



**QAA**

A large, stylized green graphic consisting of overlapping circular and curved lines, resembling a stylized 'Q' or a leaf, positioned on the left side of the page.

# Institutional audit

**University of Gloucestershire**

FEBRUARY 2010

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## Preface

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

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

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

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

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

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

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

Audit teams also comment specifically on:

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

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

### **Explanatory note on the format for the report and the annex**

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

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

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

## Summary

### Introduction

A team of auditors from the Quality Assurance Agency for Higher Education (QAA) visited the University of Gloucestershire (the University) from 22 February to 26 February 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.

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 the University of Gloucestershire is that:

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

In addition to the two judgements above, the audit team also produced commentaries on the University's arrangements for quality enhancement, collaborative provision, postgraduate research students and published information. These can be found in the report.

### Institutional approach to quality enhancement

The audit team agreed that a more overt approach was needed to timely decision making, communication and wide dissemination of the outcomes of enhancement initiatives and features of good practice, with systematic evaluation of their effectiveness to augment the enhancement of the student experience.

### Postgraduate research students

In the absence of performance indicators or targets, associated with the lack of transparent data on completion rates within and across the University, the audit team formed the view that currently the University was failing to monitor the performance of its research degree programmes adequately, thereby not reflecting the expectations of the *Code of practice for the assurance of academic quality and standards in higher education (Code of Practice), Section 1: Postgraduate research programmes*.

### Published information

Notwithstanding the need for regular updating of websites and live links and the need for transparent and timely communication of plans and developments, the audit team concluded that reliance can 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.

## Features of good practice

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

- the Admissions Digest, which brings together the principles and processes for considering applications, promotes a standardised approach across all faculties and comprehensively links to a number of sections of the *Code of practice*
- the Helpzones, which provide an effective one-stop shop facility and enhance the access and level of support provided to students.

## Recommendations for action

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

The team advises the University to:

- establish and formalise processes to ensure that the quality of learning opportunities for continuing students continues to be maintained once the proposed unified academic award incorporating new assessment regulations are introduced
- implement and fully operate procedures for the rigorous monitoring of the success of postgraduate research programmes against internal and/or external indicators and targets
- establish clearly-defined mechanisms for formal progress reviews of postgraduate research students.

It would be desirable for the University to:

- introduce a systematic mechanism for monitoring minor changes on programmes between periodic reviews
- clarify to students and staff the communication channels available to students to bring forward their views and be involved in quality management processes
- develop a clearer communication, evaluation and dissemination strategy in approaching change and developments.

## Reference points

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

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

The report will comment on the use made by the University of the Academic Infrastructure developed by the UK higher education sector through QAA. The report is likely to state that the University has responded appropriately to *The framework for higher education qualifications in England, Wales and Northern Ireland (FHEQ)*, subject benchmark statements and programme specifications but further work will be required regarding QAA's *Code of practice*.

## Report

1 An Institutional audit of the University of Gloucestershire (the University) was undertaken during the week commencing 22 February 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 Professor Brian Anderton, Professor Gwendolen Bradshaw, Mr Edward Moloney, Mrs Karen Powell-Williams and Mr Jon Rowson, auditors, and Mrs Suzanne Hearne, audit secretary. The audit was coordinated for QAA by Mr Derek Greenaway, Assistant Director, Reviews Group.

### Section 1: Introduction and background

3 The University of Gloucestershire received its designation from the Privy Council in 2001, following a year of intensive scrutiny by the Quality Assurance Agency (QAA). The University's origins can be traced back to the early 19th century, to the foundation of the Cheltenham Training College and the Mechanics' Institute. A merger between the College of St Paul and St Mary and parts of the Gloucestershire College of Arts and Technology in 1990 gave rise to the Cheltenham and Gloucester College of Higher Education, which in turn became the University of Gloucestershire. Taught degree awarding powers were achieved in 1992, and research degree awarding powers in 1998.

4 The origins of the University are reflected in its governance structure. The University retains its Church Foundation and Trust Deed, with some members of the University Council nominated by the Foundation, some by the Local Authority, and some independently. The Trust Deed requires that the University's provision must include residential teacher education and Christian theology. The University's first Chancellor, Lord Carey of Clifton, was appointed in October 2003 and remains in post at the time of writing.

5 The University's mission is 'To pursue the three fundamental principles of the Academy: Learning – the creation and dissemination of knowledge; Community – the gathering together of teachers and learners to support each other in the pursuit of that knowledge; and Service – the pursuit of a humane and whole society'. The University reviewed its Strategic Plan in 2008-09 and from this four key strategic priorities were derived: Achieving Inspirational Learning, Transforming Students' Lives, Delivering Research Excellence and Creating a Sustainable University.

6 Since the previous Institutional audit in 2005, the University has seen a number of changes impacting on the quality processes: a new Strategic Plan in 2009 with four strategic priorities, three of which relate to the quality of learning opportunities; the first five-year Academic Plan; a Learning, Teaching and Assessment Strategic Framework; a Research Development Strategy and senior staff development project. In addition, there have been changes to the academic year and the modular framework. Collaborative provision has expanded. Quality assurance processes have moved to an events-based process. There has been a rationalisation of course management and review through the creation of course groups within the Undergraduate Modular Scheme and a revision of the student support and advice system. Further changes are in progress, with the closure of a campus and changes to the Undergraduate and Postgraduate Modular Schemes.

7 The report of the QAA's previous audit of the University in 2005 included an overall judgment of broad confidence in the University's management of the quality of its academic programmes and the security of its awards. The report recognised nine features of good practice. The outcome was qualified by seven recommendations: five advisable and two desirable. The University submitted action plans in response to the recommendations in 2006 and the current audit team found that the University had largely taken effective action in responding to the recommendations made in the previous audit report, although the team agreed there was

still work to be done on the management of large-scale change and in the communication with students' representatives.

