



QAA



University of Glamorgan

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Institutional review

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Preface

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

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

The purpose of Institutional review

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

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

Judgements

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

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

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

Nationally agreed standards

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

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

The review process

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

The main elements of Institutional review are:

- a preliminary visit by QAA to the institution nine months before the review visit
- a self-evaluation document submitted by the institution four months before the review visit
- a written submission by the student representative body, if they have chosen to do so, four months before the review visit
- a detailed briefing visit to the institution by the review team five weeks before the review visit
- the review visit, which lasts five days
- the publication of a report on the review team's judgements and findings 22 weeks after the review visit.

The evidence for the review

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

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

The review team also gathers evidence by focusing on examples of the institution's internal quality assurance processes at work using 'thematic trails'. These trails may focus on how well institutional processes work at local level and across the institution as a whole.

Institutions are required to publish information about the quality and standards of their programmes and awards in a format recommended in document 04/05 *Information on quality and standards in higher education*, published by the Higher Education Funding Council for Wales.

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Summary

Introduction

A team of reviewers from the Quality Assurance Agency for Higher Education (QAA) visited the University of Glamorgan (the University) from 24 to 28 November 2008 to carry out an Institutional review. The purpose of the review was to provide public information on the quality of the opportunities available to students and on the academic standards of the awards that the University offers. To arrive at its conclusions the review team spoke to members of staff throughout the University and to students. It also read a wide range of documents relating to the way the University manages the academic aspects of its provision. The words 'academic standards' are used to describe the level of achievement that a student has to reach to gain an award (for example, a degree). It should be at a similar level across the United Kingdom (UK).

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

Outcome of the review

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

- confidence can be placed in the soundness of the institution's current and likely future management of the quality of its academic programmes and the academic standards of its awards.

Features of good practice

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

- the mechanisms in place to maintain the academic standards of awards across partnership institutions
- the strengthening of student representation, notably through the roles of the Student Representatives' Co-ordinator and Student Voice Representatives.
- the clear alignment of the processes around staff appointment, support and development with the University's strategic aims
- the strong commitment to a range of services to support and enhance the student experience.

Recommendations for action

The review team considers it advisable for the University to:

- ensure that institutional oversight of quality assurance outcomes is more transparent
- review the timeliness of the signing of Memoranda of Understanding with collaborative partners to ensure that contractual arrangements are in place before students on collaborative programmes are admitted
- ensure consistency of practice across collaborative provision in line with the University's quality assurance requirements.

The team considers it desirable for the institution to:

- keep under review the development of faculty practice in order to enhance further the student experience.

National reference points

To provide further evidence to support its findings the review team also investigated the use made by the University of the Academic Infrastructure which QAA has developed on behalf of the whole of UK higher education. The Academic Infrastructure is a set of nationally agreed reference points that help to define both good practice and academic standards. The findings of the review suggest that the University makes full and effective use of external reference points, including the Academic Infrastructure and the *Credit and Qualifications Framework for Wales* and the Welsh Language Board. The University also promotes implementation of the higher education policies of the Welsh Assembly.

Main report

Section 1: Introduction: University of Glamorgan

1 An Institutional review of the University of Glamorgan (the University) was undertaken from 24 to 28 November 2008. The purpose of the review was to provide public information on the quality of the University's programmes of study and on the academic standards of its awards.

2 The review was carried out using a process developed by the Quality Assurance Agency for Higher Education (QAA) in partnership with the Higher Education Funding Council for Wales (HEFCW). For institutions in Wales it replaces the previous process of continuation review, undertaken by QAA at the request of Universities UK and the Standing Conference of Principals. Institutional review also replaces assessments and engagements relating to the quality and standards of provision at subject level. The former were undertaken by HEFCW and the latter were undertaken by QAA on behalf of HEFCW as part of HEFCW's statutory responsibility for assessing the quality of education that it funds.

3 The review checked the effectiveness of the University's procedures for establishing and maintaining the standards of its academic awards; for reviewing and enhancing the quality of programmes of study leading to those awards; and for publishing reliable information. The scope of the review encompassed all of the University's provision and collaborative arrangements leading to University of Glamorgan awards.

The institution and its mission

4 The University traces its ancestry to a School of Mines founded in 1913. It became Glamorgan Polytechnic and later The Polytechnic of Wales until it was designated the University of Glamorgan in 1992.

5 The University is located on five campuses in South-East Wales. Two are at Pontypridd: the Trefforest Campus which houses the Glamorgan Business School, the Faculty of Humanities and Social Sciences, and the Faculty of Advanced Technology; and the Glyntaf Campus where the Faculty of Health, Sport and Science is based. Two campuses are in Cardiff: the ATRiuM, a new and advanced learning centre, opened in September 2007 for the Cardiff School of Creative and Cultural Industries, and the Royal Welsh College of Music and Drama (RWCMD) which joined with the University in a 'strategic alliance' on 1 January 2007.

6 Although a wholly-owned subsidiary company of the University, RWCMD retains its name and distinctive identity as a national conservatoire. It operates as if it was a faculty of the University, with the same powers and responsibilities as other faculties, and is subject to the University's regulations and procedures for academic standards and quality. Students have been admitted to University programmes from September 2007, with the awards from the previous awarding institution being phased out.

7 Merthyr Tydfil College, formerly a collaborative partner of the University, was merged with it in May 2006, and became the base of a Further Education Faculty which operates in the same way as the other faculties. The University, RWCMD and Merthyr Tydfil College are collectively known as the 'Glamorgan Group'. At the time of the review the University employed about 1,800 staff, including 400 staff at RWCMD and Merthyr Tydfil College. There were also 21,496 students registered for University awards, including 10,227 full-time and 8,013 part-time undergraduates; 1,393 full-time and 1,863 part-time students were on postgraduate programmes, of which 430 were research students. The University had some 3,714 European Union (EU) and international students equating to 16.8 per cent of the student cohort.

8 From its earliest days as a School of Mines at Trefforest, the University has been strongly committed to supporting local and regional communities, and its achievements in widening access and extending social engagement are recognised widely in Wales. The University's self-evaluation document (SED) noted that the University and its collaborative partnerships have made major contributions to the achievement of Welsh Assembly Government targets for widening participation and social inclusion.

Collaborative provision

9 The University has a long history of collaborative partnerships and, at the time of the Institutional review, had 3,333 students in partner institutions, some 14.7 per cent of the total student cohort. Over 3,000 of these were in further education colleges (FECs) in Wales, where most of the collaborative provision is located. These partnerships play a very significant part in achieving the University's strategic aims for widening access to higher education. Of its 15 FEC partners three are designated as accredited colleges. The University also collaborates with two private colleges and 11 training organisations in the United Kingdom. It has 43 European partners, mainly in France, Germany and Ireland; and 25 international partnerships, particularly in Canada, China, Hong Kong, Malaysia and Singapore (see paragraph 199).

Background information

10 The information available for this review included:

- information published on the University's website
- the Quality Audit report, September 2000
- the report on QAA's special Review of research degree programmes, 2006 (not published)
- the University's SED for the Institutional review
- the student written submission (SWS)
- supporting documentation linked to the SED.

11 The review team also had access to a range of the University's internal documents, including documents relating to the thematic trails selected by the team.

The review process

12 QAA conducted a preliminary visit to the institution in March 2008 to discuss operational aspects of the review. QAA received the SED on 1 September 2008.

13 The review team visited the University on 14 to 16 October 2008 for the purpose of exploring with the Vice-Chancellor, senior members of staff and a student representative matters relating to the management of quality and standards raised by the SED and other documentation provided for the team. During this briefing visit the team signalled a number of themes for the review visit and developed a programme of meetings which was agreed with the University

14 The review visit took place from 24 to 28 November 2008 and involved further meetings with staff and students of the University. The review team comprised Professor T Cryer, Mr A Hunt, Professor D Meehan, Dr C Vielba, and Mr T Platt, review secretary. The review was coordinated for QAA by Mrs E Harries Jenkins, Assistant Director, Reviews Group.

Developments since the previous academic quality audit

15 QAA carried out an audit of the University in 2000. Four 'advisable' recommendations were made relating to the institution's committee structure, annual monitoring, the management of external examining, and the staff probation system. Most of the work to address has continued over the period from 2000 with further changes taking place after the appointment of the present Vice-Chancellor in 2005. The institution's structure, committees and their reporting lines have been reviewed and revised (see paragraph 23). Changes have been made to the annual monitoring process, particularly its timing (see paragraph 50). New systems for the tracking and management of external examiners' reports are now managed by the Quality and Policy Office (see paragraph 92). Staff probation arrangements have been reviewed; academic staff new to teaching must now take a Postgraduate Certificate in Learning and Teaching (see paragraph 147).

16 Since the last audit, QAA carried out a Review of research degree programmes in 2005-06; it produced no major issues for the University to address (see paragraph 106).

17 At the time of the Institutional review, two of the University's partner FECs had been subject to QAA Developmental reviews. The reports of these reviews have recently been considered by the Quality Audit Committee (QAC) which noted that the outcomes of both reviews had been positive (see paragraph 106).

18 The SED summarised the very extensive changes which have taken place at the University since the Vice-Chancellor's appointment in 2005. The University's strategic priorities have been redefined, with particular focus on the student learning experience and pedagogical enhancement. The University has been restructured into five faculties with significant devolved powers and responsibilities. Central support services have been restructured and merged into corporate departments. Institutional and faculty committees have been reorganised. The University's estate has been enhanced through the building of the ATRiuM in Cardiff and development of the Trefforest, Glyntaf and Merthyr Tydfil campuses. These changes and their outcomes are discussed in relevant sections of this report.

Section 2: The review investigations: institutional processes

19 The self-evaluation document (SED) highlighted the following features as central to the University's systems for the assurance of its academic standards and quality: structures and procedures for student support; universally-applied regulations and procedures for assuring standards; transparent and well-communicated arrangements for governance; opportunities for staff development; 'enhancement focused investment', processes which lead and support enhancement; and the effective management of major changes. The University also expressed confidence in its arrangements for approval, monitoring and review.

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

20 The University's Directorate comprises the Vice-Chancellor, four pro vice-chancellors with responsibilities for Academic Development, Learning and Student Support, Research and Resources respectively, and the University Secretary. It meets weekly and has regular meetings with deans, heads of services, heads of partner colleges and the officers of the Students' Union. The Directorate also meets regularly with the Senior Management Team of the Royal Welsh College of Music and Drama (RWCMD) and Merthyr Tydfil College.

21 The SED states that the Directorate operates centrally as a 'collective executive' for quality management. Its responsibilities interlock with those of faculties: thus deans report to the Vice-Chancellor, and members of the Directorate 'maintain active links' with faculties, for example, by sitting on faculty boards. All deans and members of the Directorate are members of Academic Board.

22 Central services, known as corporate departments, are the Academic Registry; Campus Services; the Centre for Excellence in Learning and Teaching; the Centre for Lifelong Learning; the Commercial Services Office; Estates and Facilities; the European and External Resource Office; Finance; Health and Safety; Human Resources; Learning and Corporate Support Services (LCSS); Marketing and Student Recruitment; the Research Office; and Student Services. Members of the Directorate are each responsible for designated central services.

23 Academic Board has institutional responsibility for academic standards and quality; it is chaired by the Vice-Chancellor, and approves the University's regulatory frameworks, with the Quality Audit Committee's (QAC) advice. Academic Board and its committees were restructured in 2006. The key committees responsible for academic quality and standards are QAC; Quality Enhancement Committee (QEC); Academic Development Committee (ADC); and the Collaborative Committee. QAC, in its key institutional role in the assurance of academic standards and quality, is assisted by subgroups including a Research Programmes Sub-group and a Regulations and Examiners Sub-group. Postgraduate research provision is overseen by the Research and Scholarship Committee. All Academic Board committees are chaired by members of the Directorate. Terms of reference and memberships of all these bodies are set out in the Calendar of University Events.

24 RWCMD has its own Board of Directors which reports to the University's Board of Governors. Although it is treated as if a faculty, it has its own Academic Board and committee structure which are integrated into the University's committee structure through mutual representation on key committees. The review team found that these arrangements worked effectively.

25 The SED states that the University's six faculties have a high level of devolved responsibility which is delegated to them 'within a clear overall academic policy framework and executive structure'. Deans have overall responsibility for quality in their faculties, and module, subject or scheme leaders, and divisional or departmental heads, carry specific responsibility for managing quality within their defined areas. Each faculty agrees its own individual 'organisation and management arrangements' with the Directorate. At faculty level, faculty boards are subcommittees of Academic Board. Faculty board chairs are elected from the faculty; they are also ex officio members of Academic Board. All faculties have faculty quality assurance committees (FQACs), and Faculty Research Programme Committees which oversee postgraduate research provision and report to the Research Programmes Sub-group of the Quality Assurance Committee. Faculties also have Learning, Teaching and Student Experience Committees, and Research and Scholarship Committees, which report to their faculty boards.

26 FQACs have extensive responsibilities for quality assurance, including the approval and periodic review of most programmes on-campus and in collaborative provision. Where provision is in subject areas new to the University, approval is undertaken by QAC (see paragraph 44). FQACs' memberships are approved by QAC; they include independent members of other faculties, one of whom is the chair. Some FQACs, especially in large faculties, are assisted by subgroups. The review team found that committee functions, and their interrelationships, were not always clearly understood by staff or explained. For example, the team was told that overall responsibility for programme approval lay with QAC; however, in the same meeting it was difficult to establish whether QAC could require a remedy from a FQAC; and in another meeting it heard that QAC could not overrule a FQAC's approval of a programme. In another instance, the team heard two explanations, at the same meeting, of the status of a Faculty Academic Development and Quality Committee, a subgroup of one faculty's FQAC.

27 At RWCMD, the College Quality Assurance Committee (CQAC) has a role equivalent to that of a FQAC, and also reports to QAC.

28 The Quality and Policy Office has been part of the Academic Registry since 2007. The review team heard that it supports quality assurance processes in the faculties in an advisory capacity. The Quality and Policy Office supports the faculties' quality administration by leading a Quality Managers' Sub-group which includes faculty quality officers and similar roles at RWCMD, and reports to the Senior Administrative Forum.

29 The University's framework for managing standards and quality is set out in the Academic Handbook, which applies to all the University's provision and includes a section on 'Collaborative Activity'. The Handbook, and any amendments, are approved by QAC; regulations and regulatory changes are approved by Academic Board. The review team learnt that the Academic Handbook was updated regularly, and that staff were advised about these changes via 'INFORM', the University's

intranet. RWCMD has adopted the University's Academic Handbook, adapting it to reflect local nomenclature and structures as appropriate.

30 The SED stated that the University's regulatory and procedural framework is 'applied universally across all its provision [providing] for consistency in application and for the maintenance of standards'. The review team explored the mechanisms through which the University maintained its institutional oversight of these universal applications. It found evidence that Academic Board, through such functions as the approval of regulations and the receipt of annual summaries of external examiners' reports, was able to exercise effective oversight of academic standards across the University's provision. However, the team found difficulty in confirming consistently effective institutional oversight of the quality assurance functions delegated to FQACs. While, for example, members of QAC helpfully act as critical readers of FQAC minutes, they did not generally consider the supporting documentation (such as committee papers) made available to them and thus would have a limited overview of the matters discussed. Consideration of any papers was at the discretion of the individual. The team also found a lack of transparency in the upward reporting of quality assurance processes within faculties, and from faculties to institutional committees (see paragraphs 47, 49, 204). Anomalies in approval process documentation appeared to be unchallenged by QAC (see paragraph 204). In addition, the team found that the transparency of approval or re-approval reports was limited, in some cases, by the lack of important details such as a full list of attendees. Attendance at institutional committees such as QAC and ADC was also obscured by the same lack of detail. The team concluded that these inconsistencies in the committee reporting process prevented the University from realising the full value of its devolved structure while also maintaining consistent oversight of quality at institutional level.

