# **University of Plymouth**

FEBRUARY 2005

Institutional audit

#### **Preface**

The Quality Assurance Agency for Higher Education (the Agency) 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 the Agency carries out reviews of individual HE institutions (universities and colleges of HE). In England and Northern Ireland this process is known as institutional audit. The Agency operates similar but separate processes in Scotland and Wales.

#### The purpose of institutional audit

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

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

#### **Judgements**

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

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

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

#### Nationally agreed standards

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

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

#### The audit process

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

The main elements of institutional audit are:

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

#### The evidence for the audit

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

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

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

From 2004, institutions will be required to publish information about the quality and standards of their programmes and awards in a format recommended in document 02/15 *Information on quality and standards in higher education* published by the Higher Education Funding Council for England. The audit team reviews progress towards meeting this requirement.

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#### Summary

#### Introduction

A team of auditors from the Quality Assurance Agency for Higher Education (QAA) visited the University of Plymouth (the University) from 28 February to 4 March 2005 to carry out an institutional audit. The purpose of the audit was to provide public information on the quality of the University's programmes of study and on the academic standards of its awards.

To arrive at its conclusions the audit team spoke to members of staff throughout the University, to current students, and 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 academic award (for example, a degree). It should be at a similar level across the UK.

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

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

#### Outcome of the audit

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

 broad confidence can be placed in the soundness of the University'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 audit team identified the following areas as being good practice:

- the active use and continuous development of the staff and student intranet portals, allowing both currency of information and relevance of communication to be maintained during a period of extensive organisational change
- the effectiveness of Internal Quality Audit as a mechanism for investigating the operation of key quality processes
- the partnership between the University and its Student Union to improve student representation

- the work of the Educational Development and Learning Technologies unit in supporting staff academic and professional development, as exemplified by its comprehensive guide, Designing your Programmes and Modules
- the effectiveness of the SkillsPlus strategy in drawing together policies relating to student academic support, skills development and employability
- the support for postgraduate research students provided through the Graduate School, facilitating development of the University's research student community.

#### **Recommendations for action**

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

Recommendations for action that is advisable:

 to give the necessary impetus to ensure full implementation of the University Assessment Policy at faculty and school levels, with an emphasis on achieving local consistency in arrangements for the moderation of marking and the provision of feedback to students.

Recommendations for action that is desirable:

- to be proactive in monitoring the effectiveness of associate deans in interpreting institutional quality requirements and promoting local ownership and consistent operation of quality assurance and enhancement processes in their faculties, while working to achieve an equivalence of student experience across faculties
- building on the practice in certain subject areas of publicising module reviews to students, to adopt a university-wide approach to utilising module evaluation and communicating resultant action.

#### Summary outcomes of discipline audit trails

The audit team also looked in some detail at several individual programmes in the four discipline areas of Psychology, Computing, Architecture and Design, and Human and Social Geography to find out how well the University's systems and procedures were working at programme level. The University provided the team with documents, including student work, and members of the team spoke to staff and students from each discipline area. As well as its findings supporting the overall confidence statements given above, the team was able to state that the standard

of student achievement in the programmes was appropriate to the titles of the awards and their place within *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ), published by QAA. The team was also able to state that the quality of learning opportunities available to students was suitable for the programmes of study leading to the awards.

#### National reference points

To provide further evidence to support its findings, the audit 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 audit suggest that the University has responded appropriately to the *Code of practice for the assurance of academic standards in higher education*, the FHEQ, subject benchmark statements and programme specifications.

The audit process includes a check on the reliability of information about academic standards and quality published by institutions in a standard format, in line with the Higher Education Funding Council for England (HEFCE) requirements for *Information on quality and standards in higher education: Final guidance (HEFCE 03/51)*. At the time of the audit, the University was making progress towards fulfilling its responsibilities in this area. The information it was publishing about the quality of its programmes and the standards of its awards was found to be reliable.



#### Main report

- 1 An institutional audit of the University of Plymouth (the University) was undertaken from 28 February to 4 March 2005. The purpose of the audit 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 audit 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 England (HEFCE), the Standing Conference of Principals (SCOP) and Universities UK (UUK), and has been endorsed by the Department for Education and Skills. For institutions in England, it replaces the previous processes of continuation audit, undertaken by QAA at the request of UUK and SCOP, and universal subject review, undertaken by QAA on behalf of HEFCE as part of the latter's statutory responsibility for assessing the quality of education that it funds.
- The audit 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 the programmes of study leading to those awards; and for publishing reliable information. As part of the audit process, according to protocols agreed with HEFCE, SCOP and UUK, the audit included consideration of institutional processes at work at the level of the programme, through four discipline audit trails, together with examples of those processes operating at the level of the institution as a whole. The scope of the audit encompassed all of the University's 'in-house' provision leading to its awards. The provision offered under collaborative arrangements will be the subject of a future audit.

## Section 1: Introduction: the University of Plymouth

#### The institution and its mission

4 The University's origins go back to the establishment of a Mechanics Institute in the 1820s and Plymouth's Nautical School in 1863. By 1932, these institutions had evolved into Plymouth and Devonport Technical College, which became Plymouth Polytechnic in 1970. Amalgamations with Exeter College of Art, Rolle College of Education, and Seale Hayne College led to the formation of Polytechnic South West in 1989, which became the University of Plymouth in 1992 with the award of university title. In 1995, the Tor and South West College of Health was incorporated and in 2002,

- the Peninsula Medical School (PMS) was established in collaboration with the University of Exeter. The University has full degree awarding powers.
- 5 The University is currently based on four campuses at Exeter, Exmouth, Plymouth and Seale Hayne (Newton Abbot). However, there is also provision in the Faculty of Health and Social Work located in Bristol, Taunton and Truro, while the PMS has additional sites at the University of Exeter and in Truro. Development of the University's estate is to be concentrated primarily on the Plymouth campus, with some activity, mainly relating to Education, at the Exmouth campus. There are plans to close the Seale Hayne and Exeter campuses in 2005 and 2007 respectively.
- 6 Statistics for July 2004 show the University had nearly 29,000 (22,426 full-time equivalent) students, of whom some 25,000 were undergraduates and 4,000 were postgraduates. Part-time students constituted 30 per cent of undergraduates and 75 per cent of postgraduates. UK and other European Union students made up 95 per cent of students. More than 6,000 students were studying at partner institutions.
- The present academic structure was established to bring together cognate subject areas (as opposed to geographical sites) into seven faculties, including University of Plymouth Colleges (UPC); there is in addition the PMS. With the exception of the Faculty of Education and UPC, faculties are organised into schools, of which there are 15. The range of subjects offered by the University includes: architecture and design; arts; humanities; education; health and social work; biological sciences; earth, ocean and environmental sciences; psychology; geography; business; social sciences; law; computing and electronics; engineering; and mathematics. The University created its Graduate School in autumn 2003 to play an important role in the development of the postgraduate community within the University.
- 8 Special features of the University's academic provision are its strong regional focus and its collaborative activity. These are reflected in the organisation of UPC, based on a 'hub and rim' model, and the University's involvement in the PMS and the Combined Universities in Cornwall project. In addition, the University hosts the Higher Education Academy's (HEA) subject centre for Geography, Earth and Environmental Sciences.
- 9 A new Vice-Chancellor, appointed in September 2002, has led a major restructuring of the University's academic and administrative organisation, its estate and most of its principal strategies and policies. At the time of the audit, academic restructuring was largely complete and

the University was in the process of finalising strategies, policies and procedures that would operate in support of the new structure. In this context, the audit team particularly explored the means by which the University was engendering ownership of its new arrangements for quality assurance to the benefit of the student experience.

- 10 The University's mission is to be a university of excellence, which:
- delivers teaching and research to world-class standards
- fosters scholarship and culture
- serves the region
- develops responsible students capable of critical reasoning and practical action
- is open and accessible
- is an effective community working in partnership with others.

#### Collaborative provision

- 11 The University has substantial collaborative provision offered in partnership with other institutions across Cornwall, Devon, Dorset and Somerset, involving some 20 per cent of its students. Many of its collaborative arrangements are managed through UPC, which includes as associated colleges Bicton College, City of Bristol College, Cornwall College, East Devon College, Exeter College, North Devon College, Penwith College, Plymouth College of Further Education, Plymouth College of Art and Design, Somerset College of Arts and Technology, South Devon College, Truro College and Weymouth College, as well as four Royal Navy establishments.
- 12 The University also has institutional accreditation arrangements with University College Falmouth (which has obtained degree awarding powers) and Dartington College of Arts. These relationships are intended to be supportive and developmental, as the two higher education institutions work towards awarding their own degrees. In addition there is the PMS, offering joint degrees with the University of Exeter, while the Faculty of Health and Social Work has long-standing partnerships with regional health trusts, and other health care providers. Finally, there are a small number of overseas collaborative links, managed by the relevant home faculty.
- 13 In view of the size of the University's collaborative provision, it will be the subject of a separate audit, although the PMS is considered within the present institutional audit.

#### **Background information**

- 14 The published information available for this audit included:
- the information on the University's website
- the report of the previous QAA quality audit of the University, undertaken in November 2000
- the reports of HEFCE and QAA reviews of provision at subject level.
- 15 The University provided QAA with the following documents:
- the self-evaluation document (SED)
- discipline self-evaluation documents (discipline SEDs) for the four areas selected for discipline audit trails (DATs)
- the Corporate Plan 2004-09
- the 2005 undergraduate and postgraduate prospectuses
- the 2004-05 Student Handbook and Guide to Services
- the Quality Assurance Handbook: Taught Programmes
- student statistics (on CDROM).
- 16 The audit team was given ready access to the University's internal documents in hardcopy or on the University website and intranet and to a range of documentation relating to the selected discipline audit trails, the latter including examples of student work.

#### The audit process

- 17 Following the preliminary meeting at the University in June 2004, QAA confirmed that four DATs would be conducted during the audit visit. QAA received the SED in October 2004 and the discipline SEDs in December 2004. The audit team's selection of DATs was Psychology, Computing, Architecture and Design, and Human and Social Geography. The discipline SEDs comprised SEDs relating to internal periodic reviews.
- 18 The audit team visited the University from 17 to 19 January 2005 for the purpose of exploring with the Vice-Chancellor, senior members of staff and student representatives matters relating to the management of quality and standards raised by the SED or other documentation provided for the team. During this briefing visit, the team signalled a number of themes for the audit and developed a programme of meetings for the audit visit, which was agreed with the University.

- 19 At the preliminary meeting, the students of the University were invited, through their Students' Union (UPSU), to submit a separate document expressing views on the student experience at the University and identifying any matters of concern or commendation with respect to the quality of programmes and the standards of awards. They were also invited to give their views on the level of representation afforded to them and on the extent to which their views were taken into account.
- 20 In October 2004, UPSU submitted to QAA a students' written submission (SWS) produced by its Executive Committee, primarily on the basis of an analysis of focus group discussions with first-year students in each faculty. The same questions were put to each focus group under the four key areas identified in Annex D of the *Handbook for institutional audit: England.* UPSU indicated that the document had been shared with appropriate University staff. There were no matters that the audit team was required to treat with any level of confidentiality greater than that normally applying to the audit process. The team is grateful to the students for preparing this document to support the audit.
- 21 The audit visit took place from 28 February to 4 March 2005 and involved further meetings with staff and students of the University, both at institutional level and in relation to the selected DATs. The audit team was: Mr R Farmer; Professor J Gowlett; Dr D Houlston; Professor A Jago; Ms A J Kettle, auditors, and Ms W Appleby, audit secretary. The audit was coordinated for QAA by Ms J Holt, Assistant Director, Reviews Group.

### Developments since the previous academic quality audit

- 22 The previous QAA quality audit was undertaken in November 2000. The report, published in July 2001, commended several aspects of the University's practice:
- the integration within its quality strategy of its collaborative activity with partner institutions
- the consistency of its approach to the management of assessment panels and boards
- the work of the Quality Evaluation and Enhancement Unit
- the work of the South West Regional Access
   Centre in meeting the precepts of the Code of
   practice for the assurance of academic quality and
   standards in higher education (Code of practice),
   Section 3: Students with disabilities, published
   by QAA

- the level of staff development activity, and the way in which partner institutions were included in the University's staff development provision
- its work in seeking to enhance communications across the institution by broadening the strategic planning processes and encouraging widespread involvement in the 'Student-centred Learning Initiative'
- the ways in which it sought to involve the student body in quality assurance matters.
- 23 The report also made a number of recommendations for the University to consider, including the following which were identified as advisable:
- ensuring that Academic Board was provided with sufficient information to enable it to consider and debate the academic portfolio as it developed, and to take stock of the impact of that development on the University's overall quality strategy
- reviewing the information collected in the course of key quality assurance processes, in order to determine which data were essential to inform and maintain an appropriate institutional overview of activities in faculties and partner institutions
- clarifying the responsibilities of the key committees relating to quality and standards and the responsibilities of executive officers in relation to those committees, ensuring that the responsibilities were understood and implemented
- considering further how the data obtained from assessment processes might be used to inform and strengthen the judgement of the central committees about the University's capacity to maintain standards and compare the attainment of all students studying for its awards
- proceeding with the development of the Information Strategy, as a means of further improving the flow of information across the University and to and from its committees, managers and partner institutions.
- 24 It was also identified as desirable for the University to put into effect its planned arrangements for approving relevant publicity materials produced by partner institutions.
- 25 The SED for the present institutional audit included the University's formal response to the 2001 audit report. However, the audit team recognised that the scale of the recent restructuring reduced both the purpose and the means of

following up on certain actions relating to the previous audit. The SED also incorporated relevant developments since the response.