8 A three-tier structure provides the university's framework to manage standards and the quality of learning opportunities. The three levels consist of university-level committees reporting to the Academic Board, faculty-level committees reporting to the university-level ones and course-level committees reporting to the faculty-level ones, with decisions cascading downwards and information flowing upwards. This is supplemented by a comprehensive set of handbooks, the Learning, Teaching and Assessment Strategic Framework, a dedicated Academic Frameworks department and staff in Academic Registry responsible for policy and quality support and assurance.

9 The audit team formed the view that the University's framework for managing standards and the quality of learning opportunities was effective and fit for purpose.

## **Section 2: Institutional management of academic standards**

10 Procedures for management of academic standards are codified in the University Quality Assurance Handbook, available to staff in both hard copy and electronic formats.

11 Faculties normally originate proposals to develop new courses, both on-campus and with collaborative partners, using a standard form covering academic and resourcing aspects. Initial approval for development comes from Academic Development Committee.

12 A conventional approach to course approval is employed through centrally managed and independently chaired validation panels with at least one member external to the University. Summary validation reports including conditions go forward to the Academic Standards and Quality Committee and then to Academic Board for final approval. Academic Registry (Quality) monitors fulfilment of approval conditions, which are signed off by the panel chair, and informs the Academic Standards and Quality Committee when conditions have been fulfilled. The Academic Standards and Quality Committee normally receives an annual overview report and evaluation of validations in the preceding year, though the audit team noted this was not produced for 2008-09.

13 Minor changes to approved courses are possible through the annual Programme Change Approval Process. The University does not prescribe quantitative limits on minor programme changes, although chairs of Faculty Academic Standards and Quality Committees advise course teams. Approval is via Faculty Programme Change Approval Panels. Monitoring cumulative effects of minor programme changes between periodic reviews relies on Programme Change Approval Panels having collective knowledge of prior changes, supported by reference to minutes from earlier panel meetings. The audit team view was that a more formalised process would be beneficial, and it was desirable that the University introduce a systematic mechanism for monitoring minor changes on programmes between periodic reviews.

14 New approaches to annual monitoring and periodic review were introduced from 2008-09. Monitoring is now forward-looking, emphasising action planning, while periodic review provides retrospective evaluation to inform and provides an opportunity to propose changes for the future. Annual Monitoring Reports are prepared for groups of courses by directors of studies using a standard pro forma. Annual Monitoring Reports are submitted in November after approval by Course Boards including student representatives, and are referenced to external examiner reports, course statistics on student performance, and student feedback, including the National Student Survey.

15 Monitoring takes place through annual monitoring panels, which report to Faculty Academic Standards and Quality Committees and include appropriate student representation and cross-institutional membership. First and second readers are allocated to each Annual Monitoring Report and report using a standard template. Based on the readers' reports a confidence judgement is made on the academic health of the course, and the Chair of the Faculty Academic



Standards and Quality Committee monitoring panel prepares an annual report for the Faculty Academic Standards and Quality Committee (usually for its January meeting). The reports are amended/approved by Faculty Academic Standards and Quality Committee on the basis of notes of the panel meeting and subsequent discussion at Faculty Academic Standards and Quality Committee. At university level, Academic Standards and Quality Committee receives summary reports of annual monitoring from each Faculty Academic Standards and Quality Committee identifying whether all programmes have been monitored and summarising monitoring outcomes including judgements of confidence. Academic Standards and Quality Committee discussion informs the Overview Report for Academic Board and which is synoptic, identifies general trends and any exceptions or anomalies. The University evaluated its new approach after the first year, and only minor changes have been introduced for monitoring in 2009-10.

16 Periodic Review and Revalidation operates to a five-year cycle and facilitates assessment of a course's continuing currency, academic coherence and alignment with QAA subject benchmarks; review of the cumulative effect of incremental changes since previous review; evaluation of data relating to student recruitment, progression and achievement; and evaluation of how staff and physical resources impact on the effective operation of the provision. Periodic Review and Revalidation uses a panel approach similar to validation with both internal and external members, and the University aspires to include student members. Panels meet staff and students as well as reviewing documentation. The usual outcome is revalidation for five years, possibly with recommendations, but, where there are serious concerns, revalidation may be limited to one year with a further Periodic Review and Revalidation at the end of that year. Reports covering the judgement (confidence in the academic soundness of the programme), and identifying good practice and recommendations for action go forward to Faculty Academic Standards and Quality Committee and to Academic Standards and Quality Committee.

17 The audit team found that the University's procedures for course approval, annual monitoring and periodic review were effective, with sound mechanisms for identifying issues and good practice and for making judgements on the academic health of courses. There was sufficiency of detail in upwards reporting to enable Academic Standards and Quality Committee and Academic Board to be assured of the quality and standards of courses.

18 There are two types of external examiner: course externals responsible for a group of modules, who attend 'course-level' examination boards, and award board chief externals (currently one for the Postgraduate Modular Scheme and a chief and deputy chief for the Undergraduate Modular Scheme). The University's move to devolve responsibility to faculties, but with the same two-tier arrangement of boards, will entail creation of award board external examiners for each faculty.

19 External examiners are appointed by Academic Standards and Quality Committee following recommendations made by Faculty Academic Standards and Quality Committees against set criteria, including avoidance of too many appointments from the same University and reciprocal external examining arrangements, and limitations on the number of external examinerhips an individual should hold. External examiners are well briefed on their role, receiving both university-level and course-specific briefing documentation. Newly appointed externals are invited to a centrally-organised induction event, which is well attended, and new appointees unable to attend receive an individual induction by faculty-based staff. There is a scheme whereby established external examiners mentor new appointees without previous experience.