31 The SED noted that the University's commitment to a devolved model of quality assurance over the last seven years is grounded in the maturity and confidence of an institution with over 30 years' experience in offering modular provision based on credit accumulation. The review team observed that the devolved processes were still being embedded within the comparatively new faculty structure, and that the institution was subjecting them to continuous review. This appeared to be an appropriate and measured approach. The team also noted a tendency to place reliance upon the 'maturity of the faculties' in the context of institutional oversight although most of them were founded, in their present forms, as recently as 2006. The team concluded that, as the University continues to evaluate and develop its structures, it should ensure that its institutional oversight of quality assurance outcomes is more transparent, having particular regard to the matters reported elsewhere in this report (see paragraphs 49, 73, 204, 219).

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

32 The University's Strategic Plan and Key Strategic Priorities established in 2005 demonstrate a strong institutional commitment to the enhancement of the student experience and of its learning infrastructure. The University's Key Strategic Priorities are supported by key performance indicators. Improvement of the student experience is given first place among the University's strategic priorities, and in 2007-08 the institution undertook a major analysis and evaluation of its needs through the Student

Expectations Project. This provided a clear sense of potential for enhancement and made recommendations for development in a number of areas including student support, assessment and representation. Student representatives welcomed and applauded the Student Expectations report, and the review team noted that it had already proved a very influential force for enhancement.

33 QEC takes a leading institutional role in enhancement. Its membership includes representation from the Centre for Excellence in Learning and Teaching (CELT) and all heads of learning and teaching who lead enhancement initiatives in their faculties. Heads of learning and teaching are supported and advised by faculty learning, teaching and student experience committees. QEC identifies key areas for enhancement, drawing on information from CELT and from heads of learning and teaching. CELT derives information about needs for enhancement from its analyses of National Student Survey (NSS) data and its monitoring of faculties' responses to student feedback. Heads of learning and teaching provide overview data from their faculties' monitoring reports. Faculties report to QEC on their action plans to address the NSS results. Institutional enhancement projects launched by QEC have included an Assessment Policy (see paragraph 77). QEC reviews and evaluates these projects through reports received from CELT and faculties, and makes annual reports to Academic Board.

34 The SED stated that the institution's oversight of quality assurance and quality enhancement are closely linked. The review team noted that the links between these functions, and particularly the relationship between QAC and QEC, have been reviewed recently, and that measures were being taken to coordinate the work of these committees. Students have a role in enhancement through the NSS and various internal feedback and representation schemes.

35 Recruitment and retention of students are the 'dominant planning theme', and the SED provided numerous examples of enhancement projects and measures in support of this. Particularly important developments to enhance student support have included the establishment of faculty advice shops (FAS) (see paragraph 182) and campus education drop-in centres (see paragraph 176). Students told the review team that communications have been further enhanced with the launch of personal student portals within the 'GlamLife' website.

36 Enhancement of learning and teaching is identified as another key area for action in support of Key Strategic Priorities. The Learning, Teaching and Assessment Strategy 2007-12 drives enhancement; the SED states that it is 'well embedded' and 'underpins all aspects of the University's operation'. CELT has an active central role in staff development for learning and teaching (see paragraph 157). Its website publicises good practice across the institution, and it manages the Glamorgan Online Research Unit which facilitates pedagogical research development. Excellence in Learning and Teaching Awards are offered. Staff met by the review team affirmed the value of CELT's contribution to the development and spread of good practice.

37 The review team was told that the University reviews and evaluates its enhancement projects at institutional level. For example, FAS are seen as an important means of providing student support, and the institution is seeking to demonstrate their effect on retention. In areas such as improvement of student achievement the University is looking to learn from its further education college (FEC) partners.

38 The University believes that its structures and appointments for leading and reviewing enhancement, together with its strong commitment to staff development, have 'further engendered a University culture committed to high quality student-centred learning'. In the light of the evidence which it saw and heard, the review team concluded that this was substantially so.

39 The University's commitment to enhancement of the student experience is demonstrated by measures such as its powerful and effective Student Expectations Project and report. Enhancement projects launched by QEC are having positive impacts, for example, in assessment practice (see paragraph 77). CELT plays a valuable and influential role in leading and coordinating enhancement. However, to inform and equip the University even better for continuing enhancement of the student learning opportunities, it should keep under review the development of practice within faculties, having particular regard to key information sources such as monitoring and student feedback.

Internal approval, monitoring and review processes

Programme approval

40 The University's programme approval processes are intended to check strategic fit, resources, compatibility with external reference points and conformance with regulations. Potential new awards and major amendments are generally identified at faculty level through annual review and planning processes, and articulated in the Faculty Strategic Plan. Formal approval to proceed with a proposal is given by Academic Board. Academic Board uses a model of programme approval and validation known as the Curriculum Lifecycle Business Process. The new model is currently being implemented.

41 The same processes of programme approval also apply to programme re-approval, which is undertaken through periodic review, also referred to as quinquennial review or revalidation of taught programmes (see paragraphs 56 to 63).

42 The first stage of approval involves the submission by the faculty of a course proposal form and, in the case of new subject areas, a full business case. The same process covers major amendments, deletion of courses, advanced standing schemes, Erasmus proposals, and proposals for programme changes undertaken as part of periodic review. Where the proposal is for collaborative provision and a new partner is involved a full risk assessment of the partner is required (see paragraph 203).

43 An annual cycle of submission dates has been defined. Course proposals are loaded onto a shared electronic folder and interested parties are given 10 days after the quarterly deadline in which to raise objections and make comments. Proposals and feedback are discussed at the next available ADC: decisions are

recorded in an appendix to the committee's minutes and posted on the shared electronic folder. The process involves consultation with contributing faculties and LCSS.

44 Planning approval, given by ADC, lasts for a year or six months prior to proposed implementation in the case of a new award, whichever is sooner. The level at which the final approval of the proposal will occur could be at either faculty or institutional level and is determined by QAC, dependent on the perceived level of risk. This decision is normally taken through the chair's action. The chair of QAC also determines the appropriateness of adopting a fast-track approach to validation which is available in certain circumstances. Most validation decisions are delegated to FQAC or CQAC (for RWCMD). Normally QAC only deals with validations in new subject areas, and with some new collaborative and distributed learning awards.

45 After planning approval has been given, the faculty proceeds with developing the proposal and a date is set for it to be presented to a panel of FQACs, College Quality Assurance Committees or QAC as appropriate. The Academic Handbook does not provide detail on the composition or approval of validation panels, although it provides guidance on the roles of different members. Documentation read by the review team demonstrated that panel chairs are approved by FQAC, CQAC or QAC. Panels involve both internal and external members which are approved by the chair of the panel and reported to the relevant level of the quality assurance committee. Some external members are drawn from within the University from other faculties. However, all approval events are required to have an element of independent externality. External involvement in programme approval is discussed in detail in paragraphs 64 to 74 below.

46 The actual process of validation depends on the scale and the nature of the proposals involved. The full process involves a meeting of the validation panel. An abbreviated process is in place which is used where the majority of modules including the new award are already approved. In this case the chair and the secretary of the panel determine whether or not a meeting is required or whether the approval can be signed off by correspondence.

47 Panels have the delegated power to approve programme proposals conditionally or unconditionally and to make recommendations for the faculty to consider. Conditions have to be signed off by the chair of the panel in consultation with the panel secretary. Approval decisions are recorded in the minutes of the relevant quality assurance committee, either FQAC, CQAC or QAC and reported upwards, the first two via QAC, to Academic Board. The review team noted that the recording of approval decisions by panels was largely a formality and higher committees did not normally exercise active oversight of decisions. After approval, copies of the approved programme's definitive documentation must be lodged both centrally and locally.

48 Module approval and the approval of minor amendments are delegated to faculties. Some faculties have set up sub-committees to deal with the detail of this work. For example, the Business School FQAC has a Minor Amendments, Validation and Review Sub-Committee to undertake such work. The review team noted that on a number of occasions amendments were approved retrospectively against University requirements.

49 The SED stated that the University was confident of the appropriateness and the effectiveness of its arrangements for internal approval of programmes. The review team broadly concurs with this view. However, the University should review the ways in which the different levels of quality committees work together to ensure that where responsibilities are delegated there is active oversight. The University may also wish to consider whether the coverage of the Academic Handbook is sufficient to ensure consistency of processes for approval across the institution.

Annual monitoring

50 The SED stated that annual monitoring is the means through which 'the continuous enhancement of taught and research programmes, both in terms of academic standards and the quality of the student experience, is achieved'. The procedures for annual monitoring were reviewed recently by QAC and strengthened by the adoption of standard reporting templates, improved fit with the strategic planning process, and provision of improved statistical data through student achievement performance indicators (SAPI). Measures to strengthen the monitoring of collaborative provision were also introduced (see paragraph 211).

51 Multiple evaluative reports are produced on an annual basis which contribute to a faculty annual monitoring report. A report is produced for each module using a standard template which covers student performance, student feedback, reflection by those teaching, and points for action. Monitoring reports are also produced for schemes and awards and present a wide ranging review of operations over the previous year. These reports also include areas identified as good practice as well as action plans. RWCMD and partner colleges also produce annual monitoring and evaluation reports for University awards that they deliver. All these reports in turn contribute to the production of subject and departmental or divisional reports that reflect on the activities in the subjects as well as staffing. Further input to the faculty report comes from external examiners' reports; student feedback; assessment boards; professional, statutory and regulatory body (PSRB) reports; student statistics and staff development data. The faculty report is a substantial document which not only reviews the past year and action on previously identified issues, but also proposes an action plan for the coming year. The dean prepares a summary of the faculty report, focusing largely on the action plan. The report and the summary are submitted to the chair of FQAC.

52 FQAC oversee the annual monitoring processes in the faculties. A subgroup of FQAC, including the chair and external members, meets with the dean and senior staff to audit the annual monitoring process and review the reports prepared during the monitoring cycle. The subgroup has the authority to require changes to be made to the dean's summary before it is submitted to QAC and make recommendations for improvements to the process in subsequent years. The scrutiny report of the subgroup is presented to QAC alongside each dean's summary. QAC formally signs off the annual monitoring process for each faculty and reports the process upwards to Academic Board.

53 The annual monitoring process is described in detail in the Academic Handbook which also includes templates for preparing module, subject and award reports. The review team saw examples of annual monitoring reports produced under the revised system and were able to confirm that the processes described in the Handbook were followed and that action was taken by QAC to remedy any shortcomings.

54 Faculties conduct an annual monitoring exercise on the progress of all their research students. The format for this is not prescribed, but it must be demonstrably rigorous. The annual reports resulting are considered by the faculty research programme committees which report to QAC.

55 The University expressed confidence in its annual monitoring and related action planning. On the basis of the evidence seen by the review team, this confidence is reasonably placed. The annual monitoring process is thorough and brings together a wide range of evidence regarding quality and standards. Broad consistency is achieved across the institution and there are built-in mechanisms for audit and oversight so that the University assures itself that the process is working effectively.

Periodic review

56 The University undertakes three different types of periodic review. The first, known as periodic or quinquennial review or revalidation, focuses on the operation and continued relevance of individual or groups of programmes and awards. It takes the form of a revalidation. The second type is internal subject review (ISR) which takes a comprehensive view of all academic provision, taught, research and collaborative, in a subject area. Thirdly, the University undertakes a number of thematic audits, some of which have a direct bearing upon course provision. The latter are discussed at other points in the report (see paragraph 217).

57 The SED noted that periodic review builds on the cumulative outcomes of annual monitoring, including input from external examiners; student feedback; PSRB reviews; and ISRs. The process of revalidation follows the process of initial programme approval described above. Periodic review is carried out at a maximum interval of six years. The scheduling and scope of a periodic review, for example, whether it will cover individual programmes or an entire faculty, are agreed between faculties and ADC.

58 ISR was introduced in 2005. A separate handbook has been written for this process which complements the description of the process available in the Academic Handbook. The process requires the completion of an SED that examines strengths and weaknesses, and opportunities for enhancement in the subject area. The review is based on QAA's Subject Review process and includes consideration of learning outcomes, curricula, teaching, learning and assessment and learning resources. It is intended to be critical and reflective. The review is undertaken by a panel chaired by a member of QAC and includes faculty, university and external members. The panel receives the SED and a wide range of University and faculty documents, programme details and student work.

59 The panel meets twice; initially in some cases without the internal or external members who are able to submit written comments to identify issues and confirm the review programme (see paragraph 70). The second and main visit lasts between one

and three days and involves the full panel meeting with staff and students and tours of facilities. The outcome of the review is a report from the panel to QAC and Academic Board with recommendations for future development of the subject area.

60 The effectiveness of the ISR process was reviewed in 2006-07 and some changes made to its administration and scope. These reviews are now managed by faculties, although the chairmanship and membership must be agreed by QAC. Three months after the completion of a review the subject leader presents a response to the report and its recommendations to QAC.

61 Periodic review normally operates on a five or six-year cycle; ISR operates on a six-year cycle. The SED stated that an outcome of the 2006-07 review was that the scheduling of the two processes, ISR and periodic review, is now coordinated more effectively to enable subject review to inform periodic review better. The University has published a six-year calendar of ISR events. However, there is no similar calendar for periodic review, hence the relationship between the two processes remains variable in time.

62 Before the completion of the strategic alliance with the RWCMD in 2007, a special review of the College's provision was conducted involving both subject review and revalidation. In the future, review at RWCMD will be aligned with the rest of the University.

63 The review team saw examples of both types of major review, and were able to confirm that they constituted effective processes for assuring and enhancing the quality of academic provision.

External participation in internal review processes

64 The SED stated that independent external judgement is a key feature at each point of the academic cycle from programme development and approval through reapproval and review of programmes and subject areas. Some of this external input comes from external examiners whose role is discussed below (paragraph 85 onwards). Other input comes from external consultants, and external members of panels established for programme approval and review events. The occupants of these roles may come from either academia or practice.

65 Teams developing new awards are expected to undertake market research and to consult with academics in other institutions on their proposals. The Academic Handbook states that at faculty level, 'all approval events...requires some element of independent externality' but that a 'lighter touch' may be employed where awards involve largely approved modules (see paragraph 46). Where approval events are held at university level greater externality is required. Similar requirements are reflected in the Academic Handbook for RWCMD.

66 Although the Academic Handbook does not specify how many external members are required for an approval or reapproval panel, the guidance maps out two roles for external panellists: one is the external academic panellist who provides advice during the development process and in relation to academic and resource issues and comments on the syllabus content; the second, the external practitioner, looks at the

proposal from the point of view of the profession, or the prospective employer, to ensure that it meets their needs.

67 Where a full approval or validation event takes place, external members attend. Where an abbreviated process has been agreed by QAC (see paragraph 46) the external members provide written comment which is then considered by the chair and secretary of a panel appointed by QAC.

68 There are additional variations on these processes that operate in other circumstances. One or more external academics are involved in faculty panels set up to consider proposals by potential and current partner institutions to offer existing University validated awards. Minor amendments to programmes do not require external involvement. Major amendments may be dealt with by processes ranging from chair's action to a full panel meeting, but must always involve someone external to the University. The University stated in the SED that 'while external examiners may provide useful contributions at various stages of the approval and review processes they are unlikely to be appropriate members of formal approval panels'. However, in the most abbreviated process, externality may be provided through a written statement from the external examiner. When approving the addition of a distance-learning route for previously approved provision, the external examiner is asked to consider the learning delivery package that has been created and make a recommendation to the relevant FQAC or QAC about whether to approve the development or not. The Academic Handbook states that in these instances 'given the involvement of an external examiner it will not be necessary to include an external member on the panel'.

69 In periodic review it is at the discretion of the person leading a periodic review whether an additional external panel member is included to provide comment or advice beyond that which can be gained from the external examiner and University staff.