- 26 With regard to portfolio planning, a revised process entailing the development of faculty plans was piloted in 2003-04, and a formal Planning and Resources Committee (PRC) reporting to the Chancellery (the Vice-Chancellor's advisory team) was established, superseding an interim planning group. A major review of the undergraduate portfolio leading to progressive rationalisation had, in the University's view, provided a clearer focus on strengths, while more transparent planning approval processes for new programmes are being introduced.
- 27 There has been a fundamental review of quality assurance processes and procedures, which encompassed the collection of information for institutional oversight of activities in faculties, including UPC. New annual programme monitoring procedures give attention to a specific range of statistical indicators, which programme teams are required to discuss, while school statistics are to be reviewed at institutional level by the Learning and Teaching Committee (LTC) and the Graduate Committee, which has plans for more benchmarking of statistical indicators. The Corporate Information Department now publishes annually a suite of comparative statistical data, available on the intranet (see paragraphs 94-96 below).
- 28 A new structure for committees reporting to Academic Board (the academic decision-making body of the University) was agreed in 2003 and the formation of LTC has overcome earlier problems of potential overlap of committee business; some remaining lack of clarity at the boundary between LTC and the Graduate Committee has since been addressed. The University Information Strategy was approved in February 2003 and is in the process of implementation. Within its scope is the development of a corporate information system to provide userfriendly integrated management information on key aspects of the University's business. With respect to publicity material produced by partner colleges, UPC has established a corporate approach to publicity and marketing.
- 29 Since the 2000 audit, the University has participated in three QAA subject reviews, three developmental engagements (DEs), two major reviews of National Health Service (NHS)-funded provision (including one prototype) and one Foundation Degree review. At institutional level, its approach to the outcomes of such reviews, as described in the SED, has been to focus on good

- practice and any prevalent issues, instigating action accordingly, with the implementation of the Assessment Policy and SkillsPlus strategy providing examples (see paragraph 79 below).
- 30 The present audit team considered that the University had generally taken effective and timely action in response to issues arising from external audit and review, although certain areas continued, in the team's view, to require further attention. These included the full implementation of the institutional Assessment Policy at faculty and school levels (see paragraph 73 below), and the adoption of a consistent approach to module evaluation collected in the course of annual monitoring, particularly in respect of communicating resultant action to students (see paragraph 90 below). In addition, the team considered there was a need to ensure, through proactive monitoring, that the responsibilities of associate deans were understood and being implemented, given the importance of these new roles in the quality management structure (see paragraph 41 below).
- 31 The audit team also noted further progress in relation to strengths identified in the 2000 audit. This included the continued priority given to developing communications across the institution (see paragraph 45 below), the work of Quality Support (incorporating the former Quality Evaluation and Enhancement Unit) in respect of Internal Quality Audit (IQA) (see paragraph 62 below), the partnership with UPSU to improve student representation (see paragraph 86 below), the arrangements for supporting staff academic and professional development (see paragraph 108 below), and the evolution of the University's approach to student support to give emphasis to improving students' skills for employment and to developing the research student community (see paragraphs 121 and 124 below). In the course of the audit, the team expressly explored the extent to which the new structures and processes for quality management were becoming established.

# Section 2: The audit investigations: institutional processes

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

32 According to the SED, the recent reorganisation of the faculties and review of administration had offered an opportunity to bring together what had historically been separate functions: the processes for the assurance of quality of the student experience and those directly related to academic standards of

the University's awards. In designing processes that best meet the needs of the University, the overall aim, as defined in the paper entitled Quality Processes and Structures, has been to have 'a cost effective, coherent and common set of systems across all faculties which will deliver enhancement of the student learning experience and meet external quality requirements'. Within the Framework for Quality and Standards, the University's academic standards are said to be 'established, maintained and enhanced primarily through the professional expertise of its academic staff' and quality assurance is therefore the shared responsibility of the whole University, faculties and individual staff.

- 33 Among the key features of the University's strategic approach to managing quality and standards, as outlined in the SED, are:
- a 'sufficient' approach to the specification of quality requirements to provide guidance, while allowing local interpretation
- a developing quality and standards framework which seeks to maintain standards by means of rigorous processes and externality, while encouraging innovation and enhancement
- a devolved quality management structure which defines responsibility for quality at all levels, while maintaining an institutional overview.

It has been agreed that the implementation of quality assurance processes should, as far as possible, lie with the faculties, since these are, as stated in the SED, 'entrusted and empowered to deliver quality and programme enhancement'.

34 The University is responsible both for the design of quality processes to provide consistency and for a level of auditing and monitoring sufficient to assure the quality and standards of its awards. While it was admitted that there were still improvements to be made in establishing clarity of practice in the implementation of policy at local level, according to the SED the re-assessment of the purpose of quality assurance processes and the sharing of roles and responsibilities has helped to develop an increased sense of ownership, which should improve the connection between strategies and policies at institutional and faculty level.

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

35 As the SED explained, the policy framework for developments in learning, teaching and assessment practice aimed at 'enhancing the quality of the student learning experience' is established by the

Learning and Teaching Strategy. The Vice-Chancellor has ultimate responsibility for quality and standards, but strategic responsibility for the overview of academic quality and standards is delegated to two deputy vice-chancellors who share the academic portfolio (DVCs Academic). The Chancellery team also includes the Pro-Vice Chancellor (Teaching and Learning) and the Dean of Students, plus on the administrative side, the DVC (Administration), the University Secretary and Academic Registrar, and the directors of Corporate Finance and Personnel Development. Each of the seven faculties is led by a dean who is line-managed by the Vice-Chancellor and is ultimately responsible for the quality of the student learning experience and the maintenance of appropriate standards within the faculty. The deans are assisted by associate deans (usually three, respectively designated Learning and Teaching (LT), Graduate Studies (GS) and Research), who have delegated responsibility for the quality assurance of taught and research degree programmes in the faculty. Faculty quality administrators support the associate deans in their work. The heads of the 15 schools are appointed to provide academic leadership in relation to taught and research programmes of study and research development, and report to the deans on the implementation of University policies and procedures within their schools.

- 36 Academic Board is formally responsible for the framework for quality and standards and the regulation and control of academic programmes; it is assisted by a number of subcommittees, notably the LTC whose membership includes associate deans (LT). LTC (formerly Academic Committee) is responsible for the development and monitoring of strategies and policies related to learning and teaching, including the Learning and Teaching Strategy and the University Assessment Policy. Following the establishment of the Graduate School, the Research Degrees Committee was renamed the Graduate Committee and given responsibility for the quality assurance of postgraduate research degree programmes and the strategic overview of postgraduate taught provision. LTC retains responsibility for the quality assurance of all taught programmes. PRC, a subcommittee of the Chancellery has oversight of the University planning process and is therefore an influential committee with an impact on teaching and learning resources provision.
- 37 At faculty level, faculty boards, reporting to Academic Board are the ultimate authority in matters of quality and standards, while their subcommittees for Learning and Teaching (faculty LTCs) and Graduate Affairs (faculty GACs) have specific responsibilities relating to programme

approval and monitoring (see paragraphs 50 and 53 below). The audit team heard how cross-membership creates effective links between faculty-based and institution-level committees.

- 38 Following increased devolution of responsibility for quality assurance procedures to the faculties, a new unit for Quality Support has been set up to provide central support to faculties, conduct quality audits and support LTC in maintaining an overview of quality and standards. According to the SED, the quality assurance roles and functions of Quality Support are distinct from the management by the associate deans (LT) of the implementation of quality assurance processes at faculty level, with Quality Support, for example, having responsibility for advising on national developments and their implications for institutional procedures. Following the establishment of Quality Support, a single Quality Assurance Handbook: Taught Programmes (QA Handbook), containing documents relating to quality assurance processes, has replaced separate handbooks on Review and Approval and Quality Evaluation and Enhancement. The online version of the QA Handbook was still under development at the time of the audit, but it is intended that it should constitute a comprehensive guide to the University's quality and standards arrangements, incorporating the Framework for Quality and Standards (2005), which covers roles and responsibilities of individuals. A document management system designed to provide a definitive single source for all official documents, was not yet fully functioning (see paragraph 194 below).
- 39 Academic standards in the end-of-year assessment process are monitored by means of a two-tier system of subject assessment panels (SAPs) and award assessment boards (AABs). In order to ensure consistency across faculties, operational instructions for SAPs and AABs are published within the University's Academic Regulations (see paragraph 66 below), which also define the progression and award rules for taught programmes. The SED explained that academic standards are managed initially in programme approval through the development of programme specifications and then through the application of the University Assessment Policy. This was adopted by Academic Board in 2002 and reflects the Code of practice, Section 6: Assessment of students. Although guidance had been issued to schools on the implementation of the nine principles of the Assessment Policy, and Educational Development and Learning Technologies (EDaLT) had developed helpful advice on Good Practice in Assessing Students (see paragraphs 79 below), the audit team learned that timescales for the

implementation of the policy had slipped due to academic restructuring (see paragraph 73 below).

- 40 Of the collaborative arrangements considered by the audit, the PMS was formed in 2000 as an equal partnership between the Universities of Plymouth and Exeter. The SED explained that the universities had established a joint management structure and aligned where necessary their internal policies and practices (see paragraphs 129-131 below). In other collaborative activities, such as that of the Faculty of Health and Social Work with health service partners, standard University processes for quality assurance, enhancement and the maintenance of standards are in force.
- 41 The audit team formed the view from documentation and meetings that the University had recently developed, and was in the process of refining, an effective framework for managing quality and standards and, as a result, broad 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 standards of its awards. In view, however, of the important role played by the associate deans in this framework (see paragraphs 42, 45, 50, 53, 57 and 80 below), the team considers it desirable for the University to be proactive in monitoring their effectiveness in interpreting institutional quality requirements, and promoting local ownership and consistent operation of quality assurance and enhancement processes in their faculties, while working to achieve an equivalence of student experience across faculties.

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

- 42 In the SED, the University highlighted as a strength its commitment to quality enhancement and identified the following organisational processes and structures supporting quality in learning and teaching:
- the recently appointed network of associate deans (LT) which creates 'synergies between policy and practice'
- the recently restructured Quality Support, which 'brings together an institutional overview of quality and standards'
- the Quality Network, which 'provides a forum for discussion of key issues and dissemination of good practice'
- the 'effective central support for educational development'

- subject forums across the UPC partnership (outside the scope of the audit), which 'provide an innovative approach to sharing and promoting high quality teaching'.
- 43 However, the SED also acknowledged a number of areas the University still needed to develop, such as formulation and use of further statistical indicators at school level; evaluation and refinement of the new periodic review process; and possible modification of the student perception questionnaire (SPQ) to pick up student needs as changes are taking place.
- 44 It was apparent to the audit team that in managing and implementing change over the last three years, the University had put in place structures and procedures such that quality enhancement was a key driver in its academic strategies. This is demonstrated by the University's success in the National Teaching Fellowship scheme and its achievement of four Centres for Excellence in Teaching and Learning (CETLs), plus another in partnership with various other institutions. It is again reflected in the University's priorities for advancing its research and regional ambitions.
- 45 The extent of revision to internal quality assurance processes that had accompanied restructuring also became clear to the audit team and in this context, it identifies as a feature of good practice the active use and continuous development of the staff and student intranet portals, allowing both currency of information and relevance of communication to be maintained during a period of extensive organisational change. However, the team saw the role of associate deans now as pivotal in taking forward routine improvements alongside enhancement initiatives and although these posts had existed for only a short period, there was evidence of the positive impact they were already having. The team concluded that the University's proposals for quality enhancement were appropriate and relevant to its current stage of development.

### Internal approval, monitoring and review processes

46 The SED explained that a working group had been established in 2003 to review institutional processes for approval, monitoring and review 'with the intention of improving both their efficiency and effectiveness'. Following consultation with faculties and central administrative groups with responsibilities for quality assurance, revised and redesigned processes have since been approved by Academic Committee (now LTC).

#### Programme approval

- 47 A revised procedure for programme and module approval and modification, under which responsibility is devolved to the faculties, was approved for introduction in the 2004-05 session, although there is a special arrangement for UPC whereby Quality Support retains responsibility for coordinating programme approval. Before the approval process for a new programme can begin, faculties are responsible for establishing a programme development committee which includes the head of school, the appropriate associate dean, Information and Learning Services (ILS) staff and external advisers. This committee produces an outline programme proposal, which is countersigned by the dean to indicate that it is in line with the faculty strategic plan and that resource requirements can be met. The proposal is then submitted to the DVC (Academic) as part of the University planning process.
- 48 A detailed guide produced by EDaLT, entitled Designing your Programmes and Modules, explains the internal and external criteria to be met in taking a programme from design to delivery. The documentation required for the approval of new programmes consists of:
- a programme specification that takes account of the relevant benchmark statement(s), The framework for higher education qualifications in England, Wales and Northern Ireland (FHEQ) and the University Assessment Policy
- an approval document that includes the results of market research; the relationship to external and internal regulations, policies and procedures; the programme outcomes map, resource base and programme management structure
- a definitive module record for each module included in the programme.

Templates are provided in the QA Handbook for programme specifications and module records.

49 Approval panels are appointed by the faculty LTC and include the appropriate associate dean, a senior member of academic staff from another faculty and a minimum of two independent external peers. In the case of a combined approval and accreditation event, a representative from the relevant professional, regulatory and statutory body (PRSB) is also included in the membership. An aide memoire in the form of an agenda for a programme approval meeting is provided in the QA Handbook to ensure that external criteria, including the *Code of practice* and subject benchmarks have been observed and that due attention has been paid to the needs of disabled students. Following the meeting of the approval panel, a report is prepared by the faculty

quality administrator, which incorporates any conditions of approval or recommendations to the programme team, and this is submitted to the faculty board for final approval. Faculties have delegated authority to approve changes to modules and programmes and faculty procedures must ensure that where a module is part of more than one programme, the written agreement of the relevant associate dean(s) is obtained. Under the revised procedure, faculties are responsible for holding and updating definitive documentation, although, according to the SED, some concerns remain about the maintenance of accurate module records.

50 Although the devolved process had only been fully implemented in September 2004, following trialling under 'transitional arrangements' during the preceding academic year, the audit team heard both from staff seeking approval for new programmes and from those responsible for the process at faculty level that it was working effectively. A number of events had taken place in the new format and, as a result, the process had been modified slightly. The team recognised the important role of the associate deans in ensuring that any conditions imposed were met before final approval was given.