20 Course Board externals comment on standards of academic achievement and their appropriateness in relation to level and comparability with awards in other institutions. They have the right to be consulted regarding the form and content of all forms of assessment, to see agreed samples of student assessed work, and to be consulted about proposed changes to module assessment and the curriculum. Scheme-level external examiners report on effectiveness of the examination board process and (where applicable) matters of concern with potential to put standards at risk. Reports are distributed and read widely within the University, with copies

going to collaborative partners, where appropriate. Students see external examiner reports through Course Boards, but uncertainties about student attendance at these over the last year meant only one student with whom the audit team met said they had seen external examiner reports. Responses to course-specific comments form part of the Annual Monitoring Report action plan. A university-level collective response is prepared on generic matters and circulated to all externals.

21 The audit team formed the view that the University's external examining arrangements were effective in securing the academic standards of its awards.

22 The audit team saw evidence that University awards were mapped against the FHEQ and that, in preparing approval documentation, course teams were required to demonstrate consideration of subject benchmark statements. Each course has a Programme Specification with separate specifications for single and joint awards. These are made available to students electronically and through course handbooks. As part of Periodic Review and Revalidation, course teams must ensure adherence to the most recent version of the subject benchmark statement and any other relevant external reference points, while documentation includes full Programme Specifications with cross-referencing to the appropriate subject benchmark statement, *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ) and professional, statutory and regulatory bodies requirements.

23 Reports from external accrediting bodies are notified to Academic Standards and Quality Committee via Faculty Academic Standards and Quality Committee minutes with good practice and any issues recorded at that point. The University may wish to consider whether this provides sufficient oversight of the health of its relationships with professional, statutory and regulatory bodies.

24 The University does not routinely issue the Diploma Supplement on graduation but students may request one. The University is a pilot institution for the national Higher Education Achievement Report (HEAR) initiative.

25 Overall, the audit team formed the view that the University was generally making effective use of the Academic Infrastructure and other external reference points, although some further work is required (see paragraph 107).

26 The University's comprehensive and detailed Assessment Handbook is accessible to staff through the University's website. Assessment regulations are communicated to students through the Undergraduate or Postgraduate Modular Scheme Handbooks and the website.

27 Two-tier examination boards have been operated, with Course Boards considering module results and the Undergraduate Modular Scheme or Postgraduate Modular Scheme boards making progression and award decisions. Some provision existed outside the Undergraduate Modular Scheme and Postgraduate Modular Scheme frameworks, and operated unitary examinations boards with course-specific assessment regulations. Currently, conduct of all boards is being devolved to faculties, with faculties taking responsibility for both course and award boards.

28 At the time of the audit visit, Academic Board was finalising replacement of the current Undergraduate Modular Scheme, Postgraduate Modular Scheme and non-modular scheme regulations a single set of assessment regulations governing all University award-bearing programmes. Introduction was planned for 2010-11 for all students, continuing and new, and in franchised collaborative provision. The University recognised some continuing students may be disadvantaged, and the audit team asked whether a review of the impact on continuing students had been undertaken across the full range of University award-bearing courses. The University believed the impact would not be significant, but was unable to demonstrate that a detailed review had taken place. The team read that Boards of Examiners would exercise discretion if continuing students were found to be disadvantaged.

29 The audit team viewed it as important for the University to identify where continuing students would be disadvantaged, to decide what action it would take, and to communicate this to those students who would be disadvantaged. Therefore, in advance of the replacement current scheme, the team regarded it as advisable that the University establish and formalise processes to ensure that the quality of learning opportunities for continuing students continues to be maintained once the proposed unified academic award incorporating new assessment regulations are introduced.

30 Faculty Assessment Offences Boards of Examiners have been established which report to the main Boards of Examiners, and which the University believes promote parity of treatment of students. From its review of minutes from the boards and also annual reports relating to their working, the audit team formed the view that the boards were working well, and supported parity of treatment.

31 Students are expected to submit coursework by published deadlines and to attend examinations on the due date. Students may claim mitigating circumstances for both coursework and examinations, normally prior to the deadline or examination date. A recent review of mitigating circumstances concluded procedures were fit for purpose, though recommended introducing a central panel to deal with more complex and extended claims. Students submit claims through the relevant Student Helpzone and Helpzone Advisers may approve some claims, with the more complex going to Senior Tutors for a decision. A further feature is a 48-hour coursework extension to cover a minor problem without need to provide supporting evidence. This may only be used once during the year for one coursework. The bi-monthly Academic Advice Forum allows relevant staff to share practice and experience, thereby contributing to consistency in handling student claims across the University. Though most students the audit team met had not used mitigating circumstances procedures, they knew about them, how to access them through the Helpzones, and believed they operated effectively and fairly. A University code of practice for students with disabilities allows agreement of alternative forms of assessment of learning outcomes, with claims submitted through the University Disability Adviser.

32 Students said assessment feedback was generally full and helpful, though they mentioned instances where feedback was minimal and unhelpful. Students knew the University standard of four weeks for feedback on coursework and believed this was generally met, but identified instances of significant variation, with rapid turnaround but also longer periods for the return of some work. Students were clear that, should they require more feedback on their assessments, they could approach staff. Students were also aware how to make an academic appeal.

33 The audit team was satisfied the University's arrangements for assessment were effective in maintaining academic standards.

34 Directors of studies/course leaders receive standard data sets annually from the Department of Finance and Planning. These are provided as interactive Excel spreadsheets where data may be used as supplied or subject to further manipulation. Data provided covers a comprehensive range of performance variables including modules, degree class profiles, retention and progression, and also comparative data at faculty and university levels. Areas where performance is significantly out of alignment are identified, for example modules with abnormally high or low levels of marks.