70 The University's requirements for externality in ISR are set out in more detail. One aim of the process is to prepare parts of the institution for external scrutiny and to benefit from contact with external subject experts. The panel involves two or more external members nominated by faculties through FQACs and approved by the chair of QAC. External members are expected to attend the panel event but may choose to submit written comment to the initial meeting of the review panel which clarifies the agenda for the review event.

71 In 2004-05 the University reviewed the profile of external members appointed to approval panels to ensure that the nomination procedures resulted in members that were both expert and independent. Following the review, the nomination process was strengthened further to ensure that nominations are approved by the chair of QAC or FQACs and reported to the next meeting of the committee. Nominations at faculty level are made on a standard form which requires the declaration of any association the proposed external panellist has had with the University. From the evidence seen by the review team it concluded that the extent to which nominations are formally reported in the minutes of committees was variable and contributes to the team's recommendation that the University ensures that institutional oversight of quality assurance outcomes is more transparent.

72 Independent and external input into programme approval and review processes is bolstered by other procedures and activities. The University makes extensive use of internal externality whereby committees and panels incorporate members from other faculties and services to bring a different perspective and share good practice. The University has widespread involvement with PSRBs through accreditation which creates a dialogue between University staff and these bodies that brings further external inputs, helping to ensure that provision is current and appropriate.

73 The SED states that the University's use of externality to support key quality processes results in independent and objective input that provides the University with assurance of its standards. It also provides an awareness of practice elsewhere which can be used to enhance the quality of the student experience at the University. The review team saw documents that exemplified the use of external panellists from both academic and practice backgrounds; in the case of review panels this often involved three or four external members per panel. The examples of externality seen by the team reflected the requirements of the Academic Handbook, but the method of recording panel events meant that it was not always possible to ascertain the affiliation of external members.

74 The review team formed the view that the University largely makes good use of externality in its arrangements for programme approval and internal review. However, the University might wish to consider whether there is full alignment between the Academic Handbook and established practice, and whether the guidance given in the Handbook is sufficiently detailed to ensure consistency and transparency in reporting.

Assessment practices and procedures

75 The University's Academic Board exercises its overall responsibility for academic standards through the approval of awards, monitoring and review processes overseen by QAC and through the Regulations and Examiners Sub-group. Academic Board also seeks and receives reports from each dean of faculty including the Vice-Principal (Academic) in the case of RWCMD, and the Head of the Centre for Lifelong Learning (in the case of combined studies students) requiring them to 'confirm to Academic Board that academic and quality assurance standards have been met within their examination boards'.

76 In its Academic Handbook the University requires that the outcome standards of its awards, at every level, be appropriate for the level of the qualification it confers. The Academic Handbook also lists the means through which the University then assures the standards of its awards. These include a common framework of regulations and an articulated policy on assessment and the appointment, training and annual reports of external examiners (see paragraphs 85 to 96).

77 In support of these requirements the University publishes a range of supporting policy, regulatory and quality assurance documentation which forms the framework within which the relevant University and faculty committees and examination boards operate. Primary among these documents is the University's Learning, Teaching and Assessment Strategy (2007-2012) which, inter alia, relates to the relevant strategic objectives of the institutional Strategic Plan. The implementation of the Strategy,

scheduled for completion by the end of academic session 2009-10, is informed by the Assessment Policy and an advisory assessment tariff document. The tariff was first available in 2008 as a reference point for approval panels for new awards and module development. It was produced after a review of assessment practices across the University in 2006-07 by QAC, and aims to promote a level of consistency between modules, including an equal weighting of assessment and to avoid the risk of assessment overload for students and staff.

78 The Assessment Policy envisages that although faculties will set their own priorities for implementing the Policy, there are key mechanisms which will ensure delivery and safeguard University requirements. These include assessment methodology reviews undertaken during annual monitoring; the approval of new awards; and through the ongoing changes made to existing modules and awards. In addition to this iterative approach, faculty heads of learning and teaching will continue their work with CELT on the dissemination of good practice.

79 The Academic Handbook sets out a common framework for all the University's taught awards, with the regulations for research awards being published electronically by the Research Office. The Handbook describes how all taught awards, whether delivered by the University or in collaboration with partner institutions, are structured within a common, credit-based, modular framework. The regulations define the structure of awards; the management of assessment; marking and grading; progression and re-assessment; and the conferment of awards. The University Quality and Policy Office advises faculties and staff on the regulations which also define the mechanisms available to the Assessment Infringement Committee and the opportunities for appeal against its findings.

80 The University operates a two-tier examination board arrangement (with the exception of RWCMD), in which subject examination boards consider and confirm student performance at module level and award boards consider student progression and confirm award outcomes. The authority to confirm and publish award outcomes is fully delegated to boards, and students and staff recognise that this allows early notification, through the well regarded results function of University's virtual learning environment.

81 The roles and functions of subject and award examination boards are set out in the Academic Handbook. The boards receive standardised assessment data for individual students produced from the central student management information system. Consistency of assessment practice across the University is also safeguarded through the mandatory training of board chairs and secretaries; the attendance of faculty quality managers and faculty advice shop managers at boards; the requirement for board chairs to sign off the conduct of the boards and report thereon to deans; and the use of spot checks on boards by Registry staff. In addition, it is a key role of external examiners to formally confirm the proper conduct of the board within the University's published regulations and protocols. The minutes and other records of the boards are prepared against a common template and were seen by the review team to cover the necessary procedural safeguards. When confirmed, minutes are lodged with faculty quality offices. Both board chairs and faculty quality managers have networks through which to share experience and practice. Faculty quality

managers, including those from RWCMD, meet four times per annum and report to the Senior Administrative Forum.

82 It is standard procedure within the University for defined marking and moderation protocols to apply and the review team saw evidence of such protocols taking place. These protocols also cover all assessments of students in collaborative partners. The effectiveness of this process is assured, in turn, by the cross-moderation events that take place involving staff of the faculties and those from partner institutions. The more systematic use of such events grew out of the 2007 review of the effectiveness of the arrangements for the management of standards of the University's collaborative provision. The events, in addition to providing for marking equivalence, also act as a forum where joint curriculum and other academic developments can take place in a partnership setting. Although not formally minuted, a template replicating the requirements of the internal moderation process has been made available in order that cross-moderation can also be recorded. The Collaborative Committee also receives overview reports of these activities which are considered to be most successful. The review team concluded that such cross-moderation events exemplified the mechanisms that the University has in place to maintain the academic standards of awards across partnership institutions and, as such, were a feature of good practice.

83 In general, the students who met with the review team were confident that they were well informed about the assessment tasks they were required to undertake. The course handbooks seen by the team contained standard, university-level approved statements from the relevant academic regulations. To address previous variation in the conduct of assessment, the Academic Handbook now sets out University expectations more clearly. The University considers that this, in conjunction with its quality assurance processes, will enhance greater consistency of practice. Students with whom the team met were also aware of the assessment criteria used in the University but were less familiar with the information needed to predict their progression or award classifications, an issue also raised in the student written submission (SWS). This was not because the Academic Handbook did not contain such information but rather that students found it difficult to understand how the formula should be used. Feedback on assessment was also an issue identified in the SWS and in meetings with students who found it variable, despite the introduction of assessment coversheets, the value of which eluded some students.

84 From what the review team heard and from a consideration of the documentation available, the team concluded that assessment, its validity, reliability and its probity of practice was a key priority for the University. It was clear that as a strategic priority, significant staff time and other resources were being mobilised to ensure consistency of practice and outcomes across the institution. This care extended into the collaborative arrangements and the additional mechanisms deployed to ensure parity of assessment practice and outcomes in collaborative provision constituted, in the view of the team, an area of good practice.

External examiners and their reports

85 The University views the consideration of external examiners' subject and award reports at both faculty and university level to be one of the five ways in which its academic standards are maintained. In support of this view it publishes a range of supporting documentation describing how it ensures that the assurance external examiners provide is well founded.

86 Because the University operates a two-tiered examination board structure for its taught provision, with the exception of RWCMD, it appoints two types of external examiner. Subject examiners are subject-based and assess the standards of the students' performance on specific modules. They approve the form and content of assessment; confirm that the academic standards of the modules are appropriate for the award; and that the students' performance is evaluated in accordance with recognised national standards. Award examiners (who need not be subject-based) are responsible for verifying that the award boards have been conducted according to the University's regulations and procedures; for endorsing their decisions and for confirming that the standard of the awards is maintained. In the light of the delegated authority award boards have been given to confirm and publish award outcomes, it should be noted that 'no recommendation for the conferment of an award of the University can be made without the consent of an award external examiner'.

87 Academic Board is responsible for 'the appointment and removal of internal and external examiners'. QAC acts on behalf of Academic Board to approve the appointment of, and receive reports from, all external examiners for taught and research provision. In practice, the Regulations and Examiners Sub-group considers on QAC's behalf proposals for external examiners for the University's taught awards and the Research Programmes Sub-group considers examination arrangements, including the approval of examiners for research degree awards. The Research Programmes Sub-group acts as an Award Board for research degrees and receives all external examiner reports and recommendations together with periodic (six monthly) reviews of the research examinations that have taken place.

88 Deans of faculty are responsible, in consultation with award and programme leaders, for the timely submission of proposals for new taught award examiners with the Registry being responsible for maintaining a directory of current examiners and for briefing and updating them in relation to regulations, procedures, reporting and fees. Registry also provides new examiners with copies of the annual reports produced by outgoing examiners. The criteria used for the approval of external examiners are published as part of the Academic Handbook and provide the means whereby the University can be assured that it is appointing examiners with the necessary level of expertise and independence. For both subject and award examiners there are maximum numbers of modules and/or students that an examiner can be allocated. The Handbook also provides a mechanism whereby an examiner considered to be in dereliction of their duty can be removed. The Code of Practice for Research Supervisors sets out the requirements for the approval of examination arrangements for research degrees including the duties of directors of studies with respect to nomination of both internal and external examiners. Research degree examination boards have independent chairs who are able to advise the examiners on the appropriate regulations.

89 From the external examiner reports for taught provision made available to the review team, it was clear that examiners were providing the University with useful and professional reports that made a significant contribution to the assurance of award standards. The examiners were drawn from a wide range of institutions across the UK, with expertise that matched well with the academic areas being assessed. The Research Programmes Sub-group minutes confirmed that research degree examiners were also representative of a wide range of research active institutions.

90 On appointment, external examiners are provided with an External Examiners Handbook which forms part of the Academic Handbook. New examiners are also given the opportunity to attend a training event provided by the Quality and Policy Office.

91 For taught awards, external examiners are required to report annually using bilingual templates provided by the University. These provide examiners with the opportunity to comment on the support they have received in relation to their duties; the response to their previous comments; the assessment process in general and their role in it; and the academic standards. Comments on academic standards cover marking and its consistency, moderation, consistency of standards with QAA subject benchmark statements and the level of study. The report form also requires examiners to comment on matters relevant to any collaborative provision that may fall within the scope of the board in question, including the opportunity to see the student work; the marking undertaken at collaborative partners; its moderation; and the parity of standards attained by the relevant students. Examiners also are able to comment on the overall structure, organisation and marking of all assessments and to highlight areas of good practice or those in need of attention. Additionally, award board external examiners are required to comment on the conduct of the board. Although external examiners are expected to attend the relevant boards, where absence is unavoidable the Regulation and Examiners Sub-group has the power to review the award assessment results as a part of their confirmation.

92 Since 2005-06, external examiner reports have been submitted electronically via the Quality and Policy Office, thus facilitating their tracking including transmission to the relevant dean, the Chair of QAC and the Pro Vice-Chancellor (Academic Development). This provides for immediate action if warranted and early consideration of institution level matters that may arise. Reports are scrutinised formally by deans, together with appropriate subject/award leaders, divisional heads and examination officers. From the responses seen, the review team confirmed that they were either signed by the dean or, in a small number of cases, a senior faculty officer to whom the dean had delegated the task. The responses were in all cases relevant to the issues raised by the examiners and demonstrated a professional approach to the advice being offered.

93 In the case of research degree examinations, external examiners provide reports to a standard template on the thesis, the oral examination and the candidate's performance. The Research Programmes Sub-group use such feedback in their ongoing consideration of the advice provided and the protocols used in support of the examination process. The Chair of the Sub-group also reviews all reports in order to identify any good practice or areas of concern which are fed back directly to the relevant faculty head of research.

94 The reports of external examiners and the responses to them form a part of the evidence base for a range of the University's award monitoring and review processes. From the documentation illustrating these processes provided to it, the review team formed the view that, except at module level, the consideration given to issues arising from examiner reports was not fully demonstrated in its reporting. In addition, it was clear that the re-timing of the annual monitoring process (see paragraph 61) was not without its repercussions in that not all external examiner reports and/or resit examination boards were in place at the time that annual monitoring reports were prepared. In such circumstances, late external examiner reports are referred directly to departmental programme boards for consideration and inclusion in the evidence base for the following year's review.

95 The University has for a number of years undertaken a review of all external examiner reports for taught awards. Previously prepared by the chair of QAC but now by the Quality and Policy Office these reports are presented to Academic Board where the themes that emerge from the analysis are considered. The review team was provided with copies of the reports for the last three years. They had a standard format and provided a useful perspective on the University's assessment activity. As the reports grow more aligned with the priorities of the Assessment Policy their value is becoming enhanced and forming a more significant contribution to the assurance of standards across the institution.

96 From the documentation available to it and from the discussions held with staff, the review team was able to form the view that the University had procedures and practices for its engagement with external examiners that were in alignment with the *Code of practice for the assurance of academic quality and standards in higher education (Code of practice)*, published by QAA. The University's use of external examiners and their reports was appropriate and consistent and helped ensure that the assessment of students and the security of their awards were built on strong foundations.

External reference points

97 Through its quality assurance framework the University seeks to ensure that its practice reflects appropriately a range of external reference points; these are considered in a variety of internal and external fora.

98 Approval processes for new awards play a key part in assuring alignment with appropriate external reference points. Proposers are recommended to consult with *The framework for higher education qualifications in England, Wales and Northern Ireland (FHEQ)*, relevant subject benchmark statements, sections of the *Code of practice* and PSRB documentation.

99 The expectations of these external reference points are also addressed in the award monitoring requirements and documentation. Discussions with staff confirmed their appreciation of the expected external reference points and their use in the University's quality assurance processes. Both staff and students exhibited a willingness to absorb and address the wider external influences that affect the University's portfolio of awards.

100 Programme and module specifications are key components of the awards documentation considered through the University's quality assurance procedures. Those seen by the review team were prepared to a standard format, referenced explicitly relevant subject benchmark statements and had a form and content common to such documents across the sector. They also demonstrated the general relationship between the delivery of intended learning outcomes and the award standard, and as such were able to demonstrate the relationship between curriculum design and assessment.

101 In relation to the regulations for academic awards, the University's credit definitions are compatible with those used by the majority of United Kingdom (UK) institutions; with the *Credit and Qualifications Framework for Wales*; and with the European Credit Transfer System. The regulations also use the definition of levels in the FHEQ as their benchmark for the description of all awards.

102 The University provided the review team with a summary document outlining its formal consideration of revised sections of the *Code of practice*. This illustrated that, in addition to the previous referral to relevant subgroups and committees, since 2006 QAC has taken a coordinating role in the consideration of the *Code* and has taken responsibility on behalf of Academic Board for ensuring the provisions of the *Code* are embedded in the relevant University approaches. The document produced by the University also illustrated how consideration involved relevant consultations, committee deliberation and approval of the beneficial changes that arose.

103 In its SED the University stated that its 'framework for managing academic quality and standards takes appropriate account of external reference points including the QAA Framework for Higher Education Qualifications [FHEQ], the *Code of practice*, Subject Benchmark Statements and the *Credit and Qualifications Framework for Wales*. It reflects the principles and expectations of these frameworks in its awards, though with some differences in nomenclature and details'. From the documentation seen by the review team and the discussions it had with staff, the team formed the view that this description given by the University was an accurate reflection of the situation. The team also concluded that, except in the detailed case covered elsewhere in this report (see paragraph 200), the precepts and guidance provided by the *Code of practice* have been addressed in the relevant University's practice.