#### **Annual monitoring**

- 51 According to the QA Handbook, the purpose of annual programme monitoring is 'to provide an annual health check on the quality, standards and relevance of all the University's taught programmes of study (undergraduate and postgraduate)'. A revised, faculty-based process was introduced at the start of the 2003-04 session.
- 52 Under the new process, programme committees consider a standard data set which includes:
- institutional data on the programme
- external examiner reports and responses to them
- SPQ results
- graduate destinations
- the previous year's action plan.
- Using a template, the programme committee records the actions to be taken in response to the data, comments from student representatives and actions taken, and examples of good practice and enhancement. In addition, an action plan is prepared for the forthcoming session, including timescales and responsibilities.
- 53 A copy of the minutes of the programme committee meeting, the action plan and summaries of programme data are sent to the associate dean (LT) for undergraduate programmes and the associate

dean (GS), or equivalent, for postgraduate programmes. It is the responsibility of the associate dean to ensure that the annual monitoring process has been duly carried out; to identify a sample of programmes for review using the full set of evidence; to collate examples of good practice and enhancement; and to feed back any identified issues of concern to the programme committee. Led by the respective associate deans, the faculty LTC and faculty GAC consider the programme committee minutes and action plans. Following these meetings, the associate deans produce brief reports for the faculty board, making explicit reference to faculty-level SPQ findings, distilling the outcomes of discussions and proposed actions to be taken at faculty level and identifying any institution-wide issues for referral to LTC. According to the SED, it has recently been agreed that Graduate Committee should receive comments from LTC on issues arising from the annual monitoring of taught postgraduate programmes. The timetable for the consideration of reports of the annual monitoring of taught postgraduate programmes has been adjusted to allow for the later receipt of reports from external examiners.

54 The audit team was informed that, following the first year of operation of the new process, some changes had been made in the interests of increased consistency. An IQA of programme committees (see paragraph 60 below) had identified the need for further improvements in annual programme monitoring, as well as instances of good practice for wider dissemination. From its reading of committee minutes, the team was able to see how universitywide issues identified from annual monitoring at faculty level were discussed by LTC. From what it heard in meetings and read in documentation, the team was able to confirm the claim in the SED that the revised procedure provided an effective 'health check' and that the associate deans played a key role in ensuring consistency of the monitoring process.

#### Periodic review

- 55 A revised process for periodic review has been introduced for the 2004-05 session. According to the SED, the new process focuses on the review of broadly defined subject areas, rather than the revalidation or reapproval of particular programmes. The definition of subject areas is agreed between the deans and LTC and are normally based on one school. All programmes, undergraduate and postgraduate, are to be reviewed over a five-year period.
- 56 Periodic review considers the following elements:
- the coherence and relevance of taught programmes and research degrees

- the context within which the subject area operates in relation to the faculty and the University
- academic standards and student achievement, taking into account curriculum design and assessment, programme specifications and subject benchmarks
- the quality of the student learning experience, taking into account learning and teaching strategies, student support, learning resources and student feedback
- opportunities for enhancement
- plans for future development.
- 57 Periodic review panels include the dean and another member of the faculty, normally the associate dean (LT), a head of school from a different faculty and two or three external advisers. A member of LTC from outside the faculty chairs the panel and a member of Quality Support acts as secretary and advises on quality assurance arrangements and academic regulations.
- 58 The process involves preparation of a SED for the subject under review, using a comprehensive template, to encourage critical reflection. Panels are provided with extensive documentation, including annual programme monitoring outcomes and external examiner reports for the period under review, samples of student feedback for the previous two years and samples of assessed work. The indicative programme for the review comprises meetings with employers and graduates as well as with staff and student groups, including postgraduate students as relevant. The report of the review, following the layout of the HEFCE-designed template (HEFCE 03/51: Information on quality and standards in higher education: Final guidance refers), is signed off by the chair of LTC and forms the basis of the requisite summary to be published on the TQI (Teaching Quality Information) website (see paragraph 193 below). It is intended that an overview of outcomes will be considered annually by LTC.
- 59 Although it was recognised that it would not be possible to evaluate the full effect of the new process by the time of the audit visit, confidence was expressed in the SED that a process of review had been designed that served the University's mission and strategic objectives, while taking into account external expectations, such as the *Code of practice* and the HEFCE requirements for TQI. The reports of the first three completed reviews were available to the audit team and enabled it to confirm the University's view of the robustness of the revised procedure.

#### **Internal Quality Audit**

- 60 The SED explained that IQA provided 'an indepth, evidenced-based, topical investigation into the efficiency and effectiveness of the University's policies and processes'. Since the 2001 quality audit which commended the process, IQAs have been undertaken on: academic review; key graduate attributes and skills; enhancement of academic programmes; internal review; and external examining. An IQA on programme committees was about to be completed at the time of the audit. The programme of audits is proposed by the Director of Quality Support and agreed by LTC. Quality Support is responsible for the planning and implementation of audit strategies and for reporting on outcomes.
- 61 The purpose, scope, strategy and reporting arrangements for the audit are incorporated in an agreement with those undergoing audit, which is approved by the chair of LTC. Internal auditors, drawn from the academic and administrative staff, are issued with notes of guidance and operate according to a model of good practice contained in the QA Handbook. Audit reports are considered by LTC and their approved action plans form a checklist for monitoring future developments.
- 62 The audit team was able to confirm from the IQA reports it saw and from what it heard in meetings that the process had been, as described in the SED, 'an effective catalyst for change'. For example, the extensive recommendations of the IQA of internal review had helped to shape the new process of periodic review, while the IQA of external examining had led to improvements in the appointment, briefing and support of external examiners (see paragraph 69 below). The team identifies as a feature of good practice the effectiveness of IQA as a mechanism for investigating the operation of key quality processes.

### External participation in internal review procedures

63 According to the SED, the University 'has always valued the input of external peers to its review and approval processes'. It is expected that programme development will involve external advisers, and staff designing new programmes are encouraged to contact local employers and involve them in planning. Programme approval panels include a minimum of two independent external peers with academic, industrial or other appropriate experience. Programme leaders are provided by LTC with detailed guidance on the qualifications expected of such external advisers and it is

stipulated in the QA Handbook that nominations will not be considered if the individual has been a member of staff or an external examiner during the previous five years, has participated in the planning process, or has direct responsibility for providing student placements. External members of programme approval panels are consulted on the agenda for panel meetings and provided with briefing notes on their role. The QA Handbook makes clear that the panel will use external expertise 'to focus upon subject health as evidenced through staff research, teaching and learning methods, outcomes and relevance to employment'.

- 64 The same definition of independent external adviser applies to periodic review panels which are required to contain at least two external members, and the SED explained that, where appropriate, a third employer (or community) external could be added to supplement academic and professional expertise. The audit team was able to confirm from seeing periodic review reports based on the new process that panels had contained appropriate external members. For IQA, there is also provision for the use of external auditors, who would usually have experience of QAA subject review or institutional audit.
- 65 External peers brought into these processes are nominated by the relevant faculty and approved by the chair of LTC. The audit team understood that following some difficulties in recruiting external panel members, the University was considering revising its policy of not offering payment for their services. The team found that the University used external advice constructively and that externality in programme development and approval and in periodic review was strong and scrupulous and supported the judgement of broad confidence in the University's management of quality and standards.

#### External examiners and their reports

66 Procedures for the appointment and use of external examiners are included in the Academic Regulations, most recently revised in 2004-05. Reflecting the University's two-tier assessment system involving SAPs and AABs, there are separate definitions of the respective roles of subject and award external examiners, with the latter normally being drawn from appropriate groupings of the former. The subject external examiner deals primarily with the standards of assessment in a specific group of modules, whereas the award external examiner ensures that decisions on progression or award for individual students are made in accordance with assessment regulations.

Detailed role descriptions are set out as 'rights and responsibilities', and there is provision for terminating the appointment of an external examiner not fulfilling the role. The appointment process for external examiners, including management of the central database, has recently been transferred to Quality Support as part of a wider brief, which the SED stated was designed 'to strengthen the institutional overview'.

- 67 External examiners are required to submit annual reports on a template, which now includes a section for producing the summaries for publication on the TQI website (see paragraph 193 below). Following revision of quality processes and structures, from summer 2005 the intended route for external examiner reports is that they will be received by faculty quality administrators who will alert relevant heads of school and associate deans to matters requiring an immediate response, before forwarding reports to faculty quality administrators for progress chasing, record keeping and distribution within the faculty. At this stage, external examiner reports become an input to the annual programme monitoring process, which requires programme teams to formulate action plans addressing issues raised and to send formal responses to external examiners on resultant action.
- 68 Copies of external examiner reports will also be sent to Quality Support, which has taken on responsibility for bringing institutional issues to the attention of the Academic Regulations Sub-Committee of LTC and for alerting the University Secretary and Academic Registrar to any regulatory matters that may require an individual response. External examiners will continue to receive a summary of institutional issues and responses to them as part of the following years' briefing information, now also the responsibility of Quality Support, in order to provide context for discussing with programme/subject teams their progress in implementing the University Assessment Policy.
- 69 In its SED the University based its confidence in its external examiner system on the overall positive findings of the IQA of external examining (November 2003), which showed the University's practices to be broadly aligned to the corresponding section of the *Code of practice*. The IQA report also made several recommendations which, from its reading of documentation, the audit team was able to verify had been, or were in the process of being, implemented. Examples included strengthening appointment procedures for external examiners through development of the central database, improvements to the 2004 briefing material, and

inclusion of a standing item on the agenda of both SAPs and AABs to consider matters arising from the previous years' external examiner reports and responses to them. In addition, the IQA acknowledged that some institutional issues raised by external examiners reflected the disagreement of a few with aspects of the Academic Regulations. This led it to question the sufficiency of briefing and to suggest the introduction of an institution-level generic briefing to strengthen existing arrangements for the induction and support of external examiners.

70 From its review of external examiner reports, through the DATs, it was evident to the audit team that the extent of local application of institutional assessment policy is kept under consideration and is the subject of dialogue between external examiners and programme teams. The team also learned that following a recent report to LTC on the current alignment of institutional procedures with the Code of practice (see paragraph 72 below), programme teams would be formally required to respond promptly to external examiners, following consideration of their reports as part of annual programme monitoring. The team concluded that recent changes to the arrangements for dealing with reports were clearly documented and were in keeping with the general pattern of devolving to faculties responsibility for the implementation of quality assurance procedures. Overall it found the external examiner system to be robust, supporting the judgement of broad confidence in the University's management of quality and standards.

#### **External reference points**

#### The Code of practice

71 The SED explained that as sections of the Code of practice were published a senior administrative manager, acting on behalf of a precursor committee to LTC, had coordinated the task of checking alignment of the University's procedures with the precepts of the Code. This resulted in the production of a comprehensive series of implementation reports with input from relevant academic areas and institutional services, and led the University to conclude that in most cases it was meeting the precepts of the Code. As appropriate, action plans were drawn up to address specific points, with progress against plans subsequently being monitored by relevant committees. In areas where policy development was seen to be necessary, a working group was established with this remit. One such example is the working group that drafted the University Assessment Policy, which the SED indicated had been reconvened by LTC in March

2004 to review progress on implementing the policy in the faculties.

- 72 In explaining that 'the initial implementation plan for some parts of the *Code* [of practice] lost momentum' during the significant changes set in train by restructuring, the SED admitted that it had 'proved difficult to keep track of implementation of a complex series of planned actions, some of which [might] no longer be relevant in the revised structures'. However, the SED also indicated that LTC had this year requested key individuals having oversight of the University's practices relating to the *Code* to report on progress with alignment, identifying any inconsistencies and setting out plans to address these. It pointed to the timeliness of this exercise, given recent revisions to certain sections of the *Code*.
- 73 As a means of checking for continued consistency with the Code of practice, the audit team focused on the implementation of the University Assessment Policy. Staff met by the team indicated that, although the working group's review had found all faculties to have learning and teaching strategies incorporating assessment priorities, implementation of the policy was proceeding at different rates and gaps had been identified by associate deans (LT). This 'patchiness' in implementation was confirmed to the team through annual monitoring reports received by LTC from faculties, recent periodic review reports and the DATs. Although acknowledging the relevance of guidelines on coursework management, recently prepared by the working group, the team considers it advisable for the University to provide the necessary impetus to ensure full implementation of the Assessment Policy at faculty, school and programme level, with an emphasis on achieving local consistency in arrangements for the moderation of marking and the provision of feedback to students.
- 74 Notwithstanding the above recommendation, the audit team formed the view that the report to LTC addressing residual inconsistencies between internal practice and the *Code of practice* provided a systematic mechanism for dealing with revisions to the *Code*, as well as updating the overall record of alignment.

#### The FHEQ and subject benchmark statements

75 The University adopted a similar approach to the FHEQ as to the *Code of practice*. According to the SED, in March 2001, the University Secretary and Academic Registrar presented a position paper to the relevant committee outlining the issues the University needed to address for appropriate alignment of its awards within the FHEQ, while the

remit 'to ensure compliance by the due date' was given to the Academic Regulations Sub-Committee. Resultant regulatory measures included ensuring the sufficiency of master's-level modules in undergraduate master's qualifications; ring-fencing modules key to the achievement of programme outcomes from arrangements for 'compensation' of results between modules; and discontinuing the Pass degree as a fallback for students failing at honours level. The University also introduced the award of Graduate Diploma for programmes postgraduate in time as to opposed to level, and, as the SED stated, now 'considers its Academic Regulations to be compliant with the FHEQ, other than in respect of the PGCE [postgraduate certificate in education] qualification', the designation of which was, in any case, a national issue.

76 The University's current approach to mapping programme outcomes against qualifications descriptors and subject benchmark statements is outlined in the EDaLT guide, Designing your Programmes and Modules, which includes templates designed 'to provide evidence that your programme is based on nationally agreed standards and is relevant to the subject and professional expectations'. Other reference points used in programme and module design include Southern England Consortium for Credit Accumulation and Transfer (SEEC)-level descriptors and PRSB requirements, where applicable. However, the SED acknowledged that 'while all programme specifications referred to subject benchmark statements, not all had undertaken a mapping of programme outcomes against the benchmarks, and some predated the FHEQ'. It also pointed to the introduction of a revised template for programme specifications, to be used in programme approval from 2004-05 and for publishing all programme specifications from 2005-06.

77 The discipline SEDs showed there was significant variability in the format of programme specifications (also recognised by the University in the SED). However, staff meeting the audit team were clearly aware of the value of reference points in defining programme standards. They were also positive about both the EDaLT guide and the support given by EDaLT to staff developing new programmes. The team considered the new programme specification template and accompanying guidance to be comprehensive and clear about the importance of making explicit the use of external reference points, including how learning outcomes for exit awards map onto the FHEQ and how graduate attributes and skills profiles,

developed in accordance with the SkillsPlus strategy, differentiate each exit award. Overall, it shared the University's view that there was in place 'a workable approach that integrates the various external reference points and provides a mapping tool'.

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

78 During the period from the previous audit (November 2000) to the end of the review cycle (December 2001) there have been three QAA subject reviews, all resulting in approval of the quality of education in the relevant subject. Aspects of the provision were found to be making either a full or substantial contribution to the attainment of stated aims and objectives.