35 The audit team saw a demonstration of the functionality of the system and concluded the University was generating statistical reports which were effective in enabling it to assure the academic standards of its awards. However, while the system produced statistical reports to support the University's widening participation policy, the audit team was not able to establish that course teams or faculties routinely received reports which enabled analysis of the relationship between student performance and student profile data (notably gender, ethnicity and age). The University may wish to provide such reports in the future to enhance its understanding of the relative performance of different student groups, and to support policies such as widening participation.

36 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 the awards that it offers.

### Section 3: Institutional management of learning opportunities

37 Overall responsibility for ensuring that the University's regulations and policies for undergraduate and taught master's programmes are aligned with the Academic Infrastructure, including the *Code of practice for the assurance of academic quality and standards in higher education (Code of practice)* published by QAA, is delegated to Academic Standards and Quality Committee by Academic Board. The audit team saw several examples of how the University was applying this in practice.

38 The Admissions Digest was, in particular, found to be a commendable exemplar referring explicitly to several related sections of the *Code of practice*. Another notable example was the Quality Assurance Handbook's effective use of the *Code of practice, Section 7: Programme design, approval, monitoring and review*. In an example relating to collaborative provision, the obligations of the partner with respect to the *Code of practice* were clearly stated in the contract.

39 The University also has sound procedures for ensuring that revisions to the Code of practice are considered appropriately and promptly. The audit team saw many examples of this working effectively in practice as well as evidence that the University makes efforts to anticipate changes in the *Code of practice*.

40 Overall the team found that the University was generally making explicit and effective use of the *Code of practice*, although there were some exceptions in the *Code of practice, Section 1: Postgraduate research programmes*.

41 The audit team found that the University's procedures for course approval, annual monitoring and periodic review were effective, with sound mechanisms for identifying issues and good practice. There was sufficiency of detail in upwards reporting to enable Academic Standards and Quality Committee and Academic Board to be assured of the quality and standards of courses. However, the team made a desirable recommendation with respect to standards in Section 2, paragraph 13.

42 The National Student Survey (NSS) Steering group (with staff and student representation) is indicative of the University's serious approach to feedback from students. It oversees implementation of the NSS and analysis of results, and a number of promotional tools encourage student engagement including guidance on the University website on completing the NSS. Analytical reports are prepared for all NSS subject areas, discussed at faculty level and at Academic Board which approves an action plan to address major points identified by the survey and disseminates good practice. Annual course monitoring reports routinely consider subject-level outcomes. Other external sources of feedback used by the University are the Postgraduate Research Experience and the Postgraduate Taught Experience Surveys.

43 Internally, the recently introduced Gloucestershire Student Survey utilises the same questions as the NSS and is administered to Year 1 and 2 undergraduate students. As well as ascertaining their views it familiarises students with the NSS questions and format. Individual module evaluation is required and, though the University does not prescribe a standard format, 'core topics' must be covered and exemplars of good practice are provided. In addition, support areas collect feedback from student users, and this informs the Review of Professional Departments.

44 Students confirmed the operation of feedback mechanisms within the University. The University does have arrangements for feeding back to students on action it proposes to take in response to their comments. However, students were somewhat critical of 'loop closing', for example the university not always communicating how it intended to respond to areas of criticism or low scores in NSS. Students were critical of the communication of major decisions

likely to have an impact on the student learning experience, including the proposed closure of a campus and staff changes. The University conceded there had been a dislocation to communication with students on some important issues, but agreed that this was now resolved.

45 The University had taken a proactive approach in assisting the Students' Union with training of student representatives by co-financing the creation of the Student Representation and Experience Co-ordinator, designed to assist with identification and training of representatives, raising awareness of the representational system and facilitating more effective communication between students and their representatives. Both the University and Students' Union agreed this had been a very effective innovation, but the post was vacant at the time of the audit visit and there was some uncertainty on how to replace it (see paragraph 51).

46 Overall the audit team judged that the University's arrangements for collecting feedback from students contributed effectively to maintaining the quality of student learning opportunities.

47 The University's briefing paper states and the audit team verified that the University recently undertook a comprehensive review of the student representation system, following which a number of changes have been introduced.

48 At university level, a Student Affairs Committee has been established. At faculty level, Staff Student Liaison Committees have been introduced. Students both chair and are in the majority at the Staff Student Liaison Committees. The audit team found evidence that student representatives continue to be welcome 'in attendance' at Course Boards although they are no longer formal members of these Boards. Students are also represented at the University and Faculty Academic Standards and Quality Committees.

49 The audit team confirmed that minutes from Staff Student Liaison Committees are received by Course Boards, Faculty Boards, and by the Student Affairs Committee, ensuring that matters receive an appropriate level of response.

50 The audit team formed the view that there remained some confusion among staff and students regarding staff roles and responsibilities and the type of issue to be raised by students at both the Staff Student Liaison Committees and at the Course Boards. The University is taking steps to address the situation and provide clarity for all concerned. Meanwhile the students reported to the team that, if in doubt, they raised issues for discussion regardless of the forum. The team therefore concluded that it was desirable for the University to clarify to students and staff the communication channels available to students to bring forward their views and be involved in quality management processes.

51 A Student Representation and Experience Co-ordinator post was introduced in April 2008 as a joint appointment with the Students' Union (see paragraph 45). The impact of this post was evident in 2008-09 as both the timeliness of recruitment and uptake of training for student representatives was improved. The student voice is also being promoted in other ways for example, students have been involved in the development of the Learning, Teaching and Assessment Strategic Framework.

52 In summary, the audit team found evidence of effective student participation in quality management processes through student representation on University committees and boards. The new arrangements have been evaluated by the University and were found to have improved the profile of student representation and the response to students' feedback about the quality of learning opportunities.