Programme-level review and accreditation by external agencies

104 The University emphasised that, given the focus of its academic activities, accreditation by PSRBs is of great significance to its provision. Each of the University's faculties has, to varying extents, academic provision which is subject to such accreditation. A wide range of provision is involved with almost 40 different external bodies involved in the accreditation of over 120 awards. Given the varying length of accreditation offered by the PRSBs and the scale of the activity, the University has an active schedule of submissions which hitherto have been subject to approval by QAC. Since 2007 this approval has been devolved to FQACs with successful accreditations being reported to QAC for note.

105 The reports of PRSB accreditations are usually received by the relevant programme/subject leader with copies to the relevant dean of faculty. FQACs are required to approve the responses to these reports and to monitor the subsequent actions plans through the annual monitoring process. The mechanisms for the detailed consideration of the reports may vary between faculties because of their internal management structures. From discussions with staff and from the documentation available to the review team, faculty level engagement with the accreditation process and its outcomes appeared satisfactory; however, the detail of the reporting to QAC at institutional level was minimal and may have precluded the opportunity to share good practice.

106 In addition to its accreditation activities the University has, since the Continuation Audit, participated in the Review of research degree programmes by QAA on behalf of the Higher Education Funding Council for Wales, which reported that the institution's ability to secure and enhance the quality and standards of its research programme provision was appropriate and satisfactory. The University has also been associated with QAA Developmental reviews undertaken in two of its partner colleges (June 2008). The review reports were presented to the most recent meeting of QAC.

Student representation at operational and institutional level

107 The University is strongly committed to the involvement of students in its management of academic quality. The Student Expectations Project conducted in 2007-08 aimed to find out what students at the University expected of university life. The seven-month research programme involved very extensive consultation with students via focus groups and a forum. The resulting wide-ranging report made numerous recommendations for the enhancement of the student experience, including student representation (see paragraph 112).

108 The President of the Students' Union sits on the Board of Governors and its Student Affairs Committee and has three scheduled meetings with the Directorate each year, with direct and ready access at other times. Through these fora issues can be dealt with quickly. The President also meets with deans of faculties. All sabbatical officers have named points of contact in the Directorate. The effectiveness of sabbatical officer representation has been variable in the past, but has improved following the appointment of a Student Representatives' Co-ordinator who supports both sabbatical officers and course representatives, promoting their training, and attending University and faculty committees (see paragraph 111). Sabbaticals will henceforth be trained jointly by the University and the Students' Union. The Directorate discusses major University developments with Students' Union representatives; for example, following difficulties in connection with the opening of the ATRiuM centre at Cardiff, students are now being consulted and informed more effectively during current preparations to move a faculty to a different campus. The Students' Union was also represented on the Steering Group which prepared for the Institutional review. At the RWCMD the President of the Students' Union sits on the College Board, and meets with the Senior Management Team at the College twice each term. The review team concluded that both Students' Unions work closely and well with the University and the College.

109 There are over 500 student representatives on institutional, faculty, department and course or scheme committees. Training is provided jointly by the Students' Union and CELT. Student representatives on institutional committees reported that they were welcomed and their contributions valued. However, the review team found it difficult to confirm student attendance at some meetings because minutes did not identify roles in attendance lists.

110 The University requires faculties to consider and respond to matters raised by student representatives. Structures for representation vary between faculties but include staff student liaison committees; student fora; and other less formal mechanisms. These bodies report to the faculty executive committees and their feedback is also used in the annual monitoring process. Minutes of course committees or scheme boards indicated that student representatives' attendance were uneven; but those who attended were able to participate fully and their views were clearly minuted, though planned actions in response to their comments were not always specified.

111 The SED asserted that the contribution and commitment of student representation at programme level was strong. The review team found that the effectiveness of student representation at faculty and programme levels has varied in the past, but has been re-invigorated recently through the work of the Student Representatives' Co-ordinator. Students who met with the team said that the Co-ordinator had been very helpful in raising the profile of the role and developing a community of course representatives by providing social events as well as training. The Co-ordinator also works with staff to resolve issues raised by students.

112 Students also welcomed the recent appointment of Student Voice Representatives (SVRs) in each faculty. This strategic initiative by the University is a direct response to the Student Expectations report. Over 70 students applied for 29 appointments as SVRs who are trained for the role and paid bursaries. The review team met some SVRs and was impressed by their commitment and enthusiasm. These representatives confirmed that they were able to represent students' views effectively at senior level in their faculties. Other students who met the review team noted that, since the introduction of SVRs, issues which once 'stopped' at scheme or programme level were now heard and acted upon at faculty level.

113 Postgraduate research student representatives meet in faculty-based fora, and minutes of one such forum showed that issues were clearly reported and discussed with the faculty's head of research.

114 The review team concluded that the student representation system was now working increasingly effectively at faculty level. Part-time students do not always feel well represented, but the Students' Union has recognised the practical difficulties of representing this constituency, and is seeking alternative approaches.

115 Student representation is also very effective at RWCMD where 10 per cent of the student population take active representation roles. RWCMD students confirmed to the review team that they were well able to make their views known to staff.

116 The University expects its collaborative partner institutions to adopt its approach to student representation. Arrangements within partner institutions are approved at validation, and are reviewed annually as part of annual monitoring and periodically at institutional review. Annual monitoring reports from collaborative partnerships indicated that student representation was generally working effectively, but lack of detail in some reports meant that its impact could not always be confirmed. As the University continues to develop the annual monitoring process the University may wish to monitor and address this.

117 The University has made a strong institutional commitment to listen and respond to students' views. The review team found that this commitment was being translated into effective strategic action, and that students spoke very positively about the resulting enhancements of student representation. The team concluded that these developments, and particularly the roles of the Student Representatives Co-ordinator and SVRs, should be identified and commended as good practice with significant promise for the future.

Procedures for student complaints and appeals

118 The University's procedures for dealing with student complaints and those for academic appeals are set out in detail in the University's Academic Handbook, or the RWCMD Academic Handbook and in separate booklets made available to students. The University publishes information about the complaints and appeals procedures through a number of channels: student handbooks including the University's handbook for research students; 'GlamLife' and the University website; the student representatives' training programme; CELT, and FAS. The Academic Handbook points students to the University's Quality and Policy Office and the Academic Secretary for the RWCMD, as sources of authoritative advice on complaints and appeals, with support available through the Students' Union or Student Services.

119 The University's procedures have recently been reviewed to ensure alignment with the *Code of practice, Section 5: Academic appeals and student complaints on academic matters*. The report of this review to Academic Board demonstrated that the University is confident that its procedures in relation to both complaints and appeals are closely aligned with the precepts of the *Code* and recommended only minor changes to enhance the current practices and procedures. The review did suggest that the Complaints Review Group be renamed as the Complaints and Appeals Review Group.

120 In the SED the University stated that it 'seeks to resolve quickly and fairly any complaint a student may have about services provided by the University or the treatment of a student or students by any staff member, other student or visitor'. It also noted that it encourages the informal resolution of complaints wherever possible and feels that this means of resolution is used effectively. The University's mechanisms for resolution of a complaint are dependent upon the nature of the complaint. Issues relating to academic matters, the students' experience, discrimination, malpractice or impropriety are dealt with under the Student Complaints Procedure, whereas complaints relating to allegations of harassment and/or misconduct are dealt with through separate processes.

121 The University's formal complaints procedure follows three stages. Stage one involves the student stating their complaint in writing to the dean of faculty/head of service, or in the case of RWCMD the Academic Secretary. If not resolved at stage one the student may move to stage two which involves the use of a Student Conciliator, an independent member of staff with no prior involvement in the complaint who will seek to resolve the complaint with the appropriate dean of faculty or head of department and member of the Directorate. The review team formed the view that while the Student Conciliator handles relatively small numbers of student complaints each year, the role makes a useful addition to the University's procedures. At stage three the complaint may be referred to the Vice-Chancellor or the Principal in the case of RWCMD. Complaints not resolved at stage three may be referred to the Office of the Independent Adjudicator.

122 The University's complaints procedures relate to all students studying at the University or studying through distance delivery, including postgraduate research students and former students (within 12 months of ceasing to be a student). Students studying University programmes at partner institutions can also use the complaints procedure in relation to matters defined in the University's contract with the partner as being the responsibility of the University. Where matters are the responsibility of the partner institution the student is expected to access the partner institution's complaints procedure.

123 Under the Academic Appeals Procedure a student may appeal against a decision made by an examination board or a decision made by the Assessment Infringement Committee. The grounds for appeal are listed in the Academic Handbook. Academic judgement is specifically excluded as grounds for appeal. For postgraduate research students the procedures for the review of an assessment decision are set out in the University's Research Degree Regulations.

124 Although the SWS noted that students sometimes found it difficult to find information about the complaints procedure, the majority of students who met the review team felt that the complaints procedure was clear and accessible and that they knew where to go to get support and advice if needed. Students who met with the team also confirmed that they were aware of the procedures to make an academic appeal.

125 In the SED the University stated that the University's Complaints Review Group, monitors, evaluates and reviews cases and procedures. The Group meets annually and receives reports from the deans of faculty and heads of corporate departments. An analysis of the complaints received and the responses made during the previous academic session is conducted by the Group and reported to Academic Board and the Board of Governors. The review team saw evidence that this took place. The SED also noted that the Quality and Policy Office supports the Clerk to the Board of Governors who undertakes an annual review of appeals on behalf of Academic Board, considering the number, scope and nature of the appeals. An annual staff training event is commissioned for all academic and administrative staff on appeals and complaints procedures.

126 In the SED the University acknowledged that it has encountered problems occasionally with the time taken to process cases under the complaints procedures and that it is attempting to resolve this problem by reserving days each month in the diaries of key participants. The SED also claimed that the University is confident that its procedures are transparent, fair and just. From the evidence available, the review team would concur with this view and found the University's procedures for student complaints and academic appeals to be appropriate and effective and in line with the *Code of practice*.

Feedback from students, graduates and employers

127 The University stated that it places great value on feedback and that the systems involved are systematic and inclusive. Feedback through 'dialogue with students, employers, external examiners, professional bodies and other interested parties' is stated in the Academic Handbook as forming a key feature of the institution's quality assurance processes. Mechanisms for gathering feedback differ across the institution and reflect the diversity and distinctiveness of provision. The SWS noted that the University provides a multitude of opportunities for students to provide feedback. Students are provided with information in handbooks on feedback mechanisms.

128 Module feedback is obtained using a standard template which can be customised locally. Students, however, are critical of both the variety and the format of the evaluation forms used. One faculty has already experimented with making the questionnaires available through the virtual learning environment. The SED noted that the University will introduce a refreshed and reviewed standard module evaluation form, delivered online to students for use throughout the University from October 2008.

129 Student feedback is received by the module leader who incorporates it into the module report. Module reports are sent to external examiners prior to assessment boards and feed into annual monitoring. Feedback from students at collaborative partners is gathered at module level by the partners, normally using the University's form, and incorporated within the annual monitoring reports submitted to the faculty. Feedback at RWCMD is collected through an end-of-year survey questionnaire.

130 Module evaluation forms are only one among many mechanisms for collecting student feedback. Student views are expressed through representation on local and University committees (see paragraph 116) and students who met with the review team described an open culture in most departments that allowed for rich informal feedback. Panels for periodic review and ISR meet with students to discuss their experience of programmes. The other main tool for collecting feedback is internal and external surveys.

131 CELT undertakes analysis of data received from the NSS and reports to QEC on year-on changes at institutional and subject level. These analyses also feed into annual monitoring, along with data collected from the institution-wide annual student survey which collects data online on key aspects of the student learning experience selected by QEC. Results are published on the University's website. The SED provided examples of the impact of student opinion expressed through NSS and the institution-wide annual student survey on institutional priorities and local action plans.

132 Feedback on support services is collected by means of user surveys such as the LCSS Customer Satisfaction Survey and the Marketing and Student Recruitment Department's surveys of applicants. Questions on support services are also included on the institution-wide annual student survey and RWCMD's annual student survey.

133 As noted previously (see paragraphs 32, 39, 107), the Student Expectations Project, which involved over 2,000 students, demonstrates the University's commitment to listen to students. The report of the project was published in 2008 and included more than 100 recommendations for action by the University; work has begun in taking these forward.

134 Graduate feedback is collected from a variety of sources and used to inform periodic and subject reviews and accreditation events. Similarly, Higher Education Statistics Agency data on first destinations collected by the Careers Unit is used to inform undergraduate level events. The review team also saw an example of a survey of alumni carried out for a postgraduate periodic review that collected data not only on careers but also graduates' views on the courses they had taken and suggestions for their improvement.

135 The SED stated that the strongly vocational dimension to the University's provision requires direct and productive liaison with employers. The SED also claimed that such interaction impacts on curricula and teaching and ensures that provision is 'vocationally relevant, up-to-date and fit-for-purpose'.

136 Direct liaison with employers is achieved through both formal and informal mechanisms. The University does not prescribe how feedback is collected from employers nor does it set minimum requirements. For example, some faculties have set up advisory boards of industrialists and practitioners. Other formal mechanisms include partnership arrangements with service providers such as social services and the health service. At RWCMD, liaison occurs through the variety of networks within the music and drama professions. Feedback on the quality of placement provision is received from students, both at the College and in other faculties.

137 The SED stated that the University is confident of the effectiveness of the various mechanisms used to collect feedback which informs University and local development and action plans. The review team endorses this view both in terms of the wide range of feedback opportunities presented to students, graduates and employers, but also in terms of the use made of the feedback to enhance the student learning experience.

Student admissions and the use made of progression and completion statistics

138 The University's Strategic Plan identifies targets for future improvements in both the quality of its student intake and the rates of student progression to award success. Thus student recruitment and retention represent dominant planning themes throughout the period 2005 to 2012. Each of these priorities require strategic frameworks and appropriate statistical data against which performance indicators may be tested.

139 Academic Board has the overarching responsibility for the admission of students, with QAC having responsibility for admissions policy and practice. In this context a new Admissions Policy has been recently ratified by Academic Board. The Policy is articulated as an Admissions statement on the University's website, where a link to the Policy in full is also provided. The Policy confirms that it has been devised to align with the *Code of practice, Section 10: Admissions to higher education* and seeks to provide a transparent approach to admissions for prospective students and to guide and support staff in the achievement of this goal. The Policy also addresses accreditation of prior learning and accreditation of prior experiential learning with the details of process being cross-referenced to the Academic Handbook. The Handbook outlines a clearly structured process together with clear guidance for those involved in the selection process.

140 The Policy outlines both central and faculty responsibilities and illustrates the training and support available to the staff involved. As part of this framework the University provides, on its website, clear information for the use of applicants. Current students confirmed that the information was accurate and that their experience of the University and its processes was consistent with the recruitment and admissions information they received. An Admissions Forum was established in 2007-08; reporting to QAC, it considers further aspects of the admission process and strategy including the impact of external policy and to consider relevant new legislative requirements. The Forum has also served as a link between admissions and the Regulations and Examiners Sub-group, making recommendations, for example, with respect to the minimum entry requirements and has been instrumental in the planning of an Admissions Conference.

141 In order to monitor the University's position with respect to applications and admissions, an application digest is generated which allows the Directorate and other relevant staff to monitor institutional performance against the external indicators.

142 The University has also established targets for improving student progression, with the performance of students and completion monitored through examination boards, external examiner reports, professional bodies accreditation and the annual monitoring process. In order to provide more comprehensive and consistent data the University has sought to improve the quality and range of its student-related data. Thus, under the oversight of QAC, the student achievement performance indicators (SAPI) data set has been developed. This development has taken place within the overarching management framework designed to develop and deliver a concerted information and communications technology strategy for the University, and it has been undertaken by the Management Information Sub-group under the aegis of the Student Achievement Group. The data set developed by the Sub-group is comprehensive and provides data of award classification, completion, progression, credits achieved, module achievement and module result. A schedule of data downloads has been provided such that users may review the position a number of times throughout the academic year.