79 In January 2003, Academic Committee (now LTC) considered an analysis of subject review outcomes from 1998 to 2001. This revealed a prevalence of assessment-related issues and also identified a concern that skills development was not yet fully integrated in the curriculum, despite having been a feature of the University's programmes since the policy on graduate attributes and skills development was introduced in 1998. In response, revised guidance was produced on both implementing the University Assessment Policy and on designing programmes and modules subsequently developed into the interrelated guides currently published by EDaLT (see paragraph 105 below). In addition, the Academic Committee approved from 2003-04 the SkillsPlus strategy, integrating the policy on graduate attributes and skills development with policies relating to personal development planning (PDP) and employability (see paragraph 121 below). The analysis of subject review reports also covered any local good practice which had been identified, thereby providing a mechanism for its dissemination and wider adoption across the University.

80 The University has continued to consider centrally the outcomes of QAA subject-level reports encompassing DEs, Major review of NHS-funded provision, and Foundation Degree review. In June 2004, Academic Committee (now LTC) agreed formal guidelines on interaction with PRSBs, which have since been incorporated in the QA Handbook. They allow for annual reporting to LTC on accreditation arrangements through associate deans (LT), who have assumed a coordinating role for PRSB activities in their faculties. As the SED explained, relationships with PRSBs were previously regarded as essentially a school matter, but various factors, such as providing central support for a

subject area and maintaining an institutional overview of accreditation arrangements, had led to a more integrated approach, although primary responsibility for PRSB accreditation and review remains with heads of school.

81 From documentation available through the DATs, the audit team was able to verify that schools were engaging positively with PRSB reports. However, while resultant action from PRSB review was one of the inputs to annual programme monitoring, the team noted that the most recent report to LTC on the outcomes of this process did not refer explicitly to PRSB activity. The team recognised the purpose of the report to LTC was to refer institution-wide issues upwards, and that there may not have been any such issues relating to PRSB activity. It therefore considered reporting on PRSB activity through associate deans (LT) to be important for ensuring that this was not overlooked at institutional level, particularly, as indicated in the SED, 'the University is well represented in subject areas which maintain relationships with PRSBs'. The team also considered that the involvement of associate deans (LT) and Quality Support had the effect of strengthening internal quality assurance, which was pertinent given that the University had relied to some extent on external review to 'bridge the gap', while it was developing new internal processes.

### Student representation at operational and institutional level

- 82 There is student representation on decision-making and consultative bodies at University, faculty and programme level and, according to the Framework for Quality and Standards, the primary role of student representatives is to 'provide the University with a balanced view of the perceptions of the student body of the quality and standards of the education and services provided'.
- 83 At University level, representation on committees and task groups is provided by UPSU, whose officers also have informal access to senior management, including monthly meetings with the Vice-Chancellor and the Dean of Students. At faculty level, the deans are responsible for ensuring that all programmes have appropriate student representation and that representatives on faculty boards are elected from their number. Training for student representatives is organised by UPSU, whose sabbatical officers each have responsibility for a faculty. At programme level, there are student course representatives who are 'essential' members of programme committees and, as stated in the Framework for Quality and Standards, are encouraged 'to facilitate a dialogue between the

members of staff who deliver the programme and the students whose learning is determined by the programme'.

- 84 According to the SED, a priority for the University is to ensure that student representation in a diverse and distributed University is one of 'real partnership'. Commitment to the principle of partnership has been shown by the recent appointment of a Dean of Students who is intended to be the 'student advocate' within senior management and is expected to work with UPSU in improving the effectiveness of the system of student representation. At faculty level, representation had proved a particular challenge, as students did not relate to their faculties as closely as to their programmes. Even so, the SED conceded that, for various reasons, the course representative system was not as effective as might be expected and that student-staff liaison committees (SSLCs) 'often achieve better student engagement'. The SED also admitted that postgraduate representation at University level could be improved and stronger links encouraged between the postgraduate community and UPSU.
- 85 In general, student representatives confirmed to the audit team that they were made to feel comfortable at meetings and that their views were listened to. The team also heard how the informal channels of communication between senior management and UPSU had operated effectively during the recent organisational changes and that student concerns had been addressed. However, students did agree with the need for improvement in postgraduate representation at University level.
- 86 In its meetings, the audit team sought to establish what action was being taken by the University to address the shortcomings in the student representation system identified in the SED. In relation to postgraduate students, the team was informed by staff that student representation on the Graduate Committee had been increased and that the Graduate School was helping to improve the links between UPSU and the postgraduate community. In relation to programme committees, an IQA was nearing completion and was expected to suggest ways of ensuring the prompt identification and settlement of issues arising in between meetings of programme committees. Furthermore, in consultation with the Dean of Students, UPSU had produced a proposal for a four-tier structure of student representation based on programme committees, SSLCs, faculty LTCs and a student senate on the model of the PMS student parliament (see paragraph 131 below). The team learned that following discussion by LTC, a group had

recently been formed to implement the plan and the team identifies as a feature of good practice the partnership between the University and UPSU in improving student representation.

### Feedback from students, graduates and employers

#### Feedback from students and graduates

- 87 The University obtains feedback from students in a number of ways: at subject level through module evaluation questionnaires, and at institution and programme level through the annual SPQs. There are now 10 years' data from undergraduate SPQs which have been refined and developed over the period. A postgraduate SPQ was introduced in 2001-02, while a version of the SPQ tailored for partner colleges was implemented in 2004. Overall management of the SPQ is the responsibility of Quality Support, which reports the findings and resultant action to LTC. In addition, student feedback is an essential part of the annual programme monitoring process, and also of the annual review of modules. The PMS operates a separate annual student satisfaction survey, complementing local feedback gathered on a termly basis; results are included in the annual reports to the Undergraduate and Postgraduate committees, on which there is student representation, and noted by the Joint Approval and Review Board (JARB) (see paragraph 130 below).
- 88 The SED described the SPQ as an 'invaluable tool in improving the quality of the student experience' although it also acknowledged that the 'challenge of 'closing the loop'...remain[ed] an issue', concluding that strengthening the course representation system would help in this respect. It clarified that following a three-year pilot of electronic questionnaires, these had been discontinued in 2004, owing to a significant drop in response rates. The SED also admitted that giving students access to module feedback was not 'widely implemented', but stated that a review of institutional policy would be instigated by Academic Board during the current academic year.
- 89 The SWS also commented on the lack of transparency of module feedback, pointing to the inability of students to gauge improvement where module evaluation was kept 'confidential to module leaders'. Students who met the audit team generally welcomed the fact that the University had agreed to address the issue of module feedback.
- 90 Through the DATs, the audit team was able to see how SPQ results were analysed at institutional level and then disaggregated into faculty groupings

- and passed down to associate deans and schools. While restructuring had led to some discontinuity in tracking action year-on-year at faculty level, the team was able to appreciate that the University had been concerned to minimise disruption to its run of comparable data in the face of external requirements, such as the National Student Survey (NSS). With regard to 'closing the loop', the findings of SPQs are accessible on the Quality Support intranet site and the team was able to trace resultant action, such as that relating to students from minority groups by the Equal Opportunities Committee, as well as learning through the DATs of various examples of student feedback having an impact at both school and programme level. In addition, the team saw cases of module reviews being made available to students, and considers it desirable for the University, building on this practice in certain subject areas, to adopt a university-wide approach to utilising module evaluation and communicating resultant action.
- 91 The audit team noted that to take account of 'questionnaire fatigue', the SPQ would not be issued to final-stage students included in the 2005 NSS. It also learned from staff that the University now regarded the NSS as providing a potential source of feedback from its graduates, although some programme teams routinely sought graduate feedback as an input to programme approval and periodic review. Notwithstanding the above recommendation, the team found the University's arrangements for addressing feedback from students and graduates to be effective and working well.

#### Feedback from employers

- 92 The University obtains feedback from employers through a range of mechanisms, some involving more direct input to curricula than others. These include PRSB accreditation, development of Foundation Degrees, provision of student placements, collaborative teaching and the knowledge transfer partnership scheme. In addition, the Careers Service has links with employers through its vacancy advertising service.
- 93 The audit team considered that through SkillsPlus the University had successfully established a strategic framework for stimulating employer involvement in curricula, although the team recognised that curricula for student employability and career management did not necessarily entail contact with employers. Inevitably, employer links were stronger in vocationally-oriented programmes but, in the team's view, the elements necessary for encouraging employer feedback were also in place in other subject areas.

#### Progression and completion statistics

- 94 The University produces centrally various forms of statistical information, which are made available on the Corporate Information intranet site. Student profile data comprise views of statistics at the level of faculty, school and programme, relating academic outcomes (shown separately for completing and continuing students) to various characteristics, such as age-range, entry qualifications, ethnicity, gender, domicile and socioeconomic status. The programme-level view of the data, supplemented by module Pass rates and applications to acceptances ratios comprise the dataset for annual programme monitoring. In addition, school summary statistics allow comparison of school rates with faculty rates on a range of measures, including percentage withdrawing, percentage with 'good' degrees and percentage ethnic minorities.
- 95 Analysis of progression is linked to institutional admissions policy. The SED gave the illustration of a study of the retention of 'top-up' students (those entering with advance standing to the third year of a degree programme), which showed that relatively small numbers withdrew. Nevertheless, it has led to several initiatives to look in more detail at the specific issues facing students transferring to the University from partner colleges.
- 96 The SED identified the use of statistical data in annual monitoring as an area that 'need[ed] further refinement'. It also indicated that school summary statistics would be considered for the first time by LTC in 2004-05, while the Graduate Committee would consider performance indicators for research students, hitherto not systematically collected.
- 97 Through the DATs, the audit team was able to verify that statistical data was being used in annual programme monitoring. However, the team noted that cohort analyses had to be completed manually and also learned from its wider reading of committee minutes that one faculty was having an on-going problem with the centrally-produced statistics. The team heard from senior staff that there had been teething problems with the new student administration system, resulting in the delay of its second phase implementation, but that this was now back on course and should improve access to statistical indicators. In general, the team concluded that the University was making appropriate use of statistical data in the management of quality and standards and had itself identified where further development of systems should be directed.

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

- 98 There are fully-documented procedures for appointment, induction and probation of new staff. Training is provided for appointment panel chairs, and the SED stated that this would be made compulsory from July 2005. A two-day universitywide induction programme, for which a new approach was piloted in 2004-05, is organised for all new staff, and they are each allocated a mentor. It is mandatory for new academic staff with less than three years' teaching experience to take the Learning and Teaching in Higher Education (LTHE) programme run by EDaLT, which, although a well-established programme, was redeveloped for 2004-05 (see paragraph 105 below). Procedures for probation have also been recently revised to extend the period of probation to three years.
- 99 There is a longstanding annual staff appraisal scheme in operation, which was revised in 2003 to make sure that performance targets were discussed in relation to local objectives. The appraiser, who is normally the immediate line manager, must undertake training. Development needs identified through the appraisal process are summarised by heads of school and forwarded, after prioritisation, to the various staff development providers within the University (see paragraph 104 below).
- 100 The University's promotion policy was reviewed in 2001-02, introducing criteria and guidelines for parallel promotion routes based on competence in teaching, assessment and learning facilitation; research and scholarship; and academic leadership/management. Innovative teaching is also recognised and rewarded through a teaching fellowship award scheme and, since revision of the scheme in June 2002, there have been 30 recipients of awards, On the research side, an institutional policy on sabbatical leave is being developed to provide a framework for individual faculty policies.
- 101 As outlined in the SED, the majority of staffing procedures have been subject to review since 2002, when the University also produced its Human Resources (HR) Strategy. Subsequently, this has been reviewed annually and some of its targets revised as a result of new developments, notably academic restructuring. A further review of the whole strategy will take place by 2007, when academic restructuring will be completed. The University strengthened its Personnel and Development function to handle aspects of academic restructuring and has placed emphasis on systematic data collection aimed at highlighting problem areas and targeting priorities.

As an example, the number of staff appraisals undertaken is monitored against a 100 per cent target, although the SED acknowledged that restructuring had 'inevitably led to some deferral of appraisals, while transfers were in train'.

102 From its review of documentation, the audit team was able to trace some of the drivers behind revisions to procedures. For instance, arising from the Research Strategy, criticism of the time taken up by the LTHE programme, particularly for researchactive staff, influenced organisational changes to the programme. The team also saw evidence of data being monitored against targets, for example, in relation to equal opportunities and the results of 'exit questionnaires' completed by staff leaving the University's employment. In meetings with staff, the team confirmed that part-time staff were included in the appraisal scheme and that it was linked to staff development. The team also learned that, while the selection and use of postgraduate teaching assistants (GTAs) were dealt with at faculty or school level, there was an institutional training programme for GTAs provided by EDaLT (see paragraph 105 below), supplemented by discipline-specific training within schools.

103 Overall, the audit team considered the SED to be an accurate description of the procedures in place for the assurance of the quality of teaching staff, their appointment, appraisal and reward. These procedures are supported by clear documentation that is readily available; specifically, information relating to restructuring can be easily accessed via the staff intranet portal.

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

104 The University's goals for staff training and development are defined in a number of institutional strategies, namely the HR, Learning and Teaching, and Research strategies. There are several central staff development providers, including Staff Development Services, EdaLT, ILS, the Graduate School, and the Research Support Development Office. A comprehensive programme of events is produced twice a year and is publicised via the staff portal and distributed in hard copy. In addition, individual schools run their own activities. The University Staff Development Policy is being reviewed as part of the continuing development of the HR Strategy, although under the existing policy there is an expectation that budget holders will spend 3.5 per cent of their staffing budget on staff development.

105 Training for teaching staff up to master's level is provided by EDaLT through the LTHE programme, which is mandatory for all staff with less than three years' teaching experience. The programme is accredited by both the HEA and the Staff and Educational Development Association, and for 2004-05, has been redeveloped to enable different categories of staff to follow training pathways best suited to their professional context. This approach now gives GTAs the opportunity to complete accredited training. EdaLT also offers advanced practice modules for established academic staff and produces guides on various topics, including Designing your Programmes and Modules and Good Practice in Assessing Students.