53 The University states in its strategic plan that it aims to foster, manage and support the relationship between the taught curriculum and research. The audit team heard and read about a range of initiatives and forums that assist staff in the linking of research and scholarly activity with learning opportunities. Among these were the Centre for Active Learning (CeAL), the annual Learning and Teaching Conference, the Teaching and Learning Innovation Unit, and the Pedagogic Research and Scholarship Institute.



54 The Programme Review and Revalidation process also encourages course teams to provide an indication of the research and scholarly activity base that underpins the teaching and delivery of the course.

55 The audit team confirmed that staffing policies including the annual requirement for staff to engage in a development review with their line manager provided specific opportunities to explore the links staff were making between research and teaching activity.

56 The audit team confirmed that the University operates a very small amount of distance-learning provision and has no immediate plans to increase its activity in this area. The team explored the use of e-learning and found that it varied between the faculties. However, an ICT Strategy Group has now been established, as the University's intention is to increase the use of technology-enhanced and blended learning. Development opportunities in the use of learning-related technology are available to all staff.

57 The University has an established track record of offering vocationally-oriented courses facilitated by a flexible shell framework. The University places an emphasis on the need to provide demand-led, sustainable, employer-responsive programmes. The University's commitment to increasing flexibility of learning opportunities is also demonstrated by its development of fast-track (two-year) programmes.

58 The audit team sought evidence of the University supporting students both learning at a distance and while on placements and found that, although there was some variability, on the whole students were well supported.

59 The audit team formed the view that staff have taken all appropriate steps to ensure the security of the University's assessment processes.

60 The audit team observed that learning resources for staff and students are provided and supported by three departments. Representatives of all these departments are members of key University committees, thereby ensuring an integrated approach to learning resources across the University, including collaborative provision.

61 Learning and Information Services provide an integrated cross-campus service for students and staff through Learning Centres located on each campus. The audit team found that students were mainly complimentary about the services provided, although there is on occasions a perceived lack of resources in terms of core reading texts and access to computers.

62 The briefing paper states and the audit team found evidence that the University regularly seeks and responds to feedback from students regarding learning resources.

63 The audit team considered the University's approach to the prioritising and allocation of resources and found that a financial plan is produced annually and is appropriately informed by the use of external benchmarks. Resources are to be allocated using a transparent, comprehensive resource allocation model that is defined for the period from 2010-11 onwards.

64 A number of arrangements are in place to manage the admissions function across the faculties. The audit team confirmed that staff from the Student Recruitment Unit are largely responsible for the admission of UK and EU applicants to both undergraduate and taught postgraduate programmes. The International Development Centre processes applications from international students and admissions to postgraduate research provision are managed by individual departments in consultation with the Research Office.

65 The University has developed an Admissions Digest which brings together the principles and processes for considering applications, promotes a standardised approach across all faculties and comprehensively links to a number of sections of the *Code of practice*, and was considered by the audit team to be a feature of good practice.

66 The University operates a responsive system for the accreditation of prior learning and the audit team confirmed that this policy was revised in 2008 and mapped to the QAA Guidelines for accreditation of prior learning.

67 The audit team noted that staff with responsibility for recruitment were prepared for these roles to ensure fairness and a consistent application of the University's admissions policy.

68 The briefing paper states that the University has recently streamlined the structures and processes aimed at supporting students. The audit team verified that an overview of the academic advice function is taken by the Academic Advice Forum. All categories of students who met with the team were generally very positive about the support they received both from their Academic Review Tutors and lecturers in general. The team also concluded that the Helpzones which provide an effective one stop shop facility enhanced the access and level of support provided to students and were a feature of good practice.

69 Scheme and course handbooks, supplemented by the University website, provide the main vehicles for the effective communication of information about support for learning to students.

70 The audit team found evidence that the University's Career Education, Information, Advice and Guidance provision is effective in supporting students in the management of their own career development. The team concluded that arrangements for student support were effective and implemented consistently.

71 The audit team considered the University's approach to staff development and reward and found evidence of comprehensive policies and procedures. A range of in-house development opportunities are provided both locally and centrally. A guide to assist in the development of new research supervisors and the updating of existing supervisors is being developed. Staff Development and Review, an annual discussion between staff and their line managers is the main vehicle used by the University to identify staff development needs and opportunities.

72 The University awards annual learning and teaching fellowships and also operates a scheme of Excellence Awards. Promotion criteria for academic staff are transparent and cover a range of areas including research, teaching and professional activity. The audit team concluded that the University's arrangements for staff support and development were effective.

73 The audit team agreed that confidence can reasonably 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**

74 The University has an embedded approach to quality enhancement, preferring to seek continuous improvement in student learning opportunities through its learning-related policies and processes and cross-University initiatives rather than having a separate quality enhancement strategy. Two of the four key strategic priorities in the revised Strategic Plan relate to desired outcomes of enhancement: Achieving Inspirational Learning and Transforming Students' Lives.

75 The Teaching, Learning and Assessment Committee has an enhancement remit and oversight of the enhancement initiatives. There is cross committee membership with the University Academic Standards and Quality Committee in order to ensure the coordination of quality assurance and quality enhancement processes. This is echoed by the terms of reference of the committees at faculty level including the Faculty Academic Standards and Quality Committee and Faculty Board, which emphasise improvements in the student experience.

76 The comprehensive Learning, Teaching and Assessment Strategic Framework was developed through extensive consultation in 2007. The audit team noted that, although the Framework was presented to Academic Board in Nov 2007, the implementation of changes emanating from it had not been completed over the past two years as this was being processed

through validation rather than through a specific action plan. Thus, one of the key documents in relation to the student experience appears to have been slow to be comprehensively implemented during this time. It is unclear what institutional lead was given to taking deliberate steps to ensure that quality enhancement progressed during this time. However, the University informed the team that at the recent meeting of the Teaching, Learning and Assessment Committee it had been agreed that a review of the Strategic Framework would be starting shortly.