143 The SAPI data has utility in a variety of contexts but is intended to provide a key reference point for consideration during annual monitoring. Although currently available, the extent to which faculties utilise the data in annual monitoring is

variable. The University has recently decided that collaborative partner institutions would also use SAPI data in annual monitoring in order to ensure consistency, with QEC recommending to QAC that the University should consider requiring faculties to reflect on the data at subject level as part of annual monitoring. Although SAPI data is focused on taught awards, statistical data relating to the completion, progression and status of postgraduate research students is also produced for consideration by the Research Programmes Sub-group. Research Application Boards in faculties consider application related data.

144 From the documentation available to the review team, it concluded that the University had made significant progress in the provision of information relating to progression and completion. Further refinement is in train, with the value of the data in supporting the key quality assurance processes being recognised by staff at institutional, departmental, module and award levels. The team concluded that the University was making effective use of available statistical information and taking appropriate steps to increase the value of the data available and strengthen its use at all levels.

Assurance of quality of teaching staff: appointment, appraisal and reward

145 Within its Strategic Plan the University outlines a key objective to 'invest in quality through people', as 'University's staff are key to [the University's] quest for better service to its students and stakeholders'. The strategy brings together the University's policies and procedures on specific aspects of human resources which are also available on the Human Resources Department's web pages. The review team saw evidence that human resources issues/workforce planning were part of the faculty and departmental strategic plans which are in turn informed by the University Plan. The human resources policies of RWCMD are currently being aligned with those of the University, with a service level agreement also being put into place.

146 All staff joining the University undertake an induction programme which involves a structured corporate 'welcome', plus mandatory training workshops on issues such as health and safety. The final part of the induction programme is tailored towards the departmental or faculty role and, for academic staff, also involves an introduction to the support services. The head of administration in each faculty is responsible for ensuring the induction is properly structured. The review team saw evidence from the recent Investors in People Review that the University's induction process was considered 'exceptional and very effective'. Staff who met with the team confirmed that they had taken part in an induction programme and that it had been useful.

147 The University requires new lecturers who do not possess relevant higher education teaching experience to complete successfully the University's Postgraduate Certificate in Learning and Teaching (PGCLT). New staff in the Faculty of Health Science and Sport follow a Postgraduate Certificate in Education specific to their professional requirements. The review team heard in meetings that the original expectation was that successful completion of the PGCLT would be a requisite part of staff probation, but that for pragmatic reasons it is now expected that satisfactory progress is made during the probationary period. The probationary period for academic staff who are new to higher education is 12 months and is closely

monitored through clear guidelines and objectives. Mentors are assigned to support new staff, although the team also heard that mentors may be used in a wider context such as when a member of staff takes on a new role.

148 The University has articulated the expectations of academic staff in terms of research and scholarship within the concept of the 'Glamorgan Academic'. The Glamorgan Academic descriptor, is used in recruitment, selection, appraisal and promotion, and identifies academic staff as having responsibility for setting and maintaining high standards in respect of knowledge of their academic subject area; contribution to learning and teaching; contribution to research and scholarship; and contribution as appropriate to consultancy and professional practice.

149 The review team heard in meetings with staff that the initiative was being rolled out on a 'soft launch' basis in order to achieve buy-in and had generally been well received by staff. It provided a common language of expectation for managers and staff. The team also heard that recently gathered statistics showed that the Glamorgan Academic concept was becoming more embedded and that there was now relatively few staff across the University not meeting the requirements of the descriptor. The team also heard that the initiative was being rolled out to RWCMD and that collaborative partners were being made aware of the concept through CELT.

150 The University identified support and development of its managers, including academic leaders and managers as another critical aspect of the Human Resources Plan. In 2007 the University implemented the concept of the 'Glamorgan Manager' through a set of leadership and management attributes which define the expectations of staff in these positions. University-wide conferences were held in November 2007 and July 2008 where matters relating to leadership and management at the University were considered. The review team learnt that the scheme is aimed at three levels of management: first line/supervisory; middle/operational; and senior/strategic. The team heard from staff who had undertaken training in this area who felt that it had been highly supportive in assisting them perform their roles effectively. The team formed the view that the Glamorgan Academic and Glamorgan Manager initiatives directly support the achievement of the University's strategic priorities.

151 The University has had a scheme for the appraisal of staff in place since 1996. The scheme was recently revised to enhance further its contribution to staff support and development. The revised appraisal scheme is also intended to introduce a more performance orientated process for academic staff which can specifically target teaching quality enhancement. The appraisal programme includes a six-monthly review of performance. The review team heard in meetings with staff that all staff were appraised and that there is training in place for both appraisers and appraisees. The team saw evidence of guidance on the appraisal scheme on the Human Resources Department's website, as well as relevant forms to support the process. The guidance notes remind staff that discussion of the Glamorgan Academic and the Glamorgan Manager should be built into the appraisal process as appropriate. Following the appraisal process each faculty/department is expected to complete a staff development plan, against the key strategic objectives, including an evaluation of the previous year's activities and identification of training needs. Staff who met the team were supportive of the appraisal process, finding it to be a useful experience.

152 The review team heard that the University has recently revised its promotions policy. The document, Higher Academic Awards Scheme, sets out the process governing the conferment of readerships, professorships, visiting professorships, emeritus professorships, visiting fellowships, and the award of higher doctorates. In recognition of developments in teaching, the University has launched a number of initiatives including an award scheme for recognition of innovations in teaching in 2007-08; continued support for innovation grants for learning, teaching and assessment projects; and pump-priming funds for work-based learning projects and for the development of a work-based learning toolkit.

153 The University embarked on Investors in People over 10 years ago, receiving its first formal recognition in 1999. It has had two positive formal reviews since that time (2000 and 2003). A successful rolling review has recently been completed and a full corporate assessment is scheduled for early 2009. RWCMD plans to work towards Investors in People status and will seek accreditation during 2010.

154 In the view of the review team the arrangements for staff appointment, appraisal and reward are appropriate and suitably assured.

Assurance of quality of teaching through staff support and development

155 In its SED the University stated that it provides extensive developmental opportunities for staff, including those at partner colleges, to enhance the quality of the student experience. Development of the staff resource is evidenced by the investment, extent and participation in development activities; the continuing achievement of the Investors in People status is further confirmation of the effectiveness of the University's commitment to the support of staff. The implementation of the Glamorgan Academic, the revisions to the Reflecting on Teaching Practice Scheme, the recent appointments in faculties of heads of learning and teaching and heads of research are all examples of enhancement focused investment.

156 The University's 'Reflecting on Academic Practice Scheme' is an outward reporting, cyclical system of organised peer review sessions in which the whole range of academic related activities are observed and reflected upon. The outcomes lead to the identification and dissemination of good practice and planned staff development. The scheme is supported by the University's Directorate and the institutional strategies relating to human resources and learning and teaching. The review team formed the view that it was particularly worthy of note that the scheme applies to all academic staff involved in delivering any part of the University's academic provision, including those delivering courses at undergraduate and postgraduate level, staff at RWCMD and partner colleges, and those on full and part-time academic contracts. The minimum requirement of the scheme is that all colleagues will be observed once in any two-year cycle, although staff are encouraged to participate annually.

157 The University implements a continuous professional development policy which covers all staff and is underpinned by dedicated resources for staff development activities. Faculties also have resources to support staff development including further study where appropriate, and research or subject-related activity. CELT is responsible for providing support for learning and teaching in faculties and partner FECs and

identifying and disseminating best practice. CELT provides a range of development opportunities for academic staff ranging from additional support for new lecturers through to a seminar series which promotes continuous professional development. The review team heard very positive comments in meetings with staff of the work of CELT in relation to both the delivery of internal staff development and across the University's FECs. In meetings with the team, staff from RWCMD commented positively on the impact that access to the University's staff development programmes had made on the College staff. Additionally, a generic staff training programme is coordinated through the University's Human Resources Department on issues such as dealing with diversity. The University produces an annual corporate 'Staff and Organisational Development' report which includes a financial analysis, recommendation for further development, objectives, measurement and outcomes, is sent to Directorate and is discussed at the Health, Safety and Employment Sub-committee.

158 The University also provides a number of development activities for staff and postgraduate research students in relation to research. All new supervisors are required to attend a training course and there is ongoing development for more experienced supervisors. Good practice seminars are also organised annually for internal examiners, chairs of oral examinations and supervisors. At the start of every academic year a Research Student Support Seminar is held centrally which includes presentations from academic and support staff, and there is an annual doctoral and master's seminar where students present their research to a university-wide audience, as well as faculty-based activities such as weekly research seminars presentations and forums. All research students are encouraged to complete personal development plans and discuss them with their supervisors. The review team heard in meetings that the university-level research skills training provided for postgraduate research students is not mandatory but that students are encouraged to undertake training. Some of the postgraduate research students undertaking teaching duties had also undergone training through the PGCLT. On the basis of the evidence heard by the review team, it remained unclear what mandatory training was in place to support postgraduate research students undertaking such duties.

159 The review team saw considerable evidence of the systematic approach that has been adopted in the context of staff support and professional development within the University, and its clear alignment with a number of the strategic priorities stated within the University's Strategic Plan. The team found the clear alignment of the processes around staff appointment, support and development with the University's strategic aims to be an example of good practice.

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

160 The University defines distributed learning as 'where learning and teaching takes place primarily at a distance and can include some elements of face to face contact but is primarily delivered via online or paper based distance delivery methods or a blend of the same'. Where 80 per cent or more of the module or award is delivered and moderated online, the provision is termed e-intensive. Such provision lies at one end of a spectrum of the University's blended learning approach.

161 The University's e-learning strategy is encompassed within its Learning, Teaching and Assessment Strategy which identifies blended learning as a means of enhancing students' learning experience, and as one of its 10 priorities designed to take forward the University's Strategic Plan. The University does not have a specific strategy related to distributed learning but has been moving from a focus on online e-intensive learning, to e-enhancement and blended learning. CELT is charged with implementing the blended learning strategy.

162 The SED stated that distributed and distance learning comprises a small proportion of the University's teaching activity. Data provided by the University confirmed that in the academic year 2007-08 fewer than 40 students were registered on such awards, with significantly more students registered on individual modules that are delivered through e-learning. For example, in the same year there were over 900 undergraduate students registered on modules delivered through e-learning by the Glamorgan Business School. Further expansion of e-learning is planned; for example, the Business School proposes to launch online versions of four current awards, two at undergraduate level and two at postgraduate level, during 2008.

163 The SED stated that the University has been at the forefront of developments in online learning in the UK since the establishment of the e-College Wales in 2001. The project influenced the way in which the quality assurance of distributed and distance learning has developed in the University. Following a review by QAC in 2005, the separate approval processes, developed initially for distributed and e-learning provision, were revised to take account of e-enhanced as well as e-intensive provision.

164 QAC is responsible for the approval of all awards delivered by distributed learning with the exception of proposals in the Glamorgan Business School and other parts of the University where there is expertise. The decision to allow proposals to be approved by FQACs is taken by QAC on a case-by-case basis. The Academic Handbook requires that where a new award involving delivery of material through distributed learning is proposed, a development team must be established by the relevant faculty. If the award is not already approved for conventional delivery, the normal programme approval procedures must also be followed. The development team must include academics, representatives of the relevant e-support team, a member of the LCSS, and a mentor with experience of distributed learning. Where relevant, partner institutions and professional bodies may be represented on the team. The role of the team is primarily to design and test materials and to obtain relevant internal and external approvals.

165 The development team must present the completed package of learning materials, a report of the development process, appropriate signatures and a report from the external examiner to a panel convened by QAC or FQACs, as appropriate, for approval. Similar processes for approval and amendment are in place covering RWCMD.

166 Through the audit trails the review team saw an example of the procedures used to validate and to revalidate an undergraduate award delivered through distance learning. The initial planning team drew on a wide range of expertise from within and outside the University, and a similar range of inputs was present at the validation and revalidation panels. The review team saw clear evidence that the procedures in place at the time for the approval and re-approval of distributed and distance-learning

awards were followed with appropriate reporting through the University's deliberative structures. The University's expertise in distance learning has been used by CELT to assist RWCMD in its recent development of a master's degree in Creative Music Technology to be delivered through e-learning.

167 The addition of new modules, the conversion of existing modules, or minor amendments to existing modules, follow the normal University approval procedures laid down in the Academic Handbook.

168 The processes described for the validation of new awards using distributed or distance learning are also expected to be followed as appropriate for the approval of changes to modules. In two instances the review team was not able to discern how the additional processes required for the consideration of distributed or distance learning had been applied. There also appeared to be some confusion at FQAC level regarding the additional requirements for the approval of minor amendments involving e-learning.

169 Day-to-day quality assurance of distributed and distance learning is delegated to award and module leaders through the University's normal processes. The Academic Handbook states that annual monitoring reports are expected to pay particular attention to student experiences and performance, as well as the views of external examiners, following the introduction of a distributed learning version of modules or a degree. The review team was unable to confirm that this process was in place on the basis of the sample of annual reports reviewed.

170 The SED expressed confidence that the University's quality processes for managing the risk associated with this type of activity were appropriate and fit-for-purpose. The SED also noted that the Joint Information Systems Committee's report on the Managed Learning Environment commended the University's procedures as good practice for institutions starting to engage with e-learning.

171 On the basis of the evidence seen, the review team was able to confirm that the University has processes in place for the assurance of quality of teaching delivered through distributed and distance-learning methods. The Academic Handbook outlines clearly the processes to be followed for the approval of new awards delivered in this way, and the team was able to confirm that these are implemented effectively. CELT plays a significant role in fostering good practice through involvement in planning teams for new distributed and distance-learning awards. The additional procedures for approval of changes to, or additions of, modules and the monitoring of distributed and distance-learning modules indicated by the Academic Handbook were less clear to the team and less observably implemented and provided a further example of the need for the University to ensure that institutional oversight of quality assurance outcomes is more transparent.

Learning support resources

172 The University's mission commits it to providing 'a first class learning environment' and the 'use of cutting edge learning facilities'. Investment in infrastructure improvement is also identified as a priority in the University's Strategic Plans. The central body responsible for delivering these services is LCSS which was

created in 2006 through the amalgamation of the Information Technology, Library and E-learning Departments to produce a 'more integrated and efficient service'.

173 The University Directorate is advised by the Directorate Information and Systems Advisory Group chaired by the Pro Vice-Chancellor (Learning and Student Support). The Group has a number of subgroups including ones covering academic and corporate information systems, learning resources, the web and the intranet.

174 The University has invested significantly in developing and upgrading its learning spaces. The ATRiuM provides facilities for the School of Creative and Cultural Industries and is, in the view of the University, a 'cutting edge learning environment'. Further investment is planned in reconfiguring the Trefforest and Glyntaf Campuses and developing new performance facilities at RWCMD. The SED stated that the aim of the University's Estates Strategy was to create a 'flexible and stimulating space' for both staff and students.

175 As well as developing the University's physical space, emphasis is placed by LCSS on access to electronic resources and supporting students via distributed systems and self-service provision. This has included development of wireless networks; a notebook purchase scheme for students; and the Student Portal project.

176 LCSS provide a wide range of support to staff and students to facilitate the effective use of resources. Integration of support as well as services is promoted through co-location. For example, education drop-in centres do not assume that the student seeking help is aware of which department is responsible for providing the service they wish to access.

177 Expectations for the maintenance and enhancement of learning support for students are articulated in the University's strategic plans. Items related to learning support identified in faculty and corporate plans feed into the annual strategic planning process and following budget round. This process is designed to ensure that resources are made available to support approved plans. LCSS maintain both formal and informal links with faculties. It is represented on faculty and departmental committees and has an input into validation and periodic review.