106 A university-wide scheme of teaching observation, linked to staff appraisal and professional development, has been in existence since 1993. However, in recognition that varying practices have developed in different schools, LTC has recently approved a new set of guidelines for peer review, encompassing a wider range of activities than teaching observation. The new guidelines promote the introduction of teaching development groups to negotiate the detailed application of particular schemes within institutional guidelines. It is intended that all faculties will be using the new procedures by September 2005.

107 The SED indicated that within the framework of a staff development programme, which it described as being of good quality and comprehensive, there were a number of issues 'kept high on [the University's] agenda'. Among these were ensuring the alignment of individual and organisational goals; conducting more systematic evaluation of training programmes; and extending provision by means other than courses, such as e-learning and bespoke events. The SED also acknowledged that the recent restructuring meant those appointed to key posts would have specific development needs, which the University was addressing by relaunching the leadership development programme in 2005.

108 Despite the number of separate providers, the audit team found publicity about their respective courses to be well integrated on the staff intranet. It gained a clear impression from meetings with staff that the courses offered by EdaLT were recognised as particularly important and as affording considerable benefit. The team also considered initiatives other than courses to be valuable in promoting staff development, particularly the guides produced by EdaLT, but also the internal learning and teaching journal, ETHOS, and the annual

learning and teaching conference. Specifically, the team identifies as a feature of good practice the work of EDaLT in supporting staff academic and professional development (as exemplified by its comprehensive guide, Designing your Programmes and Modules).

109 Overall, the audit team viewed the SED as accurate in its description of the numerous initiatives for the training and development of teaching staff, although it encourages the University to complete the review of its Staff Development Policy to give systematic support to establishing the new academic structure.

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

110 At present, the University has no programmes delivered wholly by distance learning, although guidance for approval panels in the form of a checklist of issues that would need to be taken into consideration for distance-learning programmes is contained in the QA Handbook. However, the SED acknowledged that an increasing number of modules, particularly at master's level, were being developed for distance learning, with the majority making use of the student portal, and also indicated that a working group was reviewing the University e-learning strategy, initially approved in 2002. The audit team had access to the recently published report of this review, which considered the present uses made of computer-assisted teaching, learning and assessment and the development of the student portal. The working group also produced a vision of future needs in terms of the technical and staffing infrastructure and concluded with a number of recommendations, for implementation over the next three years, aimed at mainstreaming e-learning in programme delivery through a more directed approach than has hitherto been the case. The audit team considered that the University was taking appropriate steps to develop its e-learning strategy.

#### Learning support resources

111 The SED stated that 'the University [had] invested significantly in learning and support facilities since the last audit, in line with the Estates Strategy'. This has resulted in extensive upgrading of teaching space through new and refurbished buildings, equipped to agreed academic specifications, with particular attention paid to improving accessibility for students with disabilities. Against a backcloth of major restructuring, there has also been considerable investment in library services,

notably an extension to the Plymouth Library, opened in 2004, and in a range of information technology (IT) developments, including introduction of a university-wide student portal, extended access to internet and email facilities, and dedicated computing facilities for postgraduates in the Graduate School.

112 ILS has responsibility for the provision of library and IT services at all four University campuses and, in cooperation with other partners, at teaching centres for the PMS and the Faculty of Health and Social Work at Truro and Taunton. The principal strategies guiding ILS development, namely the Learning Resources and IT strategies, were updated and approved by Academic Committee (now LTC) in spring 2004, with responsibility for their implementation vested respectively in the Library Steering Group and PRC. In addition, PRC oversees the resource implications of faculty plans, enabling learning resources to be appropriately directed through the annual budgeting process to cover emergent needs.

113 The SED pointed to measures to link the development of learning support resources to institutional strategies and policies. These included oversight of IT systems development by universitywide project boards, and the integration of ILS quality assurance procedures with academic procedures, through ILS representation on central academic committees, faculty boards and programme planning committees. A range of feedback mechanisms is used by ILS and the SED distinguished between those enabling issues to be dealt with promptly, such as programme committees and SSLCs, and those indicating trends or potential developments, such as SPQs and 'comments and suggestions' forms. Performance against 'comparable' institutions is benchmarked using annual statistical data published by the Standing Conference of National and University Librarians.

114 The SED commented that user feedback on both library and IT services was generally positive. However, it also referred to a recent review of the management of IT services, with input from external consultants, which had highlighted inconsistencies in the levels of IT support across faculties and overlapping responsibilities between faculties and ILS. The SED indicated that the University would be taking forward proposals from this review.

115 The SWS gave focus to the impact of restructuring on the student learning experience, recognising that the University had scheduled building work with minimum disruption to students, but it also examined the wider issue of relocation. In

briefing the audit team, UPSU representatives gave a balanced account of how the University was dealing with students' concerns over moving between sites or buildings and the provision of facilities or services on campuses being rationalised or closed. In meetings with the team through the DATs, students were, in general, satisfied with the extent and quality of library and IT provision across campuses. They emphasised the increasing importance of the student portal as a resource for accessing information (see paragraph 189 below).

116 Through the DATs, the audit team was able to verify ILS involvement in the planning of new academic developments and in the work of programme committees. In meetings, staff explained the linkage between faculty business planning and learning resources provision, established through PRC, and gave instances of resources following student numbers. The team considered that the University's processes for ensuring the appropriateness of learning resources were responsive to change while founded on longer-term strategies, thereby enabling the University to identify where further development was necessary.

#### Academic guidance, support and supervision

117 Academic guidance and support for students is centred on schools and supplemented by specialist institutional services. Among these is the Learning Development service, which provides advice and resources at all campuses to assist students with a range of study skills, including essay writing. A parallel service offering support in mathematics and statistics, SUM-UP, operates from a drop-in centre at the Plymouth Library, while the English Language Centre offers language support to international students. In addition, specialist support for students with disabilities is provided through the wellestablished Disability Assist service, located at the Plymouth campus. These services are either the responsibility of, or work closely with, the Office of the Dean of Students, which covers institutional services for both students' skills development and personal welfare advice (see paragraph 126 below).

118 Student academic support begins with induction, which is arranged at school or programme level, although at University level there is a programme introducing students to institutional services. Some local induction programmes include diagnostic testing or essay writing with feedback, assisting students to identify areas where they might benefit from support and directing them accordingly. There are also tailored programmes with input from relevant central services for direct-entry, international

and mature students. Once students get started on their programmes, primary responsibility for academic guidance falls to the school tutorial system, which for most students involves allocation of a personal tutor to provide first-line individual support and the interface with institutional services. However, the SED stated that 'increasingly schools embed[ed] tutorial support into the curriculum'. It also indicated that the University was considering formalising the role of senior tutor, adopted in certain schools, as a means of strengthening the tutorial network at undergraduate level and progressing the SkillsPlus strategy. EdaLT provides support for staff in integrating skills development into the curriculum, which is a requirement for undergraduate programmes under the graduate attributes and skills policy. Under the policy on PDP, the timescale for incorporation of PDP into programmes is 2005-06.

119 In the SED, the University recognised that there was variability in the arrangements for tutorial support between schools, even within the same faculty, as highlighted by faculty restructuring. While acknowledging that differences between subjects might mean a level of diversity was appropriate, there was a concern about consistency of support, particularly given the considerable variation in staff to student ratios between subject areas. The point was also made that academic tutors were not always fully aware of the range of institutional services available to students, which some faculties were tackling by establishing student support offices to provide a front-end administrative service, coordinating information and advice about the various sources of assistance. In addition, the SED identified an 'imbalance in the use' of the Learning Development service between faculties (Health and Social Work being the greatest user) and between sexes (the majority of users being female), indicating that new procedures for student evaluation were being developed and that a consultative group, including student representatives, had been proposed to examine such issues.

120 The SWS commented on institutional services and, while not making a distinction between academic and personal welfare advice, highlighted variability in the 'levels of help' available to students on different campuses. However, in briefing the audit team, UPSU representatives clarified that this related to speed of access to face-to-face appointments and not to quality of provision, adding that travel to another campus could cut waiting times. They also expressed the view that self-referral was the predominant route to institutional services. Postgraduate student representatives were positive about the English

language support for international students. Students whom the team later met through the DATs conveyed high levels of satisfaction with both the quality and availability of tutorial support at school and programme level, including arrangements for work placements.

121 The audit team focused on the issue of consistency of student support across the University. From its review of programme specifications through the DATs, the team was able to verify the incorporation of skills development into the curriculum, concluding, as had the SED, 'that this had the advantage of ensuring consistent [student] entitlement'. Although it was evident from discussions with students and staff that establishing PDP within the tutorial system had progressed further in some schools than others, there were some examples of systems in place. The team also heard that the Careers Service was working with schools, through designated faculty advisers, to include careers management in undergraduate programmes, and that it organised workshops for postgraduate students. The team was able to confirm that the implementation of the SkillsPlus strategy was being addressed in programme approval and periodic review, while students reported that academic support was a regular topic for discussion by SSLCs and programme committees, thus feeding into annual monitoring. The team identifies as a feature of good practice the effectiveness of the SkillsPlus strategy in drawing together policies relating to student academic support, skills development and employability.

122 While it appeared to the audit team that students identified more closely with school-based than faculty-level support, staff clearly saw the potential for the faculty to integrate local and institutional support systems, explaining that faculty involvement went further than introducing student support offices - it also included establishing contacts with Disability Assist and participating in support service working groups. In the team's view such interaction would assist in raising general staff awareness of students' needs for support and how these were being addressed in the development of institutional services. The team was aware of the wider role of Disability Assist in the delivery of postgraduate and continuing professional development courses, and in research and project work, as well as its involvement in student recruitment and disability assessment. It also noted that the Careers Service had achieved Matrix accreditation (from the Guidance Accreditation Board) in February 2004.

123 The University's arrangements for the supervision of research students and monitoring student progress are set out in the Research Student Handbook (August 2004), which offers guidance for both students and supervisors. First-stage supervisory training is incorporated in the LTHE programme for new staff, while existing staff new to postgraduate research supervision are also required to undertake training. This includes use of a research student log, introduced in 2003, to monitor student progress and audit research skills, training and development. Responsibility for the generic skills development programme for postgraduate research students lies with the Graduate School, which also has a liaison role with institutional support services. in addition to its general administrative and information functions. Associate deans (GS) have the brief for standardising arrangements for supervision and support, including induction, within and across faculties, while retaining local ownership. Central oversight of research students' progress is through the Graduate Committee.

124 Postgraduate research students meeting the audit team considered the research student log to be of limited value and claimed that it was not widely used. However, staff confirmed that the log would remain the mechanism for recording the outcome of supervisory meetings and was to be further developed, with its use monitored by the Graduate Committee. Students clearly valued the Graduate School, which afforded them a sense of identity as well as improved learning facilities and social space, while the team considered that the School was making a significant input, under the direction of the Graduate Committee, to ensuring compliance of University procedures with the recently revised Code of practice, Section 1: Postgraduate research programmes. The team identifies as a feature of good practice the support for research students provided by the Graduate School, facilitating the development of the research student community.

125 Overall, the audit team concluded that the University recognised the importance of equity and consistency in its arrangements for student academic guidance, support and supervision and was taking appropriate steps to review systems and services in the light of new organisational structures, in order to ensure their continued effectiveness in meeting students' needs.

#### Personal support and guidance

126 Personal support and guidance is centred on the advisory services within the Office of the Dean of Students. These include Student Counselling, Health Services, the International Student Advisory Service, and the Student Funding Advice Unit (in addition to Learning Development (see paragraph 117 above). The Careers Service, besides its work relating to careers management and employability, operates an online vacancy service for part-time, vacation and voluntary work, as well as for graduate positions. Information on specific advisory services is contained in the University Student Handbook and Guide to Services and is also available through the student portal. The UPSU Welfare and Advice Unit provides an independent source of support for students, although the Dean of Students has a particular role in promoting the liaison between University and UPSU services.

127 The SED offered no specific view of the effectiveness of the advisory services, although it stated that an objective of the Office of the Dean of Students was to 'support the development of a single point of contact for students and staff'. However, the audit team learned from staff in meetings that evaluation of institutional services was conducted through the SPQ and that its results were considered by relevant committees, such as LTC or Equal Opportunities Committee.

128 Staff emphasised the role of the Office of the Dean of Students in coordinating support across campuses and developing functional links with faculties. Students, on the other hand, while familiar with the range of services available, appeared to be less aware of their integration through an office, which the audit team understood was a recent development. As with skills support, students had yet to be convinced about the benefits of faculty involvement in welfare advice and viewed referral to institutional services as being a school-generated process. The team was told that a task group of associate deans had recently been formed to review the linkages between school, faculty and institutional support services. The team considered this to be a timely development, although, in general, it found the University's arrangements for personal support to be comprehensive and responsive to students' needs.

#### Collaborative provision

#### The Peninsula Medical School

129 The SED explained that the PMS was not a legal entity, but that to enable it to operate as an integrated whole, a Joint Board of Management had been established to oversee the operation of the School. The Dean of the PMS is the executive manager, reporting to the Joint Board of Management, while the central administration of the School, including the Dean's Office is located

separately from its parent universities on the Tamar Science Park, Plymouth.

130 Within the PMS, JARB, with representation from both Universities, appoints external examiners, reviews the School's annual monitoring report and is responsible for programme approvals. JARB is also responsible for the provision of strategic direction to the School and advice in relation to quality and standards. The system of annual review for the PMS has been mapped against the monitoring requirements of both Universities and the General Medical Council (GMC).

131 The GMC has monitored closely the development and implementation of the PMS undergraduate programme, giving particular attention to consistency of opportunity and experience between the three PMS sites (Plymouth, Exeter and Truro), approaches to assessment, and addressing student concerns. Following a recommendation from the GMC that the School 'needed to handle the students' anxieties more effectively', a student parliament has been formed, composed of student representatives from the three sites and the student unions of the partner universities. The team heard that examples of good practice had spread from the PMS to other schools and that the PMS student parliament had influenced plans to establish a student senate.

# Section 3: The audit investigations: discipline audit trails

#### Discipline audit trails

132 In each of the selected DATs, appropriate members of the audit team met staff and students to discuss the programmes and also studied a sample of assessed student work, annual course and programme monitoring reports, including external examiner reports, and annual and periodic review documentation relating to the programmes. Their findings are as follows:

#### **Psychology**

133 The scope of the DAT comprised programmes in the School of Psychology:

- BSc (Hons) Psychology
- BSc (Hons) Psychology with Certificate of Industrial/Professional experience
- BSc (Hons) Psychology (Major)
- BSc (Hons) Psychology (Major) with Certificate of Industrial/Professional experience
- MSc/PgDip Psychological Research Methods.

