, with the option to gain academic credit towards the MA in Learning and Teaching in Higher Education. External supervisors have the option to attend training, but also have access to documentation and online materials. Faculties provide valuable annual development programmes for new and established supervisors.

73 The University has effective procedures for monitoring and reviewing progress of postgraduate research students on an annual basis, with faculty research degree committees providing oversight. Students meet regularly with supervisors and the University has sought to enhance compliance with the requirement for records of meetings to be

produced with some success. Students also provide feedback through the annual reporting process as well as through a number of University surveys. Response rates to the latter were disappointing, and the University proposes to use the Higher Education Academy's Postgraduate Research Experience Survey from the academic year 2011-12, since this will allow benchmarking against other universities. The audit team endorses this approach, and formed the view the University might wish to consider ceasing to include research students in similar internal surveys to ease questionnaire fatigue.

74 Arrangements for assessment of postgraduate research students are approved by faculty research degree committees and submitted to the University Research Degrees Committee for ratification. There are clear rules governing the composition and experience of assessment panels, and they receive appropriate information and guidance from the University. Knowledge of assessment arrangements varied among students who met the audit team, but the Research Student Handbook contained clear information. The University Research Degrees Committee receives reports and award recommendations from assessment panels, and the team saw evidence of faculty research degrees committees reviewing examiners' reports for issues requiring attention.

75 The University handles student complaints through its generic procedures, which provide for an initial informal route, followed by a three-stage formal procedure. In contrast, student appeals are considered within a procedure specific to postgraduate research students. In both cases, the audit team found these arrangements and the way they are communicated to students was rigorous.

76 The audit team concluded that the University had sound institutional arrangements for its postgraduate research students, which meet the expectations of the *Code of practice, Section 1: Postgraduate research programmes*.

Section 7: Published information

77 Responsibility for providing information to students and other interested parties is divided between the University's central and academic departments. Material published on the University's website is subject to a centralised approval process for verifying accuracy. In addition to its website, the University's StudentSpace and StudySpace facilities are key forms of communication with current students. Student handbooks are comprehensive and students commented positively on their utility.

78 The student written submission commented favourably on the fairness and honesty of the information published by the University. Students whom the audit team met confirmed that the information they received had been useful and accurate. In particular, the 'Getting Ready' website containing pre-arrival information was well regarded.

79 The audit team concluded that overall, reliance could reasonably be placed on the accuracy and completeness of the information that the University publishes about the quality of its educational provision and the standards of its awards. The team also confirmed that the University was fulfilling its responsibilities in relation to the requirement of HEFCE's *Review of the Quality Assurance Framework* (HEFCE 06/45) for public information.

Section 8: Features of good practice and recommendations

Features of good practice

80 The audit team identified the following area of **good practice**:

- the use of liaison officers in supporting collaborative partners and the strengthening of the role since the last collaborative provision audit (paragraph 49)

Recommendations for action

81 Recommendations for action that is **advisable**:

- ensure that where actions are identified as a result of internal or external quality assurance processes they are implemented in a timely manner (paragraphs 7, 26, 29, 37)
- review the effectiveness of the annual review and development process to ensure the appropriate monitoring of programmes at field/course level and the necessary oversight at institutional level, as specified in Section F of the Academic Quality and Standards Handbook (paragraph 19)
- consider whether the business of the Quality Enhancement Committee is sufficiently focused to allow it to fulfil its role in quality assurance as specified in its terms of reference (paragraph 45)

82 Recommendation for action that is **desirable**:

- monitor the implementation of its new Admissions Policy and the involvement of staff in appropriate training (paragraphs 38, 58).

Appendix

Kingston University's response to the Institutional audit report

The University welcomes the judgement of confidence in the soundness of the University's present and future management of the quality of the academic standards of its awards and the quality of learning opportunities offered to students. The University also welcomes the judgement that the awards delivered in partnership also afford the same levels of confidence. The outcome of the audit reflects the commitment and hard work of staff and students at the University and our collaborative partners, in providing an excellent experience for students studying on Kingston University awards.

The University was particularly pleased to note the good practice identified in the use of liaison officers in supporting collaborative partners and the strengthening of the role since the last Collaborative provision audit. The University welcomes the recommendations of the report and positive observations within the report. Work is already underway to consider the recommendations, good practice and observations contained within the report at the University's Quality Enhancement Committee.

The University would like to thank the audit team for the professional and courteous way in which the audit was conducted. The positive outcome of the Institutional audit supports the University's approach to the management of quality and standards both within the University and through our extensive network of partnerships. The University will continue its work to assure and enhance the quality of provision offered to students on the University's awards.

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