178 LCSS use multiple channels to secure feedback from staff and students on the quality and appropriateness of its services ranging from a Customer Satisfaction Survey to the NSS and departmental meetings. In addition, feedback is gathered through a suggestions, comments and complaints scheme to measure performance against agreed service standards and to develop an LCSS action plan.

179 The students that met the review team indicated that they found access to learning resources and computers good. The University's virtual learning environment is valued by students but they also note that it is not used consistently by staff.

180 The SED stated that the University has a 'long and positive history' of working closely with collaborative partners regarding learning support. LCSS provide comments to panels at institutional approval and review, and meet regularly with staff in collaborative partners. A service-level agreement has been drawn up for use with partner colleges. The RWCMD specialised learning resources are managed locally within the broad University framework.

181 The University considers that it has 'excellent structures and procedures' in place to support its students. The review team affirmed the University's strong commitment to investing in physical and virtual learning resources in order to enhance the quality of its programmes and to support further development of its provision.

Academic guidance, support and supervision

182 In its SED, the University stated that it provides a range of mechanisms for the delivery of academic guidance and support to students, through staff in the faculties, LCSS, education drop-in centres, and FAS, while RWCMD principally provides academic guidance through its personal tutor system. Students taking University awards with collaborative partners are provided with local academic and personal support services but also have access to the University's support facilities. The University sets out its expectations for student support and tutoring in the Academic Handbook. The review team saw evidence that students are made aware of the support and guidance available to them in a number of ways including through their award and module handbooks; the Student Directory and Diary; 'GlamLife' and the University's website. Validation and review panels take note of the support structures available to students who are studying University awards and report on the appropriateness of such provision. Student support issues may also be picked up in the annual monitoring process, and the faculty learning, teaching and student experience committees are expected to keep student support services under review.

183 In its SED, the University stated that it 'broadly defines the role of a personal tutor as being a member of academic staff with whom individual students can discuss strategies for learning and progression'. Arrangements for the delivery of personal tutoring support are devolved to faculties and do not follow a single model. The University's expectation is that students should be aware of how support systems operate within their faculty. Some faculties operate an 'open-door' policy for students to call in whenever they have a query, while others operate a system which guarantees times during the week when individual academic members of staff are available for student queries. In the SED, the University stated that Student Services have traditionally hosted regular meetings with academic staff fulfilling the role of personal tutor but that with the roll-out of FAS, the University has taken the opportunity to host faculty-specific events for personal tutors supported by Student Services and FAS.

184 The SWS stated that, generally, students were satisfied with the academic staff support available to them. Students who met with the review team confirmed that some students had an identified personal tutor, in some cases one that stayed with them throughout their programme of study; for others the award leader was the main point of contact and others sought out whoever they felt was the most approachable person. For postgraduate research students there is a defined supervisor or supervisory team to support the student. Overall, the majority of students who met with the team confirmed that staff were approachable and helpful on a whole range of academic support matters. The team heard that in RWCMD all students have an assigned personal tutor and that staff at RWCMD were approachable and helpful.

185 Following the creation of its faculty structure in 2006, and as part of the University's plan to improve the retention of students, the University piloted faculty-based student support services in the form of FAS, each being overseen by an Advice Shop Manager. The Combined and Foundation Studies Unit acts as an advice shop for students on combined programmes and foundation year students. FAS offer students a range of support services including dealing with personal mitigating circumstances; student withdrawal or transfer; and referral to other academic and non-academic support. Each FAS has pages on 'GlamLife' to promote the academic support within the faculties as well as other appropriate information. The baseline provision of services offered throughout the FAS network were agreed by the Advice Shop Managers to ensure a consistent approach. The review team learnt that the University is currently undertaking a review of FAS to inform future provision of such support for students. The review will evaluate the effectiveness, consistency and use of the service to date across the institution and explore the impact on academic roles from the provision of this advisory support. The team also noted that a review of the opening hours for FAS has also been picked up in the comprehensive Student Expectations Project.

186 The SWS noted that FAS have generally been welcomed, although there have been isolated comments indicating problems for combined studies students. Students taking modules across more than one faculty confirmed to the review team that it was only possible to use one FAS in this situation, even where a query might relate specifically to the 'other' faculty. It was also noted in the SWS that the Students' Union supports the FAS system fully and would urge the University to continue with the scheme. Overall, students who met with the review team were supportive of the role that FAS played in giving advice and support to students including their role in referring students to other services.

187 From the evidence available, the review team formed the view that FAS were providing a useful and effective service to students acting as a first point of contact for a range of academic matters and referring students to other more appropriate services where this was necessary. FAS provided a further example of the University's strong commitment to a range of services to support and enhance the student experience.

188 The University also provides education drop-in centres on three of its sites which provide one-to-one student learning support, as well as offering a number of workshops for key learning skills, including report writing, essay writing and mathematics. The SWS noted that these centres have been acknowledged by students as providing an extremely useful service, although they can often be fully booked. Students who met with the review team were supportive of these centres which they felt were responsive to the needs of students. From the evidence available the review team formed the view that the education drop-in centres were a useful and effective part of the range of academic support services provided to students.

189 Online academic advice and supervision is also facilitated by the use of 'GlamLife'; by email; and by the use of 'GlamChat', a recently developed social networking facility being piloted by the University in the academic year 2007-08.

190 In its SED the University stated that it had developed an extensive range of materials relevant to reflective practice and personal development planning. The Academic Handbook outlines the requirements for professional development planning and progress files within the University, noting that, 'for new awards commencing in 2006/07 and existing awards at periodic review, students, including postgraduate students, part-time students and those studying at a partner institution, will be provided with opportunities for personal development planning at each stage of their programme'. The SED also noted that the University is seeking to enhance the use of personal development plans and reflective learning through the development of e-portfolios. At RWCMD, personal development plans, known as Professional Development Profiles, were first piloted within programmes in autumn 2005.

191 The review team saw several examples of the approaches being taken to personal development planning within various award and subject areas and formed the view that these were appropriate and comprehensive. The team also noted that the plans seen were in line with University requirements set out in the Academic Handbook.

Personal support and guidance

192 The SED stated that its personal support and guidance is primarily located within Student Services, comprising the Counselling and Advisory Service; the Student Money Service; the Careers Service; the International Student Support; the Disability and Dyslexia Service; the Resident Tutors Service; and the Health Service. The Chaplaincy also works in partnership with Student Services. At ATRiuM there are full-time permanent staff providing counselling, careers and disability support services; some elements of Student Services are offered on a peripatetic clinic basis. The 'GlamLife' student portal is hosted by Student Services and assists in the promotion of, and access to, the facilities available. Student Services also publish a range of publications such as the Mature Students' Guide. RWCMD Student Services provides pastoral care in conjunction with professionally qualified counsellors. In the SED the University noted that it was the first higher education institution in Wales to receive the Matrix Accreditation for Quality for the whole of its Student Services provision, and the only Welsh higher education institution to have achieved the Community Legal Services quality mark for its international work and money advice.

193 The Counselling and Advisory Service includes a full-time mental health adviser whose primary role is to work with students in partnership with appropriate faculty and other support staff. The Disability and Dyslexia Service provides learning and social support including electronic note-takers and dyslexia tuition and assessment. The International Students Support Service organises and delivers a week of practical workshops and social activities designed to welcome and acclimatise international students into the University community in the week prior to enrolment. International students who met with the review team were appreciative of these events and the support provided. In recognition of its diverse student population, the University appointed, in 2007, an Inclusive Curriculum Officer. This post based in CELT has the primary role of engaging faculty staff with the inclusive curriculum agenda.

194 In its SED, the University stated that graduate employability remains central to the University's objectives. The University's Careers Service works with faculties through the heads of learning and teaching to provide an agreed level of service. Students who met with the review team were supportive of, and complimentary about, the support offered through the Careers Service.

195 The SED also noted that personal support at the point of induction is considered to be of primary importance. The 'GlamStart' project, launched in September 2007, was designed to provide a simulation of the experience of the first 10 days of a new student and includes videos of students sharing their experiences, as well as links to services and departments on-campus. 'GlamStart' is available to all new students, whether studying on or off-campus. Students who met the review team, including postgraduate research students, had generally found their experience of induction to be positive and helpful; returning students were particularly supportive of the recently introduced online enrolment system which they had found efficient and effective.

196 Through analysis of its institutional student surveys and the NSS, the University is confident that the nature and shape of academic and personal guidance and support available to students remains appropriate and of a high standard across the range and diversity of services and locations. The SED also noted that the planned development of online services, linked to the student portal project and aligned with the changing nature of the student body, will inform the nature and shape of academic guidance and support to ensure the continuance of the University's high quality support for students.

197 From the evidence available, the review team formed the view that the University was providing an extensive and effective range of academic and personal support services that were underpinning its strategic aims, including those stated in its Widening Access Plan (2006 to 2009). In the view of the team the University's strong commitment to a range of services to support and enhance the student experience is a feature of good practice.

Collaborative provision

198 The University's collaborative provision is large and complex. At the local level the University has a long and successful history of collaborative partnerships with FECs in Wales. It has a Strategy for Collaboration with Welsh FECs. It describes these partnerships as a 'significant strength' and relates them closely to its strategic aims for widening access to higher education. Three Welsh FECs are accredited colleges which have long-term relationships with the University and meet specific criteria set out in the Academic Handbook; 12 other FECs are classified as partner colleges. The Dean of Further Education and Collaborative Activities oversees the development of these partnerships. The review team found that arrangements for the management of FEC partnerships worked effectively.

199 The University also collaborates with two private colleges and 11 other training organisations in the UK. It has 43 European and international partnerships, and the Strategic Plan 2008-2013 envisages an expansion of these, focusing particularly on direct delivery and advanced standing models, but not franchises. The Head of International Partnerships, who has a substantial background in quality assurance, supports the development of new overseas partnerships.

200 The University holds a detailed collaborative provision register, although undated at the time of the review, which is maintained by the Quality and Policy Office. The University publishes on its website a list of collaborative partnerships with FECs in Wales, but not its other collaborations. The review team believed that the University would wish to review this position in the light of the *Code of practice* and might find precept A4 in *Section 2: Collaborative provision and flexible and distributed learning (including e-learning)* helpful in this respect.

201 The University's collaborative arrangements fall into four categories: franchises, where a partner delivers a programme designed by the University, these are mainly through the Welsh FEC partners and not offered overseas because of the higher risks involved; direct delivery programmes which are taught by University staff travelling to partner institutions; advanced standing arrangements where students can enter University programmes with credit at level 5 or 6 on successful completion of an agreed programme at the partner organisation; and hybrid provision which combines direct delivery with distance and/or e-learning. The University confirmed that no provision is delivered in languages other than English or Welsh.

202 The Collaborative Committee oversees partnership activity and reports to Academic Board. It includes representatives from the accredited colleges and two student representatives, although it was not possible from the minutes available to the review team to identify the presence or participation of students, nor were their apologies recorded. The Committee has no specific remit for quality and standards; it oversees the academic development of collaborative partnerships with an emphasis on 'greater consistency between faculties', enables partner institutions to 'influence the development of the network', and oversees the staff development programme for collaborative activity. The Committee's work is focused on the partnerships with Welsh FECs, but it has recently sought to take a view of international activity through the attendance of the Head of International Partnerships at meetings.

203 Institutional approval of collaborating partners is clearly distinguished from the approval of programmes, and new partnerships must achieve institutional approval before any provision can be approved. Criteria for the approval of new collaborative partners are set out in the Academic Handbook. Institutional approval is managed by the Quality and Policy Office and draft contracts are produced by the Executive Office. Institutional reviews are carried out after five years.

204 Procedures for institutional approval are set out in the Academic Handbook. The review team examined the documentary record of a recent institutional approval, for a 'hybrid category' collaboration with a European institution. From the record presented to the team it was not clear that initial approval had been made before ADC approved the proposal by chair's action, a point confirmed by the University subsequently; nor when the date of approval for the programme commenced, two separate dates were given. In addition, there was some discrepancy between the constituency of the approval panel, which comprised a chair and a secretary, and the guidance outlined in the Academic Handbook which requires that the panel would normally include 'two external members one of whom will be a QAC member'. The Handbook also indicates that the University's normal procedures for an institutional approval event should include a visit by the panel to the institution. However, the

panel regarded a visit as unnecessary in this case because it was satisfied with the information provided. It was not clear why these normal and prudent requirements were set aside in this case. The panel did not appear to resolve conflicting statements about the status of the institution. The original proposal to ADC twice described the institution as 'public', but a later and more detailed proposal stated that it was 'in the private sector'. The institutional approval for this partnership was accomplished in a very short time, and did not meet the University's normal stated requirements fully, and the record of the process was not transparent. QAC's minutes did not mention any scrutiny of this approval process.

205 Equally there was little information regarding the approval of modules for the programme in the relevant FQAC agenda, noting simply that approval had been 'by correspondence', but with no further details, or date of approval given.

206 The Academic Handbook says little about the assessment of risk in collaborative activity, beyond a requirement for analysis of risk in connection with the approval of prospective international partners. The review team was told that risk was assessed on the basis of the persons responsible for a proposed activity. The team considered that this approach to risk appeared unsystematic; a view which was reinforced by reference to an example of documentation for the approval of advanced standing arrangements at a private institution. This proposal document addressed financial risks only. A later proposal for the same institution, from another faculty, did not refer to risk.

207 Institutional re-approval is subject to procedures set out in the Academic Handbook. The review team saw the report of the institutional re-approval of a partner FEC. As part of its deliberations the panel visited the College and met with staff and students. Aspects of good practice were reported, and recommendations were made for the enhancement of provision and the learning environment. On the basis of this example the team believes that the institutional re-approval process is well executed and effective.

208 Collaborative provision arrangements are governed by Memoranda of Understanding which are signed by the Vice-Chancellor. A list of collaborative provision supplied to the review team indicated that Memoranda of Understanding have not yet been signed for some current partnerships. The review team noted that signature of a Memorandum of Understanding before students are admitted to study under a collaborative arrangement was not required by the Academic Handbook, but was considered to be 'good practice'. The team would recommend as advisable that the University review the timeliness of the signing of Memoranda of Understanding with collaborative partners to ensure that contractual arrangements are in place before students on collaborative programmes are admitted. The University might find precept A10 of the *Code of practice, Section 2: Collaborative provision and flexible and distributed learning (including e-learning)* helpful in this respect.

209 Quality assurance procedures for the approval and re-approval of collaborative programmes are the same as for 'home' provision. Distributed and distance-learning elements of direct delivery and hybrid collaborations are approved according to the University's procedures for those modes of provision (see paragraph 163). Particular procedures are required for the approval of advanced standing arrangements. The

Academic Handbook states that a criterion of their approval is that 'the profile of knowledge and understanding expected to have been acquired provides an appropriate preparation for subsequent years of study on an identified programme at Glamorgan'. The review team explored ways in which this criterion was implemented. It heard of a case where, in preparation for the approval of an advanced standing arrangement, the match between the external programme and the receiving programme at the University was analysed and mapped. However, the examples presented to the team did not include any such mapping and documentation, although one proposal stated that such mapping would take place. In another case there was no evidence of analysis of the partner's programmes, but the proposal document stated that 'a review of the facilities and staffing at [the partner] indicate that these are appropriate to the preparation of students to enter level 2...at Glamorgan'. The University places increasing emphasis on the development of advanced standing arrangements as one of the collaborative activities in which it can 'maintain the greatest control'. The team concluded that the institution would be better able to fulfil this laudable aim if its requirements for approval of advanced standing arrangements were more helpfully specified and implemented more consistently.