The undergraduate programmes above have been accredited by the British Psychological Society (BPS) to confer Graduate Basis for Registration.

134 The basis of the DAT was a discipline SED, comprising the documentation for the periodic review of Psychology conducted in January 2005, with programme specifications appended.

135 All programme specifications conformed to the University's revised template and had been subject to internal scrutiny and approval at faculty level as part of the periodic review process. Those for undergraduate programmes made explicit reference to threshold and modal subject benchmarks within the Psychology statement and, where relevant, were informed by the Foundation Degree benchmark statement, the FHEQ and BPS policies. The specifications also included the graduate attributes and skills and PDP components of the University's SkillsPlus strategy. In addition, the Economic and Social Research Council (ESRC) benchmarks for postgraduate taught programmes were incorporated at master's level, alongside respective QAA and SEEC level descriptors.

136 Basic demographic admissions data on undergraduate and postgraduate student cohorts for 2001-02 to 2003-04 were provided in the discipline SED, while additional progression, achievement, and first destination data were made available for the audit. The discipline SED acknowledged two issues which were being addressed, following analysis by the School of the admissions and progression data: one relating to an unplanned increase in student intake, particularly since 2002-03, and the other to unsatisfactory progression and retention rates at stage 1 over the last four years. From both documentation and meetings, the audit team also learned that there had been external examiner concern over the relatively small number of First class degree awards and that this had been thoroughly explored by the Faculty LTC and the Academic Committee (now LTC). As a consequence, the School has undertaken a review of the conversion and aggregation of 'categorical' marks at the borderline between Upper Second and First class awards.

137 In respect of annual programme monitoring, most recently conducted according to the revised institutional process, staff confirmed to the audit team the effectiveness of the roles of associate dean (LT), programme coordinator and faculty LTC in making minor module and programme revisions. Staff also expressed the view that students were closely involved in annual monitoring, particularly through student membership of programme

committees, where the standard dataset and action plans were discussed. Students who met the team, however, perceived student participation to be more limited, being confined largely to completing module evaluations and the SPO.

138 The 2005 periodic review of Psychology programmes conformed to University procedural guidelines. The review panel included peers from outside the School, as well as external academic and professional advisers. The audit team considered the subsequent overview report to be extensive and evaluative, and to identify a suitable action plan. Staff who met the team acknowledged the valuable assistance received from Quality Support in preparation for the review, although students again reported little direct involvement with the process.

139 The audit team saw external examiner reports covering the previous three years, and these provided evidence of critical and constructive comment, at the same time indicating satisfaction with the standard of the School's provision. The team confirmed the effectiveness of the School's processes for dealing with external examiner reports through tracking the consideration given to the concern expressed by one external examiner about the number of First class degrees awarded in Psychology (see paragraph 136 above). Annual monitoring documents provided the team with strong evidence of the influence of external examiners on both undergraduate and postgraduate programmes, relating to such issues as curriculum structure, assessment word limits and project supervision. External examiners may request to see the annual programme monitoring action plan.

140 The discipline SED commented on the School's implementation of the University Assessment Policy, including its approach to varying the assessment diet to introduce more coursework. This carries the associated requirement to provide written feedback on assignments at a time when student numbers in the School have increased. The audit team reviewed a wide selection of student assessed work across undergraduate and postgraduate programmes, which often revealed minimal commentary on undergraduate student work. However, the team formed the view that feedback on assessment, while inconsistent, was improving, with some tutors now using a pro forma for feedback, notably at stages 1 and 2. Students broadly agreed that the situation was 'getting better' and postgraduate students reported that they received more extensive feedback. Nevertheless, the team concluded that the School had yet to implement fully the University Assessment Policy with regard to student feedback.

141 Both students and staff stated that at all stages the return of assessed work was usually within the specified turnaround time. Students also confirmed that module outlines, accessible through the student portal, gave details of assessment criteria and submission dates for assignments. The audit team found the standard of student achievement to be appropriate to the titles of the awards and their location within the FHEQ.

142 Students receive a School programme handbook for all taught programmes and more focused stage handbooks at each level of provision. In addition, students receive module outlines for each of the taught modules. While these documents do not include programme specifications, they appeared to the audit team to be a very useful reference source alongside information (including programme specifications) available through the student portal. Students meeting the team confirmed that the student portal was an effective and popular source of information and means of communication with staff.

143 As well as the facilities and services available to all students on the Plymouth campus, there is a range of specific learning resources for students studying Psychology. These include specialist and general purpose laboratories, computer rooms, and a Psychology information room. In response to the recent increase in undergraduate student numbers, additional staffing and equipment resources have been provided. However, staff meeting the audit team revealed concern over the resource implications associated with larger teaching groups, a point also made through the recent periodic review. Students reported to the team minor shortcomings in the accessibility of some library resources, such as e-journals. Monitoring of library provision has been improved by having ILS represented on the School's Undergraduate Programme Committee.

144 In addition to the provision of personal tutors for undergraduate students, support for the increasing number of students in the School has been strengthened by the appointment of a Student Liaison Tutor, a Student Support Tutor and a Psychology Information Officer. These roles have enhanced the opportunity for formal and informal student contact. Full-time Psychology students expressed their appreciation of the responsiveness and availability of School staff, but were of the view that School support for those undertaking work placement experience was inconsistent. Postgraduate students commented positively on the supervisory support from tutors, though they found limited value in the research student log.

145 The School's Student Liaison Tutor provides a regular link between academic staff and student representatives on the Undergraduate Programme Committee. This committee ensures formal staffstudent liaison for undergraduates and enables student representatives to raise issues of more immediate concern, of which recent examples have included student noise levels in lectures and assessment feedback procedures (see paragraph 140 above). The audit team learned that such issues were discussed and led to a formal response from the School. The team's review of meeting minutes revealed an awareness of the need for information and feedback to be disseminated from formal meetings to the general body of students. Therefore ways to promote student engagement were being developed, including prizes for the completion of online module evaluation questionnaires and use of the student portal was being extended as a means of improving the communication of evaluation results to students.

146 Overall, the audit team was satisfied that:

- the standard of student achievement in the programmes covered by the DAT is appropriate to the titles of the awards and their location within the FHEQ
- the quality of the learning opportunities is suitable for the programmes of study in Psychology, leading to the named awards.

#### Computing

147 The scope of the DAT comprised programmes in the School of Computing, Communications and Electronics:

- BSc (Hons) Computer Systems and Networks
- BSc (Hons) Computing
- BSc (Hons) Computing Informatics
- BSc (Hons) MediaLab Arts
- BSc (Hons) Multimedia Computing
- MA/MSc Digital Futures
- MSc e-Commerce
- MRes e-Commerce (supervisory arrangements).

The BSc (Hons) Computing Informatics and BSc (Hons) Computer Systems and Networks are accredited by the British Computer Society (BCS) offering full exemption from the BCS Part 1 and Part 2 examinations and partial Chartered Engineer (CEng) accreditation.

148 The basis of the DAT was a discipline SED written specifically for the audit with programme specifications for each of the programmes attached.

149 Programme specifications made clear reference to appropriate *Subject benchmark statement* for computing; art and design; and for communication, media, film and cultural studies, and definitive module records had evidently been developed with reference to the FHEQ and to SEEC level descriptors. The undergraduate programme specifications contained benchmarking skills maps showing how each programme addressed relevant benchmarks. Programme specifications referred to BCS accreditation and exemption as appropriate and gave details of relevant conditions.

150 Progression and completion data are available and feed into the annual programme monitoring process. The audit team found that these data were being used to identify issues needing resolution; for example, progression from stage 1 to stage 2 was identified as a concern in one area and the action taken in response included increasing the practical contact hours on a key module. The School has also introduced measures to monitor student attendance, particularly at stage 1, and students who do not attend are contacted to encourage them to do so. Staff also confirmed to the team that a procedure to monitor coursework submission had recently been introduced to identify students 'at risk' of falling behind or withdrawing from the programme.

151 In line with the University's devolved approach to quality assurance, the School has established local procedures giving subject groups responsibility for monitoring the quality of modules. A module report is produced which reviews the operation of each module, the performance of the students, any issues arising during the delivery of the module, and an analysis of the module evaluation questionnaires. The module report forms part of the information pack for external examiners. A final report, incorporating comments from the SAP, is circulated to the subject leader and the relevant programme managers for monitoring purposes.

152 The audit team was able to confirm that module reports were considered by programme committees as part of the annual programme monitoring process, most recently conducted in accordance with the revised institutional procedures. These committees include student representation as well as members drawn from ILS; after reviewing all relevant module information, they produce an action plan for consideration by the Faculty LTC. The team learned that there was a school-level programme committee, again with student representation, which meets twice a year to discuss the action plans produced by the various programme committees. In addition, a Teaching Management Group, comprising

programme managers and chaired by the Deputy Head of School meets regularly to discuss common issues, develop appropriate responses and procedures and to share good practice. With regard to periodic review under the new process, a review of provision within the School is scheduled for summer 2005.

153 External examiner reports are considered in the School initially by the relevant programme committee as part of annual monitoring. An action plan is produced in response to the issues raised and this is sent back to the external examiners. From its perusal of committee minutes, the team was able to establish that these actions were then the subject of further consideration and monitoring to ensure that issues were resolved.

154 The University requires each school or subject group to define and implement local procedures for several aspects of the Assessment Policy, including appropriate second-marking/moderation procedures. It was noted by one external examiner that these procedures were not in place for 2003-04, although at the time of audit a local procedure for sample double-marking was in draft form and issues concerning its implementation had recently been discussed by the Teaching Management Group. The School has policies for specifying assignments and marking examination scripts, and from its review of student assessed work the team was able to see that the former was operating effectively, although the latter seemed to be applied inconsistently. The School's statement on assessment feedback to students is that this should be provided within 15 working days. However, it was clear to the team from its discussions with students that the deadline was not always being achieved. Staff acknowledged that this was the case, but told the team that where feedback was delayed students were informed of the reason and when the feedback could be expected.

155 The audit team found the examples of assessed work to match the expectations in the programme specifications and the definitive module records. Moreover, external examiners had commented favourably about the standards of the work. The team concluded that the standard of student achievement was appropriate to the titles of the awards and their location within the FHEQ.

156 Students are provided with programme handbooks during induction. These either include the programme specifications and definitive module records or provide details of how this information may be found through the student portal. In addition, for each module, coursework or assignment briefs are produced, which give students

clear guidance as to what is required and what assessment criteria will be used (in accordance with the University Assessment Policy). Students explained to the audit team that although they found the handbooks useful initially, they preferred to use the student portal as their major source of information. They also valued the student portal as a source of learning materials and reported that staff made good use of the portal.

157 Learning resources are monitored at programme committees, but, as acknowledged in the discipline SED, the School has also benefited from the University's rolling programme to ensure that computer equipment is up to date. The audit team formed the view from its discussions that the hardware and software resources were, for the most part, both sufficient and appropriate, though a shortage of computers in the project laboratory was identified by students. The discipline SED had referred to an issue regarding the delivery of software applications across the network, but from its meeting with staff, the team ascertained that action was being taken to address this issue. SPQ results had indicated that students were satisfied with the provision of computing resources and that they felt technical support services were good; this was confirmed by the students who met the team. In terms of staff resources, there is some reliance in the School on part-time staff for module delivery and project supervision. The team was able to confirm from its discussions with staff that part-time and fractional staff are fully integrated into the operation of the School, including staff appraisal and development activities, research and curriculum development.

158 At stages 1 and 2, pastoral support is provided by the programme stage tutor, who may be responsible for around 40 students. At the final stage, the project supervisor takes over this pastoral role, while placement students are supported by the Regional Tutor and the Placements Office. Students are also encouraged to take any issues relating to modules to module tutors. Staff in the School operate an 'office hours' system whereby they publicise their availability for student consultation. Students also seek advice from staff via email, a system which the audit team confirmed was working well, with students reporting a typical 24-hour turnaround time from staff.

159 The formal mechanisms for obtaining student feedback employed by the School include module feedback questionnaires and the SPQ, the results of which are used in annual programme monitoring. In addition, the School operates a system of SSLCs, one for each programme, and it is intended that these

should meet before the programme committees, to address any issues that students raise as early as possible. However, some of the students who met the audit team were not aware of these groups, although the team was able to confirm that there had certainly been SSLC meetings for some programmes. The team also confirmed that students were involved on the programme committees, but those who met the team seemed unaware of student representation on the Faculty LTC or the Faculty Board.

160 Overall, the audit team was satisfied that:

- the standard of student achievement in the programmes covered by the DAT is appropriate to the titles of the awards and their location within the FHEQ
- the quality of the learning opportunities is suitable for the programmes of study in Computing, leading to the named awards.

#### **Architecture and Design**

161 The scope of the DAT comprised programmes in the School of Architecture and Design:

- BA (Hons) Architecture
- BA (Hons) Architectural Technology and the Environment
- BA (Hons) Architecture, Design and Structures
- BA (Hons) Architectural Design with Digital Media
- Graduate Diploma in Architecture
- PgDip Architectural Conservation
- PgDip Humane Architecture
- PgDip Landscape Design
- MA Architectural Conservation
- Certificate in Architectural Professional Practice.

The BA (Hons) Architecture, the Graduate Diploma in Architecture and the Certificate in Architectural Professional Practice are accredited by both the Royal Institute of British Architects (RIBA) and the Architects' Registration Board (ARB).

162 The basis of the DAT was a discipline SED based on the SED produced for the periodic review conducted in September 2004, but updated and taking into account the outcomes of the periodic review. Programme specifications for all the programmes were included, together with reports to the RIBA visiting boards for the Graduate Diploma in Architecture and the Certificate in Architectural Professional Practice. The discipline SED also contained a comprehensive list of additional documents made available to the audit team.

163 The undergraduate programme specifications contained specific reference to appropriate subject benchmarks within the statement for Architecture, Architectural Technology and Landscape Architecture, although not to the FHEQ. Where appropriate, programme specifications referred to PRSB accreditation and exemption, giving details of relevant conditions.

164 Progression and completion data are produced centrally and staff expressed high levels of confidence in the information, although they had found some discrepancies when looking at postgraduate courses. There was evidence from the annual programme monitoring process of the ways in which the data have been evaluated. For example, there had been concern about progression from stage 1 to stage 2 of the degree programmes and a number of measures have been introduced in an effort to address the problems. There was less evidence of the use of completion data, although the School clearly has strong links with employers.