77 The University has taken deliberate steps to enhance the student experience through a set of measures since the previous audit. Helpzones were introduced to improve the student counselling service as a result of the previous audit and student e-files are under development. The Helpzones' development has been reviewed and found to be effective and widely appreciated. The Centre for Active Learning which has supported the implementation of the University Teaching, Learning and Assessment Strategic Framework and conducts development and research projects, has developed teaching tools and holds seminars and an annual conference. The Pedagogic Research and Scholarship Institute promotes and develops capacity in research-informed teaching through pedagogic and institutional research, engaging staff in research and cross-University discussion on key educational issues, and also holds an annual conference. The three-yearly Review of Professional Departments and the Quality Support Team Visits to departments include identifying good practice, disseminating this and making recommendations on any actions required to enhance quality. The University's e-JoLT, electronic learning and teaching publication, provides a depository for staff to access on teaching and learning. However, the information available to staff on the University's website about a number of these initiatives was in need of updating.

78 The audit team observed that while there were a number of initiatives taking place to enhance the student experience, including the University's own award of Teaching Fellow with a criterion being enhancement of the student learning experience, and much good practice was recorded in committee minutes and passed up the University, including staff achievements, it was not clear how these were built on or what action was taken. Indeed, the team read in several minutes of different committees, including Faculty Academic Standards and Quality Committees, that staff queried how dissemination of features of good practice, identified through annual monitoring, took place. In addition, the team was not able to identify deliberate steps taken to enhance the quality of its educational provision for postgraduate research students.

79 The team agreed that a more overt approach was needed to timely decision making and the communication and wide dissemination of the outcomes of these enhancement initiatives and features of good practice, with systematic evaluation of their effectiveness, and that this would help to augment the enhancement of the student experience. Furthermore, without a clearly expressed strategy, the team concluded that it may be difficult for staff to direct, disseminate and evaluate their efforts in enhancement.

80 The audit team recommends that it is desirable for the University to develop a clearer communication, evaluation and dissemination strategy in approaching change and developments.

## **Section 5: Collaborative arrangements**

81 The Vice-chancellor's Advisory Group and the Council of the University have together set out the aim to increase the University's number of international partnerships. Aligned with this has been the aim to increase the number of UK partnerships, due to the University's agenda on widening participation and to develop additional progression routes to its courses.

82 The University has increased its collaborative provision significantly since the previous QAA audit in 2005. However, the University now states that it is in a period of consolidating these current partnerships, mainly due to student numbers being capped for home students, and international collaborations becoming curtailed by current economic circumstances. The University now has a total of 36 collaborative partners, running a total of 79 courses with a total of 1602 students on these courses.



83 The University has recognised this large increase since 2005, and the possible additional risks such expansion might bring. It therefore commissioned the University's auditors to review its practices and procedures. The report produced made 12 recommendations for consideration by the University, which have now been acted upon. The audit team formed the view that the University should continue to keep its long-term strategic approach to the acquisition of new partnerships under review to assure future quality and standards.

84 It is clear to the audit team that the University has utilised the *Code of practice, Section 2: Collaborative provision and flexible and distributed learning (including e-learning)* in formulating its approach to collaborative provision.

85 Initial academic and business proposals for the establishment of a collaborative partnership are sent to the Policy, Planning and Resources Committee, via the International Development Group if international partnerships are involved. Policy, Planning and Resources Committee then commissions a report on the proposal to the Academic Development Committee where validated provision is involved. The report is the product of the usual institutional programme approval process (see Section 2) but also takes into consideration the academic compatibility of the two institutions, and includes a formal approval visit. Upon approval here, the final approval takes place at Academic Board, after it has passed through Academic Standards and Quality Committee, as with all other course approvals. It is also noted by Collaborative Provision Committee.

86 Following approval from the Policy, Planning and Resources Committee and Academic Standards and Quality Committee, the Deputy Vice-Chancellor (Academic) usually sends a 'Statement of Intent' letter to the proposed partner or organisation, chiefly in countries where this is required by law. The University will then sign a Memorandum of Co-operation, which lays out the relationship between the partner and the University. Following this a Memorandum of Agreement, which lays out the responsibilities of the respective departments/faculties involved and the courses to be delivered, will also be signed.

87 The audit team agreed that the process for the approval of collaborative partnerships is sound and assures academic standards and the quality of learning opportunities.

88 The University appoints a Link Tutor in the relevant department of the University to oversee the relationship with any partner organisation. The Link Tutor's role is to be the main communication conduit for both the University and the partner, to provide an annual report to the University (as part of the annual monitoring process), to induct new external examiners, and to approve publicity issued by the partner (see Section 7).

89 This role is set out clearly by the Academic Board and is facilitated by biannual Link Tutor Fora. However, the Link Tutors describe how they would appreciate greater levels of training and support from the centre as provision at faculty level is currently inconsistent. The audit team considered it would be useful for the outcomes of the Link Tutors' Fora to be reported at Collaborative Provision Committee or Academic Standards and Quality Committee.

90 In addition to these concerns, Link Tutors describe how time-consuming the role can be and how disparate the role is across faculties. In the light of these concerns the audit team recommends that the University carefully considers the workload involved in the role of Link Tutor.

91 The Link Tutor will also attend the Examination Boards with the external examiner for the particular programme. The University has similar processes for external examiners in collaborative provision as it does for internal ones. However, the University is still not in a position where the same external examiner is responsible for the programme in all its locations of delivery. The audit team would encourage the University to continue to respond to this situation as soon as possible.

92 A Collaborative Partners Conference is held annually to help senior managers of the University disseminate information on institutional developments to partners (both local and international) and vice versa. The audit team considered that this could be good practice in the making, and partners should be encouraged to engage more readily with this conference.