210 Periodic reviews of collaborative programmes are carried out 'as part of' the University-based provision, although separate review meetings are sometimes held where provision is very extensive. A recent periodic review of collaborative postgraduate provision, carried out separately, covered five master's awards and three professional programmes delivered in collaboration with 11 partners. The panel received a report from each of the partner organisations. These reports used a standard template but varied considerably in their coverage and levels of evaluation. Some, for instance, used a pro forma checklist to confirm the learning facilities provided by a partner, but one of these completed lists was neither signed nor dated. In some reports the partner institutions had made little use of student feedback. The main review report recorded that the panel met with 'representatives from Partners and Partner Colleges', but did not indicate which partners were represented or by whom. The review report did not demonstrate substantial range or depth of discussion between the panel and the teams involved. There was no record of panel visits to the partners. The panel recommended to FQAC that all the programmes be re-approved, subject to conditions which were to be met by a specified date. Some five months later the FQAC 'received and approved' the report but noted that conditions of re-approval at two institutions had not been fulfilled. The review team concluded that the record of the review demonstrated inconsistencies of process, and that FQAC would not have been able to discern these, nor confirm that all partners had participated in the review meeting, by reference to the panel's report. Moreover, the fulfilment of re-approval conditions was sometimes tardy. The team would recommend that the University ensures consistency of practice across collaborative provision in line with the University's quality assurance requirements.

211 Collaborative programmes are subject to the University's normal requirements for annual monitoring. Examples of monitoring reports showed considerable variation in levels of detail and evaluation. An example of a dean's report from one faculty showed that significant issues arising from collaborative monitoring reports could be transmitted upwards to the highest levels. In this case it was noted that some partner

institutions did not produce timely annual monitoring reports, and the faculty planned to work with its partners to develop reporting formats. At least one faculty produces summaries of the partner annual monitoring reports, with action plans, and an example seen by the review team showed that potentially important issues, such as matters of resourcing for partnership activity, were identified for action. The team also heard that managers in partner institutions could report significant issues rapidly, without waiting for the end of a monitoring cycle, through frequent visits by University staff or through direct reporting to the Quality and Policy Office. The University is taking steps to strengthen the consistency of annual monitoring in its collaborative partnerships through a number of means: advising faculties that their annual monitoring process could not be signed off without inclusion of partner college information; FQAC chairs now meet to review collaborative monitoring reports; and from 2008-09 onwards partner institutions will produce institutional overview reports or 'annual college self-evaluation documents'. The team believed that this was potentially a helpful enhancement of the monitoring process.

212 Faculties appoint partnership liaison officers who 'oversee and enable the operation and quality' of collaborative provision. The review team heard that these staff, who might also be scheme leaders, visited partnership centres at least twice a year. During their visits they meet students to monitor their views and also support the writing of annual monitoring reports. Partnership liaison officers report on their visits to their faculties; significant issues are reported to faculty executive committees. A Partnership Liaison Officers' forum meets to share good practice across the University, and similar meetings are also held at faculty level. Other supportive contacts are made by module leaders. The team considered that these liaison arrangements work effectively.

213 All staff in partner institutions who teach on programmes leading to the University's awards must be recognised teachers of the University. Recognised Teacher Status (RTS) approvals are made at programme approval or re-approval of programmes, or by FQACs at other times. Criteria and procedures for RTS are given in the Academic Handbook, and the University maintains a database of RTS approvals. The review team found that the approval process was reported in some detail in reviews and FQAC minutes, and that approval could be refused or made subject to conditions. Accredited colleges have delegated powers to approve RTS. The team concluded that the RTS system was sound and appropriate, and applied with rigour. From 2009 the University will require that collaborative partners have a higher education unit in place, comprising a cadre of staff with appropriate higher education teaching experience, and approved by QAC if a partner institution wishes to teach programmes or modules at honours degree level (level 6) or above. Procedures for the approval of these units are described in the Academic Handbook, and the team found that this process was being carried out with care and deliberation.

214 As noted in paragraph 82, all collaborative provision is assessed according to the University's regulations and procedures. Internal comparability of academic standards is maintained effectively by the use of cross-moderation events involving partner institution staff and members of University faculties. Partner institutions have attested to the value of cross-moderation in improving the consistency of assessment and for

staff development. The review team formed the view that it was a feature of good practice. All collaborative programmes are externally examined through the institution's standard processes, and external examiners are asked specifically to make a tick-box statement about standards of assessment. External examiners can meet with staff of partner institutions, at examination boards held at the University, to discuss assessment matters (see paragraph 91).

215 The University provides all award certificates and transcripts for collaborative provision. Examples seen by the review team showed that the place of study was specified on transcripts in line with the *Code of practice*.

216 In 2007 and 2008 the University twice reviewed its internal arrangements for the management of collaborative provision. In 2007 the Quality and Policy Office carried out a 'Review of the Effectiveness of the Arrangements for the Management of Standards of...Collaborative Provision' which recommended 'increased alignment' with the *Code of practice*, specifically in the approval of publicity materials and the provision of student information. The report also recommended a strengthening of procedures for the monitoring and approval of publicity material published by partners. The University has responded by putting in place service-level agreements with partner institutions. Annual audits of partners' publicity are now carried out by the Marketing and Student Recruitment Department. The need for this development was reinforced by the discovery, early in 2008, of significant shortcomings in one partner institution's publicity material. In that case it responded very robustly, by giving notice to terminate the partnership arrangement and establishing an exit strategy to provide for the remaining students.

217 Early in 2008, QAC undertook a thematic audit of faculties' management of their collaborative provision. This audit drew attention to a number of issues for enhancement including greater involvement of partner institution staff in programme development; the formal recording of visits to partner institutions; and attendance of partner college staff at examination boards. The review team concluded that these internal quality assurance measures were of value to the University, although their coverage and frames of reference might well be extended on future occasions.

218 The review team found that some aspects of collaborative provision, such as the provision of staff development, worked well. It was also clear that partners were involved in important discussions about University matters. At all levels there was evidence of a genuine desire and intention to work with collaborating institutions in a spirit of partnership. Comparability of academic standards was being secured through robust assessment and moderation mechanism. The University's partnerships in Wales have achieved much in terms of widening participation, and there is great potential for future success.

219 The review team also found evidence of inconsistencies in the quality assurance of collaborative partnerships. The University claims to be 'extremely cautious' in setting up new international partnerships but the team found that this approach was not always evident in its quality assurance requirements for collaborative provision with regard, for example, to the signing of Memoranda of Understanding and the matching of programmes for advanced standing arrangements. Existing procedures for institutional and programme approval were not always consistently implemented. The team also concluded that the institution's documentation and reporting of quality assurance processes did not fully sustain the consistency of oversight; nor did they entirely support the SED's statement of confidence in the approval processes for collaborative provision. In view of its plans to expand collaborative provision, particularly overseas, the University should ensure consistency of practice across its collaborative provision and that its institutional oversight of quality assurance outcomes is more transparent.

Section 3: The review investigations: published information

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

220 Evidence made available to the review team showed that the University provides students (both pre and post-enrolment) with a wide range of published information in English and Welsh. The Student Charter sets out the University's commitments regarding best practice and the standard of service which it will strive to achieve. The Charter does not apply to students on University courses at partner institutions, for whom separate arrangements have been made through the partner institution. The Charter also makes reference to some of the information that students can expect to receive from the University. Students and stakeholders can access information through the University website which has recently been redesigned to facilitate access from a student perspective.

221 In its self-evaluation document (SED) the University noted that prior to enrolment all incoming new students are sent advance information on the services provided by the University in the form of the 'GlamLife' pack which includes advice on tuition fees, learning resources, student support services and accommodation, as well as faculty-specific enrolment details. This was introduced following feedback from students who were receiving information from multiple sources within the University at various times. While many of the students who met with the review team were very supportive of the information they had received prior to joining the University, there were a small number who had not received the pre-enrolment pack. The team noted that this was one of the findings and subsequent recommendations of the Student Expectations Project report and the University was seeking to further enhance more broadly its communication with students prior to their arrival at the University.

222 The 'GlamLife' student information website developed and hosted by Student Services, launched in December 2005, is a 'one-stop-shop' for all enrolled student information, and incorporates both pastoral and academic support materials. The review team learnt that 'GlamLife' is being developed to contain 'personal portals' so enrolled students can access and interact with information stored in University systems on a more individualised basis where appropriate. As an additional support mechanism for international students 'GlamLife' contains web pages devoted to issues affecting international students such as International Student Welcome Week, the International Student Support Service and courses on English language skills. Students who met with the team stated that they were increasingly reliant on 'GlamLife' and felt that this was an excellent and important resource. The Marketing and Student Recruitment department also produces a useful student directory and diary, called 'Your Life; GlamLife' which reflects much of the information published on the 'GlamLife' site. For postgraduate research students, the Research Office website also publishes relevant information including the University's Code of Practice for Research Students.

223 At award and module level, all students receive a handbook (in hard copy and/or electronically, often on CD-ROM) which provides details of the content and operation of the award/module. The University does not prescribe the exact content of student handbooks but provides comprehensive best practice guidelines on how to produce student handbooks in its Academic Handbook. Written guidance is also provided for students undertaking a placement. Students in partner colleges are issued with comparable handbooks to on-campus students, with partner colleges amending certain sections in accordance with their own facilities, for example, student services, library resources, pastoral support. The review team saw a range of module and award handbooks which provided information about, for example, intended learning outcomes, award structure, teaching and assessment methods and criteria, regulations, the complaints procedure, academic appeals and support mechanisms available to students. In the view of the team these handbooks were generally clear and fit-for-purpose but varied in style and content. Notwithstanding this variation the team heard that information such as that provided in programme specifications and module content is sourced from a single repository to ensure consistency.

224 The Academic Handbook is published on the University website; in the SED the University stated that in 2005 it was found that edited versions of regulatory text were being extracted from the Handbook and copied into student handbooks. The University recognised that this process had the potential for mistakes or misinterpretation and hence the Quality and Policy Office now produces the 'Abridged Regulations' which are issued to faculties and collaborative partners for inclusion in relevant documentation.

225 The student written submission (SWS) stated that the Students' Union has evidence to suggest that comprehensive information on courses is provided to students and that they are largely satisfied with this. Students who met the review team were unanimous in their view that the information they received from the institution, its faculties and departments was comprehensive, useful and accurate both in general and in detail. The team formed the view that, overall, the information made available to students also meets the expectations of the *Code of practice*.

Reliability, accuracy and completeness of published information

226 In its SED, the University's description of its approach to the assurance of the quality and accuracy of published information draws attention to the involvement of a range of bodies. These include the Directorate Information and Systems Advisory Group, with its responsibility for the overall provision and governance of information and communications technology; the Marketing and Student Recruitment Department, with its responsibilities in relation to the coordination and production of information for prospective students including the prospectuses; and the faculties, with responsibilities for the information provided to current students.

227 The development of the provision of information to stakeholders has benefited from the collection of feedback from users. For example, the development of the University's website has relied on commissioned research on how students prefer to access information. Using both electronic and hard copy media, the University makes a full range of relevant regulatory programme assessment and other support information available to students with the prospect that the student portal will provide for this information to be personalised in the future.

228 From a review of the relevant externally published information, drawn from data provided by the University, it was clear that the University was able to marshal its internal data sources to fulfil the requirements of external agencies such as the Higher Education Funding Council for Wales, Unistats, and Teaching Quality Information. The data were in line with the national expectations of currency and aligned with what was available internally.

229 The University also publishes a full range of information that is consistent with that used internally on its publicly accessible website. This includes, for example, its Strategic Plan, Academic Handbook, Annual Report and financial statements, publication scheme and Welsh Language Scheme. Internally, programme specifications are available with course information for prospective applicants/students available in useful and readily accessible form. This commitment to open and transparent sharing of relevant information extends to the provision of an area of the web dedicated to the support of parents of prospective students. The University also produces the magazine ParentSpace to help parents understand the Universities and Colleges Admissions Service process and the issues that students need to consider when selecting a course of study and a university.

230 The devolution of responsibility for checking the accuracy of award level information to the faculties, including that for collaborative provision, places limitations on the effectiveness with which the institution can preserve an overview. The review team was also not clear whether consistent formal sign-off of information was achieved. However, taking into account the views of students expressed in the SWS and in meetings, the team concluded from its own scrutiny of the published information that the arrangements in place were currently maintaining a necessary level of protection for its accuracy and validity.

Findings

The effectiveness of institutional procedures for assuring the quality of programmes

231 The University makes use of formal procedures for approving new and amended courses; monitoring programmes on an annual basis; and undertaking the periodic review of its provision. The Academic Board approves proposals to develop new programmes but delegates the detailed approval process to the Quality Assurance Committee (QAC) which in turn delegates extensively to Faculty Quality Assurance Committees (FQACs) and the College Quality Assurance Committee (CQAC). The Academic Handbook describes the processes to be adopted depending on the scale of the change involved. In some areas the Handbook gives only general guidance, and faculties can adopt their own approach within the University's quality assurance framework thus allowing for differences in practice to develop between faculties. All programme approval involves an element of externality. QAC maintains oversight over the delegated processes, but the nature of upward reporting observed by the review team largely involved the presentation of limited detail, thus making it difficult for QAC to get a full picture of the processes being adopted and the basis upon which delegated decisions are taken at local level. Programme approval processes are not unduly onerous and allow, where appropriate, for a light touch by the University; however, they are not always observed fully, as exemplified by the number of retrospective approvals recorded.

232 Annual monitoring is a wide-ranging process based on the production of reports at module, partner, subject, department and faculty level into which external comment feeds. Each element involves analysis and reflection, the development of action plans and the identification of good practice. The annual monitoring process is audited by the members of FQACs from outside the faculty. The report of this audit together with a summary report prepared by the dean of the faculty is presented to QAC. Although it does not see the full annual review for a faculty, its members are formally involved as chairs of FQACs and members of audit teams. Parallel processes are in place for the annual monitoring of research degree provision and research students. The review team concluded that the annual monitoring process was thorough and effective and undertaken consistently across the University.

233 The periodic review of academic provision is the subject of two different forms of review. Periodic review, which operates on a cycle of five or six years, involves the revalidation of awards using methodology similar to programme approval. In 2005 Internal Subject Review (ISR) was introduced which is designed to provide a critical and reflective review of the entirety of a subject area on a six-year cycle. ISR involves extensive sources of evidence and is conducted by a panel that includes members from outside the University. The panel reports to QAC and thence to Academic Board on the future development of the area. ISR is intended to feed into periodic review, but the cycles are not yet coordinated fully.

234 The review team concluded that the individual processes of programme approval, monitoring and periodic review were effective as means of assuring the University of the quality of its programmes. However, the team questioned the extent to which the Academic Board through QAC had active oversight of the processes because of a lack of clarity in the relationships between QAC and FQACs/CQAC, and the lack of transparency in upward reporting of these processes. QAC delegates responsibility very extensively for programme approval and monitoring and the flexibility provided by the Academic Handbook permits differences to develop in the way these processes are conducted across the University. The University is recommended as advisable to ensure that institutional oversight of quality assurance outcomes is more transparent.

235 The University provides multiple opportunities for students to provide feedback: through module questionnaires and an end-of-year survey at Royal Welsh College of Music and Drama (RWCMD); students are surveyed regularly on a variety of topics; and there is the opportunity for students to participate in committees at both University and local levels. The review team considered the developments to strengthen student representation, notably through the roles of the Student Representatives' Co-ordinator and Student Voice Representatives, were a feature of good practice. Feedback from graduates is sought in relation to programme review and the University maintains close contact with a range of professional bodies and employers. The review team concurred with the University's view that it promoted a systematic and inclusive approach to obtaining feedback. The team also observed that the feedback obtained was used well to enhance the University's provision and the student experience.