165 Architecture was the first discipline to experience the new periodic review process, in September 2004, and, as a result, there have been a number of changes to the process. Since the periodic review, each course has been subject to annual programme monitoring. The audit team studied the minutes of programme committee meetings and these indicated a full discussion of the issues raised and included students' views.

166 The School has important links with RIBA and ARB and the report of a joint visiting board (February 2003) was made available to the audit team. Subsequently there have been two follow-up meetings in relation to the Graduate Diploma and Certificate courses, to deal with a number of issues that emerged in the first visit. The School has a positive relationship with both bodies and has acted upon points raised by them.

167 The audit team looked at recent external examiner reports: these were positive about the standards set for the awards, about the achievements of the students, and about the fairness with which assessment boards made their decisions. There was evidence from documentation that external examiner reports were considered with care and that programme managers provided appropriate responses, including a copy of the action plan produced through annual programme monitoring.

168 While the School has no explicit learning and teaching strategy, it follows the overall guidelines set by the Arts Faculty in its strategy. It was evident from student handbooks and the programme specifications

that there was a clearly articulated assessment strategy for each programme, with guidance given on assessment criteria. Students who met the audit team confirmed that these criteria were helpful, but there was some criticism of the feedback given, both in terms of content and speed of return.

169 Students are assessed by a variety of methods including examinations, seminar presentations, coursework assignments and design portfolios. The audit team had the opportunity to examine different types of student assessed work from a selection of modules from the programmes included in the DAT. There was evidence of double-marking, but it was not consistent across all assessments and was not the result of any applied systematic process; this was acknowledged by staff who met the team. From the sample of student work, the team was able to conclude that the standard of student achievement was appropriate to the titles of the awards and their location within the FHEQ.

170 Each year, students are provided with programme handbooks which include descriptions of the different types of assignment and the criteria for assessment. Students who had used them reported to the audit team that they were helpful and informative. The handbooks are augmented by information available for individual modules. Some staff are making use of the student portal for communication with students, but, according to students, uptake in the School has been slow and patchy.

171 Architecture is currently located in a separate building off the main campus. Most teaching occurs in this building, although increasing amounts of stage 1 teaching take place on the main campus. The Architecture building is open 24-hours a day and provides a much-appreciated focus for students. However, the accommodation is recognised as being overcrowded and there are plans to move the School, by 2007, to a new Arts Faculty building to be constructed on the main campus. In general, learning resources were seen as adequate, although students told the audit team that some library material had to be retrieved from the Exeter campus on limited-time loans. In terms of academic guidance and personal support, the students praised the general approachability of staff and it was clear that the level of contact they had with them, both formal and informal, was much appreciated.

172 There is a module evaluation questionnaire for all modules, the summarised results of which are considered in annual programme monitoring. Students who met the audit team felt their views were valued and whenever possible their suggestions were acted upon. Another means for students to raise

issues is through the School's SSLC, which meets monthly and consists of both student representatives and course management teams. Students saw the committee as effective in dealing with matters needing resolution within the School, but less so in relation to matters requiring a wider University response. Students are directly involved in the School's quality processes through their participation in annual programme monitoring meetings.

173 Overall, the audit team was satisfied that:

- the standard of student achievement in the programmes covered by the DAT is appropriate to the titles of the awards and their location within the FHEQ
- the quality of the learning opportunities is suitable for the programmes of study in Architecture and Design, leading to the named awards.

#### **Human and Social Geography**

174 The scope of the DAT comprised programmes in the School of Geography:

- BA/BSc (Hons) Geography
- BA/BSc (Hons) Geography (Major)
- BA/BSc (Hons) Geography (Minor).

175 The basis of the DAT was a discipline SED, comprising the documentation for the periodic review of Geography, conducted in December 2004, with programme specifications appended. The available documentation also included recent annual programme monitoring reports, programme approval documentation and a draft version of the periodic review report.

176 The programme specifications showed that both the *Subject benchmark statement* for geography and the FHEQ level descriptors had been taken into account in the design of the curriculum. Other reference points included the University's Learning and Teaching and SkillsPlus Strategies; in relation to the latter, the recent periodic review endorsed the 'relevant skills and subject matter for employment' provided by Geography programmes.

177 Undergraduate progression data were presented to the audit team and these demonstrated high rates of retention, maintained and improved over a period. Staff meeting the team explained that retention in the first year was key to improving progression rates, so steps had been taken through tutorials and skills modules to improve student engagement.

178 The School now follows the revised procedures for annual programme monitoring. The specified input information is first discussed at the School

Programmes Committee and the resulting programme action plan is considered for approval by the Faculty LTC and Faculty Board. According to the discipline SED, the annual programme monitoring reports from Geography have been 'highly commended as examples of good practice within the faculty'. Staff meeting the audit team made the point that the School was well represented on central committees, involving staff in the development of institutional policies and procedures. The School has very recently participated in periodic review; staff meeting the team commented that this had also been useful preparation for the separate reapproval events for Geography programmes.

179 Recent external examiner reports have been positive about the standards set for awards and the achievement of students. One criticism has been the School's use of a single awards examiner on the AAB, which could lead to other external examiners having a restricted view of student achievement. The School responded to this by facilitating greater contact and information flow between external examiners who have generally commented favourably on the responses that have been made to suggestions in their reports.

180 The discipline SED claimed that 'the School conforms broadly to the University Assessment Policy', while indicating that preparation of a School assessment strategy was in progress. The students meeting the audit team were aware of the School's assessment feedback statement, including the commitment to return work within 20 days, although they indicated that for large class sizes the requirements for moderation could cause delays. The students were broadly positive about the quality of feedback they received both through coversheets on assignments and group feedback. The team noted that the recent periodic review report had identified that 'there should be further consideration given to providing grading criteria that promote a greater consistency of assessment marking and feedback from staff'.

181 From its study of a sample of student assessed work, the audit team was able to conclude that the standard of student achievement was appropriate to the titles of the awards and their location within the FHEQ. Some work was of a high quality, according with the views of external examiners.

182 Undergraduate students are provided with handbooks, which the audit team considered to be clear and helpful. They included programme specifications and flowcharts of module options, with separate versions for single honours, majors and minors. Their content was also available on the

School's web pages. In discussion with the team, the students indicated that they often used web resources in preference to the handbooks and were confident they could find the necessary information either on the School's own web pages or through the student portal.

183 The students met by the audit team regarded the School's learning resources as an important part of their experience and commented favourably on the teaching laboratories, IT facilities and cartographic facilities, together with their technical support. They were particularly positive about the fieldwork opportunities given to them, including work (currently in Ireland) that was integral to the degree. Students also had opportunity to participate in community projects. A distinctive feature of the School is its connection with the national subject centre in Geography. Although the centre has a national role, the award of two CETLs involving the School has given independent testimony to the high standards of teaching.

184 In terms of academic guidance and support, students who met the audit team consistently expressed their satisfaction with the operation of their courses and the accessibility and supportiveness of staff. Postgraduate students also commented on the positive role of the Graduate School in providing additional support. All research students are advised by a director of studies, along with a second supervisor. Student progress is monitored in liaison with the Graduate School, which provides assistance in skills training. The School is committed to the University policy of PDP and in the latest revision of its undergraduate programmes has embedded PDP elements in modules throughout the three stages of the degrees. Postgraduate research students were divided in their views about the utility of the research student log.

185 Student survey feedback is collected through module questionnaires and the SPQ, and is considered as part of the annual programme monitoring process. While indicating that the SPQ response rate for Geography was relatively good, the staff who met the audit team conveyed that SPQ results had become less representative during the trial period for electronic surveys due to low response rates. They also expressed the view that the results needed to be considered alongside module evaluation and feedback obtained through the student representation system.

186 Students have a voice in the School both through SSLCs and through their role on the School Programme Committee. The SSLCs meet at least

three times each term. The audit team learned that they were the principal forum for dealing with issues and students believed that their concerns were listened to and addressed. They gave the instance of a third-year module which had been improved recently after the issue had been raised by student representatives.

187 Overall, the audit team was satisfied that:

- the standard of student achievement in the programmes covered by the DAT is appropriate to the titles of the awards and their location within the FHEQ
- the quality of the learning opportunities is suitable for the programmes of study in Geography, leading to the named awards.

# Section 4: The audit investigations: published information

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

188 The University provides a number of sources of information for students from the time of their first enquiry about application to their graduation and experience as alumni. The key publications for student recruitment are the prospectuses, but students increasingly access information about programmes (termed courses for publicity purposes) from the University website, which provides links to course brochures and short module descriptions. There are separate web pages aimed at postgraduate and international students. At induction, students are issued with programme handbooks providing detailed information about the management, structure and assessment arrangements for their programmes, and with the University Student Handbook and Guide to Services, which cross-refers to web-based information, including assessment regulations, appeals procedures and student support services. They are also given intranet access through the student portal.

189 The central Marketing and Communications Department has responsibility for coordinating the University's marketing, recruitment, external and internal communications, and, in this context, for promoting its corporate image and reputation. Faculties are responsible for both the accuracy and consistency of web-based and prospectus information and final proofs for prospectuses are signed off by faculty business managers. With regard to communications through the student portal, the SED explained that the focus had been on providing

information and access to materials such as lecture notes and presentations, but the intention was to extend the use of the portal to provide a more interactive platform (see paragraph 110 above).

190 The SWS was generally positive about the accuracy and relevance of information published and available to students, stating that it appeared to be 'complete' while basic course details 'provide[d] a platform for further investigation'. This view was confirmed by UPSU representatives, who also clarified that postgraduate research students additionally had access to the staff intranet, although it was planned to give them a single login for all information. Students who met the audit team through the DATs commented favourably on the accuracy of introductory information and also indicated they were given full details well in advance about relocation to other campuses. Some students, while acknowledging that they received student guides and handbooks, stated a preference for using the student portal, also expressing confidence in their ability to find information when they needed it.

191 The audit team gained a clear impression that the intranet had developed rapidly, facilitated by its organisation into communities, enabling many users to post information. The team concluded that this approach had been effective in maintaining relevant communication with students during a period of considerable change (see paragraph 45 above). However, it was evident that the University was now taking a more directed approach to managing internal communications, which the team considered to be appropriate, since the major part of the restructuring was complete.

### Reliability, accuracy and completeness of published information

192 In response to the circular HEFCE 02/15: Information on quality and standards in higher education, the University set up a working group to determine how best to meet the requirements for publishing information on the TQI website (the subject of HEFCE 03/51 Final guidance). However, the SED indicated that the University had since broadened its interest to include consideration of internal information requirements as well.

193 So far, the University has succeeded in uploading onto the TQI site a summary of its Learning and Teaching Strategy, information on employer links, an explanation of the external examiner structure and external examiner reports on individual programmes. At the time of the audit, summaries of the recent periodic reviews of Architecture and Geography were

being prepared for publication and the quantitative data were due to be provided by the Higher Education Statistical Agency (HESA). Quality Support has coordinating responsibility for the University's entries on the TQI website.

194 In the SED, the University expressed confidence as to the availability of the information, which according to *HEFCE 02/15* should be available internally, but there was a concern about its accessibility, since much of the designated information was held in individual schools or departments, often in hardcopy. However, the SED suggested that development of the document management system would in part address this issue and also pointed to the improved reporting capacity of the new student administration system.

195 The audit team concluded that the University was engaging appropriately with the HEFCE-led developments for publication of teaching quality information and was in a good position to meet its attendant responsibilities. In relation to programme specifications, the team noted that these were not currently published on the University website, so there could be no link to the TQI site. However, there was information on the University site about how to obtain copies of programme specifications.



# **Findings**

196 An institutional audit of the University of Plymouth (the University) was undertaken by a team of auditors from the Quality Assurance Agency for Higher Education (QAA) during the week 28 February to 4 March 2005. The purpose of the audit was to provide public information on the quality of the University's programmes of study and on the academic standards of its awards. As part of the audit process, according to protocols agreed with the Higher Education Funding Council for England (HEFCE), the Standing Conference of Principals and Universities UK, four discipline audit trails (DATs) were selected for scrutiny. This section of the report summarises the findings of the audit. It concludes by identifying features of good practice that emerged from the audit, and by making recommendations to the University for enhancing current practice.

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

## The quality assurance framework

197 According to the self-evaluation document (SED), a key feature of the University's strategic approach to the management of quality is a devolved structure which defines responsibility for quality at all levels, while faculties are 'entrusted and empowered' to implement quality assurance processes. An institutional overview is maintained by means of processes designed to provide consistency and a level of auditing and monitoring sufficient to assure the quality and standards of the University's awards. Advantage has been taken of a recent reorganisation of the faculties to review institutional processes for approval, monitoring and review in order to improve their efficiency and effectiveness. Although it was admitted in the SED that there were still improvements to be made in establishing clarity of practice at local level, confidence was expressed that a coherent set of systems had been devised which would enhance student learning and meet external requirements. The audit team appreciated the significant part played by associate deans in this framework and the importance of ensuring their effectiveness (see paragraph 246 i).

#### Programme approval

198 Under a recently revised procedure, faculties have been given responsibility for programme and module approval and modification, although there is a special arrangement for University of Plymouth Colleges whereby Quality Support retains responsibility for coordinating programme approval. In the interests of consistency, both standard

templates and detailed guidance on taking a programme from design to delivery are provided to staff. A programme committee produces, with external advice, an outline programme proposal in line with the faculty strategic plan and the University planning process. The documentation required for the approval of new programmes includes a programme specification that takes account of external reference points as well as the University Assessment Policy. Proposals for new programmes are considered by panels whose members include a senior academic from another faculty and at least two independent external peers and, if appropriate, a representative from a professional, regulatory and statutory body (PRSB). Associate deans play an important role in ensuring that any conditions imposed by panels are met before final approval is given. Early indications suggest that the new procedures are operating effectively and that they are modified when necessary.