93 Many of the collaborative provision processes involved in quality assurance are similar to that used across the University. Any changes to a validated collaborative provision programme will be addressed by Collaborative Provision Committee on behalf of Academic Standards and Quality Committee. Modifications to modules or programmes are also addressed at Collaborative Provision Committee.

94 Every collaboration is reviewed at least every three years in a method similar to that of both the initial validation process, and the University's Periodic Review and Revalidation process (see Section 2). The review can take place outside of this cycle if there is significant cause for concern, or if a major change in the programme necessitates. For those partners who are more established, the University may increase the usual three-year revalidation timeline to five years. In addition to individual courses being revalidated the individual institutions are reviewed, also on a three-yearly cycle.

95 As part of the audit, the team met with students who were studying for a University award in a partner college. It was clear to the audit team that the students were generally well supported throughout their degree programme and they were happy with the standard of education they received through the college. The students did not feel as though they were a part of the University of Gloucestershire, but agreed more affinity to their college. However, it was clear that the University attended to issues of parity at least occasionally at the Academic Standards and Quality Committee as well as the Collaborative Provision Committee. The University is encouraged to investigate these issues annually at the minimum.

96 The University allows collaborative partners varying entitlements for students and staff dependant on their type of collaborative relationship. Students and staff at the Associate Faculty are treated with almost complete parity with their counterparts at the University, including having access to electronic resources, learning centres, counselling, careers advice and training for staff.

97 The University has also attempted to receive feedback on its collaborative provision courses through the National Student Survey, but has come up against problems of low response rate, making these statistics less valid. However, it is clear that collaborative provision students can raise their concerns or desires through the collaborative partner representatives, or Link Tutors at the Collaborative Provision Committee.

98 Student complaints are dealt with by the partner institution where possible, although they are ultimately the responsibility of the University. Student representation is also the responsibility of the partner, and all partners must have representation in place. The audit team commended the University in that the Student Representation and Experience Coordinator has helped to implement representation systems in partner institutions in the UK.

## **Section 6: Institutional arrangements for postgraduate research students**

99 Quality management for research degree programmes is the responsibility of the University Research Degrees Committee, subject to the approval of Academic Board. In turn, the University Research Degrees Committee uses its authority to delegate some operational processes to Faculty Research Degree Committees. There are student representatives on both the central and faculty committees.

100 The management of the administration of research degree programmes is conducted by the Postgraduate Research Centre, which is part of the Research Office. Its remit includes all aspects of admissions, enrolment, induction, registration, progress monitoring and examinations. It is also responsible for monitoring the research environment for students.

101 The audit team considered these overall institutional arrangements to be satisfactory apart from the fact that the terms of reference of the University Research Degrees Committee specifies that its chair is the Head of the Postgraduate Research Centre. The audit team was concerned that this arrangement could potentially lead to a conflict of interests. It also noted that the University Research Degrees Committee is responsible for approving and monitoring various aspects of the work of the Postgraduate Research Centre including, for example, the scrutiny of forms relating to extensions, changes of supervisor and examinations. Given this, the team concluded that this was not the most robust arrangement and it strongly encourages the University to review accordingly the terms of reference of the University Research Degrees Committee relating to its chair.

102 The University publishes a Handbook of Regulations and Procedures which sets out the regulations and procedures for all research degrees. The audit team found this to be readily accessible and comprehensive. The team also examined a more informal Student Handbook and Code of Practice which had been made available to students in some years previously but not in the 2009-10 academic year. The team found that this Code of Practice appeared to form a useful complement to the formal Handbook and encourages the University to continue to make updated versions available to both staff and students.

103 The audit team examined a range of documents for evidence of systematic monitoring and analysis of the performance of research degree programmes. In the absence of any clear statements on performance indicators or targets, associated with the lack of transparent data on completion rates within and across the University, the team formed the view that currently the University was failing to adequately monitor the performance of its research degree programmes. This led the team to judge that standards and the quality of learning opportunities relating to research degree programmes are potentially at risk and advises the University to implement and fully operate procedures for the rigorous monitoring of the success of postgraduate research programmes against internal and/or external indicators and targets.

104 All candidates are interviewed by at least two members of staff, one of whom will usually be a potential supervisor. The Faculty Research Director normally chairs interviews in order to provide consistency and experience. A confidential equal opportunities form accompanies all applications for admission and these are subsequently collated for monitoring purposes. A Training Needs Analysis is undertaken both at interview and during the formal student induction process, which also includes an introduction to various procedures and regulations. The audit team was satisfied that these procedures were in alignment with the *Code of practice, Section 1: Postgraduate research programmes*.

105 All research students have a team of at least two supervisors and there must be experience of at least one successful research degree completion at the appropriate level within the team. Supervisors new to research supervision are generally attached to a supervisory panel with an experienced supervisor and are required to undertake the core modules from the University's Research Supervisors' Support Programme. Continuing and experienced supervisors are also expected to attend some sessions from this programme.

106 The team noted that the 2006 QAA Review of research degree programmes recommended that the University may wish to consider putting a limit on the number of students that a member of staff can supervise. However, the audit team was unable to find any formal statement of an upper limit and considers that the current arrangement, although apparently creating no cause for concern at present, is unsustainable. The team strongly encourages the University to introduce a formal statement of a maximum supervisory load, which should only be exceeded in exceptional circumstances and with the permission of Academic Board.

107 It is intended that the progress of all research students is monitored annually via the submission of a feedback form that is completed by both the student and the supervisor in a student-led process. The forms are subsequently read by the appropriate Faculty Research Director. The audit team saw evidence that the rates of return of annual monitoring forms were

generally low and considered this to be a significant and ongoing problem across the University. The team also noted that there were no formal reviews of student progress other than those involved in the upgrade of registration from MPhil to PhD. As a result the view was formed that the overall arrangements for monitoring the progress of research students are inadequate and potentially putting academic standards and the quality of learning opportunities at risk. In consequence, the audit team advises the University, in alignment with the *Code of practice, Section 1: Postgraduate research programmes*, to establish clearly defined mechanisms for formal progress reviews of postgraduate research students.