236 Increased blended learning which combines face-to-face and remote learning is one of the University's strategic priorities. Few programmes exist as distance-learning awards only, but there are many e-learning modules and e-versions of conventionally delivered programmes. The University has developed enhanced procedures for programme approval, amendment and review relating to distributed and e-learning. Approval of new distance-learning programmes involves setting up specialist development teams assisted by the Centre for Excellence in Learning and Teaching (CELT). QAC takes responsibility for approving new distance-learning programmes although this is delegated in some instances to FQAC where expertise in such programmes exists. The review team confirmed the overall appropriateness and effectiveness of the University's system for assuring the quality of distance-learning provision. However, in some aspects, such as approval of new modules, minor revisions and annual monitoring, the suggested additional processes are not applied consistently. The University should consider whether current approaches to the quality assurance of distributed and e-learning permit sufficient overview of faculty practice to keep under review the development of faculty practice.

237 The University's collaborative provision is both large and complex, focusing on franchising programmes to further education colleges (FECs) in Wales, and arrangements for direct delivery and advanced standing with a significant number of institutions across the world. Collaborative provision is overseen by the Collaborative Committee of Academic Board. Quality assurance is achieved through the normal

processes of the University, enhanced where necessary to take account of the higher risk and particular characteristics of collaborative working. The University expressed confidence in these arrangements. However, the review team found that this confidence was misplaced. Quality assurance processes were found to be implemented inconsistently and oversight by the University was incomplete. Furthermore, the failure to ensure that signed legal agreements are always in place before students commence collaborative courses was seen to have the potential to put quality and standards at risk.

The effectiveness of institutional procedures for securing the standards of awards

238 The University uses the Academic Infrastructure and the *Credit and Qualifications Framework for Wales* in setting the standards of its degrees, as described in the Academic Handbook, the contents of which are approved by QAC with the regulatory element subject to approval by Academic Board. The standards students are expected to achieve are well understood by students, with formal statements embodied in programme specifications and module descriptions for each taught degree. Similarly, standards for research degrees are set out in the advice provided to students, supervisors and examiners. The consistent application of standards across the University's taught provision is supported by a common regulatory framework for all awards which, whether delivered by the University or in collaboration with a partner, are structured within a common credit-based, modular arrangement. The systematic application of this across all provision is addressed through approval and review processes; the receipt by Academic Board of annual summaries of external examiners reports; the oversight of examination board conduct using a variety of mechanisms; and the marking and moderation conventions in use. The consistency of assessment decisions by examination boards is also facilitated by the presentation of performance data in a systematic form derived from an assessment rules-driven student information management system.

239 The University has a Learning, Teaching and Assessment Strategy (2005-2012), which is underpinned by an Assessment Policy and an advisory Assessment Tariff. The implementation of the provisions of these three statements into the curriculum planning process is through the approval of new programmes and the ongoing monitoring and review/re-approval processes operating in the University. Each faculty incorporates priorities from the institutional statements into their strategic plans, in support of implementing the Learning, Teaching and Assessment Strategy by the end of academic session 2009-10. The key aims of these assessment related statements were entirely consistent with the key strategic priorities set out by the University in its Strategic Plan.

240 The Academic Board has the formal overall responsibility for academic standards, but has delegated this to examination boards (including the Research Programmes Sub-group of QAC as the Award Examination Board for research degrees), thus external examiners are key to the security of award standards. The Regulations and Examiners Sub-group of QAC serves to advise Academic Board on its responsibility for the appointment and removal of internal and external examiners. For this, the University has regulations and procedures outlined in the Academic Handbook which operate to ensure the independence, quality and experience of external examiner

appointees. Appointments are monitored to ensure that vacancies do not remain unfilled and that examiners provide their reports in as timely a way as is practicable.

241 The views of external examiners are sought on a variety of matters centred upon the standards of assessments and the determination of students' level of achievement. External examiners are involved in both examination board tiers and thus have the opportunity to address module performance (subject external examiners) and performance at award level (award external examiners).

242 The University has transparent processes in place that ensure that the comments provided by external examiners in their annual reports are acted upon; that examiners receive a response to their comments; and that a synthesis of themes identified from reports is undertaken and considered by Academic Board. The visibility of the contribution external examiners' reports make to the evaluative outcomes of the University's programme monitoring and review processes at levels beyond module review is, however, less clear and contributes to the review team's advisable recommendation that the University ensures that institutional oversight of quality assurance outcomes is more transparent (see paragraph 94).

243 From the documentation available to the review team and from the discussions held with staff, the team was able to form the view that the University had procedures and practices for its engagement with external examiners that were in alignment with the *Code of practice*; that the use of external examiners and their reports was effective and consistent and helped ensure that the assessment of students and the security of awards were built on firm foundations.

244 In addition to external examiners, the University makes use of a range of external inputs in securing the standards of its awards. Thus, external expertise is mobilised in the approval and review of programmes and a significant proportion of the awards offered are accredited by external professional, statutory and regulatory bodies (PSRBs). Faculties are able to use the reports of such accreditation as a further check on award standards; however, the detail of the reporting of such considerations to QAC was minimal and may have precluded the opportunity to share good practice.

245 The University is paying increasing attention to its capacity to monitor standards achieved by students across its provision. The generation of the student achievement performance indicator (SAPI) data set has been a significant achievement in this respect. In this regard, and from the production of other data sets of relevance, it is clear that the University is making effective use of available statistical information and is taking steps to increase its value and to strengthen its use at all levels.

246 The University has recognised the risks associated with collaborative provision in relation to standards and has put in place additional measures to ensure that standards of awards are secured, wherever they are delivered. These include the use of cross-moderation events; the specific attention required and paid by external examiners; and the availability of staff training and development. Taken together with the generic procedures for securing award standards, the attention given to award standards in collaborative provision was considered a feature of good practice by the review team.

247 The University in its self-evaluation document (SED) emphasised the universal application of the regulatory and procedural framework as articulated in the Academic Handbook that provides for the maintenance of standards. From the documentation seen and the discussions held with staff and students the review team was able to endorse this view.

The effectiveness of institutional procedures for supporting learning

248 Learning and Corporate Support Services (LCSS), led by the Pro Vice-Chancellor (Learning and Student Support), is an integrated service which provides the infrastructure to support the University's library and information technology provision, together with the Directorate Information and Systems Advisory Group and its various subgroups. A service-level agreement exists for use with the University's partner colleges. RWCMD's specialised learning resources are managed locally within the broad University framework.

249 Expectations for the maintenance and enhancement of learning support for students are articulated through the University's Strategic Plan and local requirements are set out in the annual strategic planning process by faculties and service departments. LCSS gathers feedback from staff and students and uses this within its action plan. Overall, students are satisfied with the learning resources available. The use of the virtual learning environment was also praised, although some variability was noted depending on the level of engagement by staff in the faculties.

250 The University has invested significantly in the development and upgrading of its learning spaces including the opening of a new campus in 2007, with further investment planned. Emphasis is also placed by LCSS on access to electronic resources and support for students via distributed systems and self-service provision. The review team concluded that the University is strongly committed to investment in physical and virtual learning resources to enhance the quality of the student experience.

251 The University sets out its expectations for student support and tutoring within its Academic Handbook. Academic support is provided by the University through a range of mechanisms, including the education drop-in centres, faculty advice shops (FAS) and the personal tutoring system, with face-to-face support being supplemented by a range of online materials. Students are also given the opportunity to undertake personal development planning at each stage of their award. University-wide research skills training is available for postgraduate students but is not mandatory. Arrangements for the delivery of personal tutoring are devolved to faculties and do not follow a single model. The University expects that students are made aware of how support systems operate within their faculty. In RWCMD all students have a personal tutor. The University is currently undertaking a review of FAS to inform future provision of such support for students. Students were satisfied with the range of mechanisms for academic support and the review team concluded that they are well supported. In terms of personal welfare, overall satisfaction is expressed by students about the wide range of support provided by the University. The review team concluded that the University is providing an extensive and effective range of academic and personal support services for students which underpin its strategic aims. In the view of the team the University's strong commitment to a range of services to support and enhance the student experience is a feature of good practice.

252 The arrangements for staff appointment, appraisal and reward are suitably assured, with all new staff undergoing appropriate induction and appraisal. In the case of academic staff new to teaching, there is a requirement to complete successfully the University's Postgraduate Certificate in Learning and Teaching or, in the case of the Faculty of Health, Science and Sport, the Postgraduate Certificate in Education. The arrangements for supporting postgraduate research students undertaking teaching are less clear and there appears to be some variability in practice.

253 The University has articulated its expectations for academic staff in terms of research and scholarship within the concept of the 'Glamorgan Academic', the descriptor for which is used in the recruitment, selection, appraisal and promotion of these staff. The concept of the 'Glamorgan Manager' is identified through a set of leadership and management attributes. The review team formed the view that the aims of the Glamorgan Academic and the Glamorgan Manager initiatives directly support a number of the priorities within the University's Strategic Plan.

254 The arrangements for staff support and professional development are notable and underpinned by a comprehensive programme of courses, workshops and other opportunities. The review team heard positive comments regarding the work of CELT in relation to staff development, both on-campus and with the partner institutions. The RWCMD is benefiting directly from the range of staff and professional development opportunities available to it through the University. The team considered the clear alignment of the processes around staff appointment, support and development with the University's strategic aims to be a feature of good practice.

External involvement in internal quality assurance mechanisms

255 In addition to the University's comprehensive external examiner system the University also seeks to incorporate independent judgement in programme approval, review, amendment and re-approval, and in institutional subject review. All approval events are required to involve an element of externality. The nature of the input, whether through external examiner comment or the appointment of external members of approval panels, depends on the scale and nature of the proposals under examination. The periodic review of programmes and subject areas requires the appointment of external panellists. External members may be academics from other institutions or practitioners.

256 Guidance on the use of external members in approval and review activity is given in the Academic Handbook, and the chairs of FQACs and QAC are involved in confirming nominations for these roles. The Academic Handbook is not prescriptive in relation to some aspects of the use of external advisers and panellists thus allowing room for interpretation and some differences in practice.

257 The review team affirmed that the University's use both of external examiners and external members of approval and review panels was strong and scrupulous. Externality provides independent assurance of the standards of University provision and gives access to practice elsewhere in the sector that is used to enhance the quality of learning opportunities.

The institution's use of national reference points

258 The University engages with a wide range of national reference points and also seeks to sustain widening participation and a general commitment to the communities of the region and the employment needs of both students and employers. The relevant policies and priorities of the Welsh Assembly Government are therefore reflected in the University's overall strategy and it endeavours to provide students with relevant skills and experience for employment. The University also has a Welsh Language Scheme which meets the requirements of the Welsh Language Board in the steps it takes to promote the language.

259 Through QAC, the University is able to monitor developments in the Academic Infrastructure and to ensure alignment with the *Code of practice* in its processes, procedures and regulations is maintained. The *Credit and Qualifications Framework for Wales* informs the University's degree structures and its Assessment Policy and procedures. Subject benchmark statements are also used, where available, to inform the design and delivery of programmes and awards. Programme specifications and module descriptions are in place for programmes and are a requirement for approval.

260 The University has a full range of quality assurance processes in place to protect the quality and standards of both its taught and research provision. These processes are influenced both in their formulation and operation by a wide range of external reference points, although the documentary output from such processes does not always record explicitly the nature or impact of such influences. The University has accreditation from a wide range of PSRBs, which, because of its overall orientation, extends to a significant proportion of the taught provision.

261 The University states that its 'framework for managing academic quality and standards takes appropriate account of external reference points' and that 'it reflects the principles and expectations of these frameworks in its awards, though with some differences in nomenclature and details'. The review team concluded from the evidence available to it that the description given by the University was an accurate reflection of the situation.

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

262 The University's SED described an institution strongly committed to its students and to the continuous enhancement of the learning resources and facilities which it offers. The Strategic Plan gives top priority to improvement of the student experience. Through the Student Expectations Project and its outcomes the institution has demonstrated a willingness to listen to students and respond to their needs.

263 The University's commitment to enhancement is evidenced at many levels. Leadership and oversight is provided by the Quality Enhancement Committee and faculty learning, teaching and student experience committees. Heads of learning and teaching promote and support enhancement in their faculties, and the Centre for Excellence in Learning and Teaching provides guidance and support through dissemination projects and staff development initiatives across the institution and in its partner institutions. Significant investment has been made through strategic

developments such as ATRiuM, the centre for the School of Creative and Cultural Industries in Cardiff, FAS and education drop-in centres, and digital communication channels including 'GlamLife' and the student portal. Students confirm the value of these measures, which demonstrate the University's capacity to plan and manage substantial responses to the needs of its student body. Extensive enhancement opportunities have been introduced for staff, notably the Glamorgan Academic and Glamorgan Manager initiatives and strong provision of staff development activities.

264 The review team concluded that the University has shown a capacity to plan and implement enhancement at institutional and faculty levels. This, supported by a continued willingness to listen to its students, establishes a strong basis for future developments.

Reliability of information

265 The University recognises the importance and value of current, accurate and reliable information for its stakeholders. The assurance of the quality and accuracy of published information within the University involves a range of bodies including the Directorate Information and Systems Advisory Group, the Marketing and Student Recruitment Section, and the faculties. The development of the provision of information to stakeholders has, in a number of instances, benefited from the collection of feedback from users.

266 Through the use of both electronic and hard copy media the University makes a full range of relevant information available to students, both in English and where appropriate in Welsh, with the prospect that individual student portals will provide for this information to be personalised in the future. Responsibility for the accuracy of student handbooks for students on and off-campus is located in the faculties, but it is not always clear whether consistent formal sign-off of such information is achieved. However, students were unanimous in their view that the information they received from the institution was comprehensive, useful and accurate.

267 From a review of the relevant externally published information, drawn from data provided by the University, it was clear that the University was able to fulfil the requirements of external agencies such as the Higher Education Funding Council for Wales, Unistats, and Teaching Quality Information. The data was in line with the national expectations of currency and aligned with what was available internally.

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

268 The SED provided a good descriptive account of the University's systems for the management of academic standards and quality. Its tone was confident and it claimed a number of strengths. While the SED was not notably evaluative, other aspects of the review team's engagement with the University showed an institutional capacity for self-critical reflection.

Features of good practice

269 The following features of good practice were noted:

- the mechanisms in place to maintain the academic standards of awards across partnership institutions (paragraphs 82-84, 214)
- the strengthening of student representation, notably through the roles of the Student Representatives' Co-ordinator and Student Voice Representatives (paragraphs 111, 112, 117, 235)
- the clear alignment of the processes around staff appointment, support and development with the University's strategic aims (paragraphs 150, 156, 159, 188, 253, 254)
- the strong commitment to a range of services to support and enhance the student experience (paragraphs 181, 187, 197, 250, 251).

Recommendations for action

270 Recommendations for action that is advisable:

- to ensure that institutional oversight of quality assurance outcomes is more transparent (paragraphs 31, 49, 73, 109, 116, 171, 202, 219, 234, 242, 260)
- to review the timeliness of the signing of Memoranda of Understanding with collaborative partners to ensure that contractual arrangements are in place before students on collaborative programmes are admitted (paragraphs 208, 237)
- to ensure consistency of practice across collaborative provision in line with the University's quality assurance requirements (paragraphs 209, 210, 219, 237).

271 Recommendations for action that is desirable:

- to keep under review the development of faculty practice in order to enhance further the student experience (paragraphs 39, 236, 266).

Appendix

The University of Glamorgan's response to the Institutional review report

The University welcomes the very positive outcome of the Institutional review as detailed in the report. It is pleased that confidence can be placed in the soundness of the University's current and likely future management of the quality of its academic programmes and the academic standards of its awards. The University is also pleased that the report draws attention to many areas of good practice including the mechanisms in place to maintain the academic standards of awards across its network of collaborative partners in the UK and overseas. The University also welcomes the positive comments about our strong commitment to a range of services to support and enhance our students' experiences, our strengthened student representation at all levels and the clear alignment of the processes around staff appointment, support and development with the University's strategic aims.

Appropriate steps will be taken to consider the recommendations of the report. The highlighted features of good practice will be built upon as part of the University's commitment to enhancing the quality of the student experience.

The University thanks the review team for the thoroughness it demonstrated in carrying out the review.