108 All research students are expected to participate throughout their studies in various generic skills training courses run by the University. This includes a module on the PGCHE which is available to research students undertaking teaching. There is also an annual Summer School which provides an opportunity for research students to present their work in a semi-formal setting. The audit team encourages the University to continue and develop this initiative.

109 Research students expressed their concern to the audit team over the lack of opportunities for developing teaching skills and that they had expected some to be available when they had applied to the University for research study. The feedback from research students presented in the 2009 Postgraduate Research Experience Survey also appears to support this concern. Considering the importance of the development of teaching skills to some research students, the team strongly encourages the University to explore ways in which more teaching opportunities could be made available to postgraduate research students as part of the wider personal and professional development provision. The team also noted that the University advertises on its web site that many of its Schools provide opportunities for undertaking some teaching work if appropriate. The team suggests that the University review the associated promotional material to reflect the current situation accurately.

110 The annual progress report gives students the opportunity to provide feedback on various issues such as the provision of learning and information resources and training courses. However, as already noted above, the rates of return of these reports are low. Research students may also provide feedback to the University through their representatives on the University Research Degrees Committee and Faculty Research Degree Committees. The team heard that student representation on these committees was active. The audit team recognises that the University is aware of the noticeable lack of feedback they are gaining from research students and that it is attempting to remedy the problem. The team supports the University in its efforts in this regard and encourages them to explore yet more ways in which to generate and act on feedback.

111 Normally there are at least two examiners and one examiner must be external to the University. Students have clearly defined routes of appeal in the case of complaints or grievances. The audit team was satisfied that the assessment procedures for Research Degree Programmes as described in the Handbook of Regulations and Procedures are aligned with the *Code of practice, Section 1: Postgraduate research programmes*.

## **Section 7: Published information**

112 The University has appropriate procedures for assuring the accuracy of all published information, including that produced by collaborative partners. It has produced an Admissions Digest which adheres to the *Code of practice* and is mapped against the different precepts. Guidance on the production of materials is given by central Marketing for publicity, promotional and course information and additionally by the Disability Services on accessibility of student materials. However, the students that the audit team met, and the views expressed in the Students' Written Submission, varied on the extent of the accuracy of all the published information and the speed with which the University updated information that was relevant to their experience.

113 Students were aware of the complaints and appeals procedures, though none reported having used these, and knew where to locate information about these.

114 The audit team was able to verify that the University provides the type of information required by Annex F of HEFCE Circular 06/45 and that, in general, the information placed on the Unistats and UCAS websites and on their own University of Gloucestershire website is accurate. However, the team noted that some updating was needed and encourages the University to develop a timetable of regular and frequent checks, linked to any changes that may be taking place in courses or learning resources or in the location of pages of its website, both on its intranet and on its internal and externally facing websites and that links from external websites are current and that changes and developments in the University are communicated in a timely fashion.

115 The audit team concluded that, in general, 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.

## **Section 8: Features of good practice and recommendations**

### **Features of good practice**

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

- the Admissions Digest, which brings together the principles and processes for considering applications, promotes a standardised approach across all faculties and comprehensively links to a number of sections of the Code of practice (paragraph 65)
- the Helpzones, which provide an effective one stop shop facility and enhance the access and level of support provided to students (paragraph 68).

### **Recommendations for action**

117 Recommendations for action that is advisable:

- establish and formalise processes to ensure that the quality of learning opportunities for continuing students continues to be maintained once the proposed unified academic award incorporating new assessment regulations are introduced (paragraph 29)
- implement and fully operate procedures for the rigorous monitoring of the success of postgraduate research programmes against internal and/or external indicators and targets (paragraph 103)
- establish clearly defined mechanisms for formal progress reviews of postgraduate research students (paragraph 107).

118 Recommendations for action that is desirable:

- introduce a systematic mechanism for monitoring minor changes on programmes between periodic reviews (paragraph 13)
- clarify to students and staff the communication channels available to students to bring forward their views and be involved in quality management processes (paragraph 50)
- develop a clearer communication, evaluation and dissemination strategy in approaching change and developments (paragraph 80).

## **Appendix**

### **The University of Gloucestershire's response to the Institutional audit report**

The University welcomes the audit report and is pleased to note the expression of confidence in our present and likely future management of academic standards and of the quality of learning opportunities available to students.

The audit took place during a time of reflection on our internal academic systems and structures, and the audit team was informed of, and discussed with us, the proposed changes and the measures we intend to put in place to ensure that the standards of our awards and the student experience continue to be safeguarded as we move through a significant restructuring process.

We have taken careful note of the audit team's recommendation relating to the maintenance of the quality of learning opportunities as we introduce the unified assessment regulations from September 2010, and a formal monitoring group (with external input) has been established to this purpose. The report also recommended action to fully implement procedures for the monitoring of students on postgraduate research programmes, and these systems will be in place during the coming autumn term, as will the recommended mechanisms for progress reviews.

Further recommendations related to our ensuring that effective communication channels are available for students as we move through a process of change next year and beyond. These recommendations are fully accepted and the communications with both staff and students will form a key part of our thinking as we restructure both the estate and the academic management systems.

Finally, we should like to formally thank the members of the audit team for the constructive and open dialogue during the audit process, and for their critical insight and the many helpful suggestions contained in the audit report. These will inform our thinking as we move through an important period of structural change.

**The Quality Assurance Agency for Higher Education**

Southgate House  
Southgate Street  
Gloucester GL1 1UB

Tel 01452 557000  
Fax 01452 557070  
[www.qaa.ac.uk](http://www.qaa.ac.uk)

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