#### **Annual monitoring**

199 Programme monitoring, defined as 'an annual health check' on the quality, standards and relevance of all the University's taught programmes of study, has been faculty-based since 2003-04. Programme committees record on a template the actions to be taken in response to a standard dataset, which includes institutional data on the programme, external examiner reports and responses to them, student perception questionnaire (SPQ) results and graduate destinations. An action plan is prepared on the basis of the data and comments from student members of the committee. The associate deans receive the action plans and copies of the minutes of the programme committee and are responsible for ensuring that the annual programme monitoring process has been carried out, reporting on the results to faculty Learning and Teaching Committees (LTCs) and Graduate Affairs Committees (GACs), preparing reports for faculty boards and identifying institution-wide issues for referral to LTC. After the first year of operation, some changes have been made to the process in order to ensure greater consistency and to accommodate the later receipt of reports of external examiners for postgraduate programmes. An Internal Quality Audit (IQA) of programme committees has identified for future implementation further improvements to the process.

#### **Periodic review**

200 A revised process of periodic review of the coherence and relevance of taught programmes managed by the faculties and focused on subject areas has been in operation from the start of the

2004-05 session. The process is designed to encourage critical reflection on academic standards and student achievement, on the quality of the student learning experience, and on the context within which the subject area operates in relation to the faculty and the University. Faculty-based panels, whose membership includes two or three external advisers, consider extensive documentation and meet employers and graduates as well as staff and student groups. The reports of the first reviews under the new process indicate that it is robust and takes into account external expectations. Periodic review is supplemented by a process of IQA which is intended to provide a means of investigating the efficiency and effectiveness of individual policies and processes. Carried out by Quality Support under the auspices of LTC, IQAs have resulted in significant improvements to key quality processes such as periodic review and external examining (see 244 ii).

## Feedback from students, graduates and employers

201 The University employs a wide range of mechanisms to obtain feedback from students on the quality of its programmes. The mechanisms include student representation on University committees and task groups, programme committees and student-staff liaison committees. The University is aware of shortcomings in the effectiveness of student representation, particularly at faculty level, and the Dean of Students and the Students' Union (UPSU) are working together to implement an UPSU initiative for improvements to the system (see 244 iii).

202 At subject level feedback is obtained through module evaluation questionnaires and at institutional and programme level through the annual SPQ. Undergraduate SPQs have been in operation for 10 years and a postgraduate SPQ was introduced in 2001-02; the University regards the SPQ as an 'invaluable tool' for improving the quality of the student experience. Student feedback is an essential part of both annual monitoring of programmes and periodic review. In the light of student concern about the lack of transparency in the module evaluation process, the University intends to review institutional policy on communicating to students the action taken as a result of student feedback, and the audit team pointed to practice in certain subject areas which might form a useful basis for a broader approach (see paragraph 246 ii). Feedback from graduates is routinely sought by some programme teams as part of programme approval and periodic review and the National Student Survey (NSS) is regarded by the University as a potential source of feedback from its

graduates. Feedback from employers is obtained in several different ways, ranging from PRSB accreditation to links with employers developed by the Careers Service.

#### Distance-learning and collaborative programmes

203 Although the University has at present no programmes delivered wholly by distance learning, it was acknowledged in the SED that an increasing number of modules were being developed for distance learning. As a result, a review of the University e-learning strategy has made recommendations aimed at mainstreaming e-learning in programme delivery. Of the collaborative arrangements considered by the audit, the Peninusilla Medical School was formed in 2000 as an equal partnership between the Universities of Plymouth and Exeter. The Universities have established a joint management structure and aligned where necessary their internal policies and practices. In other collaborative activities with health service partners, standard University processes for quality assurance and enhancement are in place.

#### Conclusion

204 At the time of the audit, the University had recently developed, and was in the process of refining, an effective framework for managing and enhancing quality; as a result, broad confidence can be placed in the soundness of the University's present and likely future management of the quality of its programmes.

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

## Assessment policies

205 Academic standards in the end-of-year assessment process are monitored by means of a two-tier system of subject assessment panels and award assessment boards. In order to ensure consistency across faculties, operational instructions for this system are published within the Academic Regulations, which also define the respective roles of subject and award external examiners and the progression and award rules for taught programmes.

206 According to the SED, academic standards are managed initially in programme approval through the development of programme specifications and then through the local application of the University Assessment Policy by schools and faculties. Although each faculty has a learning and teaching strategy incorporating assessment priorities, the audit team found that the implementation of the Assessment Policy was proceeding at different rates within schools and gaps had been identified by associate

deans (LT). Examples from the DATs included inconsistency in the application of procedures for marking and moderation of assessed work and for giving assessment feedback to students (see paragraph 245 i).

#### Use of statistical data

207 The University produces centrally various student profile data at the level of faculty, school and programme. The programme-level data, supplemented by module Pass rates and applications to acceptances ratios comprise the dataset for annual programme monitoring. In addition, school summary statistics allow comparison of school rates with faculty rates on a range of measures, including percentage withdrawing, percentage with 'good' degrees and percentage ethnic minorities.

208 The SED identified the use of statistical data in annual monitoring as an area that 'need[ed] further refinement' and the audit team noted that cohort analysis had to be completed manually. There has been a delay in the second phase implementation of the student administration system, but this is now back on course and should improve access to statistical indicators. In general, the University appears to be making appropriate use of statistical data in the management of quality and standards and has itself identified where further development of systems should be directed.

## **External examiners and their reports**

209 Procedures for the appointment and use of external examiners are included in the Academic Regulations. External examiners are required to submit annual reports on a template, which now includes a section for producing the summaries for publication on the Teaching Quality Information (TQI) website. From summer 2005, it is intended that external examiner reports will be received at faculty level to allow heads of school and associate deans to deal with matters requiring an urgent response prior to wider consideration of reports as part of the annual monitoring process. This requires programme teams to formulate action plans addressing issues raised and to send formal responses to external examiners on resultant action. Quality Support has taken on responsibility for bringing institutional issues to the attention of the Academic Regulations Sub-Committee. External examiners will continue to receive a summary of these issues and responses to them as part of the following years' briefing information.

210 According to the SED, the University bases its confidence in its external examiner system on the overall positive findings of the IQA of external

examining. The IQA report also made several recommendations, which have been or are in the process of being implemented. From external examiner reports, it was evident that the extent of local application of institutional assessment policy is kept under consideration and is the subject of dialogue between external examiners and programme teams. The recent changes to the arrangements for dealing with reports are clearly documented and are in keeping with the general pattern of devolving to faculties responsibility for the implementation of quality assurance procedures.

#### Conclusion

211 At the time of the audit, the University had an effective framework for managing standards; as a result, broad confidence can be placed in the soundness of the University's present and likely future management of the academic standards of its awards.

# The effectiveness of institutional procedures for supporting learning

#### **Learning support resources**

212 Information and Learning Services (ILS) is responsible for provision of library and IT services throughout the University. In this task, it is guided principally by the institutional Learning Resources and information technology (IT) strategies, the implementation of which are respectively the responsibility of the Library Steering Group and Planning and Resources Committee (PRC). In addition, emergent needs for learning support resources are dealt with by PRC through the annual budgeting process. IT systems development is overseen by university-wide project boards and ILS has representation on central academic committees, faculty boards and programme planning committees. User feedback obtained through 'comments and suggestions' forms, the SPQ and the committee structure, together with regular benchmarking against 'comparable' institutions, assist ILS in focusing its development plans.

213 Student feedback on both library and IT services has been generally positive, and during the audit, students emphasised the increasing importance of the student portal as a resource for accessing information. However, a recent review, commissioned by the University through external consultants, highlighted inconsistencies in the levels of IT support across faculties and overlapping responsibilities between faculties and ILS; the SED indicated that the University would be taking forward proposals from this review. The University's

processes for ensuring the appropriateness of learning resources are considered to be responsive to change while founded on longer-term strategies, thereby enabling the University to identify where further development is necessary.

## Academic guidance and personal support

214 Academic guidance and support for students is centred on schools and supplemented by specialist institutional services, which are either the responsibility of, or work closely with, the Office of the Dean of Students. Among these is the Learning Development service, which assists students with a range of study skills, SUM-UP, which provides support in mathematics and statistics, and the English Language Centre, offering language support to international students.

215 Student academic support begins with induction, which is arranged at school or programme level, although at University level there is a programme introducing students to institutional services. Once students get started on their programmes, primary responsibility for academic guidance falls to the school tutorial system, which for most students involves allocation of a personal tutor. However, schools are also seeking to embed tutorial support in the curriculum and to implement the SkillsPlus strategy. Educational Developement and Learning Technologies (EDaLT) provides support for staff in integrating skills development into the curriculum.

216 University restructuring has highlighted the variability in arrangements for tutorial support between schools, even within the same faculty, and the SED identified a concern about the consistency of support. Nevertheless, during the audit, students conveyed high levels of satisfaction with both the quality and availability of tutorial support at school and programme level. The SkillsPlus strategy is effective in drawing together policies relating to student academic support, skills development and employability (see paragraph 244 v). There is evidence of the incorporation of skills development into the curriculum, although establishing PDP within the tutorial system has progressed further in some schools than in others. Also, the Careers Service is working with schools to include careers management in undergraduate programmes.

217 Supervision arrangements for postgraduate research students are set out in the Research Student Handbook. First-stage supervisory training is incorporated in the Learning and Teaching in Higher Education (LTHE) programme for new staff, while existing staff new to postgraduate research supervision are also required to undertake training. Responsibility

for the generic skills development programme for postgraduate research students lies with the Graduate School (GS), while associate deans (GS) have the brief for standardising arrangements for supervision and support, including induction, within and across faculties. A research student log is used to record the outcome of supervisory meetings and, although research students expressed some doubts about its value, the log is to be further developed. Central oversight of research students' progress is through the Graduate Committee. The GS is making a significant input to facilitating the development of the research student community and, under the direction of the Graduate Committee, to ensuring compliance with the recently revised Code of practice for the assurance of academic quality and standards in higher education (Code of practice), Section 1: Postgraduate research programmes (see paragraph 244 vi).

218 Overall, the audit team concluded that the University recognised the importance of equity and consistency in its arrangements for student academic guidance, support and supervision and was taking appropriate steps to review systems and services in the light of new organisational structures, in order to ensure their continued effectiveness in meeting students' needs.

219 Personal support and guidance is centred on the advisory services within the Office of the Dean of Students, which deal with counselling, health, funding, and advice for international students (in addition to Learning Development (see paragraph 214 above)). The UPSU Welfare and Advice Unit provides an independent source of support for students, although the Dean of Students has a particular role in promoting the liaison between University and UPSU services. Personal tutors may refer students to relevant services, but as tutors are not necessarily aware of the full range of services available, some faculties have established student support offices to provide a frontend administrative service.

220 Routine evaluation of institutional services is through the SPQ, with results being considered by relevant committees, but a task group of associate deans has recently been formed to review the linkages between school, faculty and institutional support services. The audit team considered this to be a timely development, although, in general, it found the University's arrangements for personal support to be comprehensive and responsive to students' needs.

## Teaching staff appointment, appraisal and reward

221 There are fully-documented procedures for appointment, induction and probation of new staff.

Appointment panel chairs receive training, which will be made compulsory from July 2005. All new staff participate in a two-day university-wide induction programme and are allocated a mentor. New staff are subject to a probationary period, which has recently been extended to three years.

222 There is a longstanding annual staff appraisal scheme in operation, which applies equally to full-time and part-time staff and for which all appraisers must undertake training. During appraisals, performance targets are discussed in relation to local objectives, while identified development needs are summarised and prioritised before being forwarded to the various staff development providers within the University.

223 The University's promotion policy contains criteria and guidelines for parallel promotion routes based on competence in teaching, assessment and learning facilitation; research and scholarship; and academic leadership/management. Innovative teaching is also recognised and rewarded through a teaching fellowship award scheme. On the research side, an institutional policy on sabbatical leave is being developed.

224 As outlined in the SED, the University has strengthened its Personnel and Development function to handle aspects of academic restructuring and is placing emphasis on systematic data collection to highlight problem areas and target priorities. In summary, the University has appropriate procedures in place for the assurance of the quality of teaching staff, their appointment, appraisal and reward and these are supported by clear and readily-available documentation.

# Staff support and development

225 The University has several central staff development providers, including Staff Development Services, EDaLT, ILS, the GS and the Research Support Development Office. Their goals are derived from a number of institutional strategies, namely the Human Resources, Learning and Teaching, and Research strategies.

226 Training for teaching staff up to master's level is provided by EDaLT through the LTHE programme, which is mandatory for all staff with less than three years' teaching experience. The programme is accredited by both the Higher Education Academy and Staff and Educational Development Association, and for 2004-05 has been redeveloped to enable different categories of staff to follow training pathways best suited to their professional context. This approach also gives postgraduate teaching assistants the opportunity to complete accredited training. In addition, EDaLT offers advanced practice

modules for established academic staff and produces comprehensive guides on various topics, which staff have found to be of considerable benefit (see 244 iv).

227 A university-wide scheme of teaching observation, linked to staff appraisal and professional development has been in existence since 1993, but a new set of guidelines has recently been approved by LTC such that, from September 2005, peer review will encompass a wider range of activities than teaching observation. To address the specific development needs of those appointed to key posts in the restructuring, the University is relaunching the leadership development programme in 2005.

228 Despite the number of separate providers of staff development, publicity about their respective courses is well integrated on the staff intranet and a comprehensive programme of events is produced twice yearly. Overall, there appears to be a useful range of initiatives for the training and development of teaching staff, although the University is encouraged to complete the review of its Staff Development Policy to give systematic support to establishing the new academic structure.

# Outcomes of discipline audit trails

229 The audit team looked in some detail at programmes in the four discipline areas of Psychology, Computing, Architecture and Design, and Human and Social Geography to find out how well the University's systems and procedures were working at programme level.

230 In each case, programme specifications set out appropriate learning outcomes, linking these to teaching, learning and assessment, with reference made to relevant subject benchmark statements and PRSB requirements. While faculty learning and teaching strategies incorporate assessment priorities, some schools have not fully implemented the University Assessment Policy (see paragraph 206 above). From its study of the students' assessed work and from its discussions with staff and students, the audit team found the standard of student achievement to be appropriate to the titles of the awards and their location within the *The framework for higher education qualifications in England, Wales and Northern Ireland (FHEQ)*.

231 Student evaluation of the provision has been generally positive and students are satisfied with the information provided to them about their programmes, the nature and extent of support they receive from staff and the learning resources placed at their disposal. They view the development of the student portal as a means of communication as

being particularly helpful. The audit team found the quality of learning opportunities available to students to be suitable for the programmes of study leading to the awards covered by the DATs.

# The use made by the institution of the Academic Infrastructure

#### The Code of practice

232 The SED explained that as sections of the *Code* of practice were published, a check was made by a precursor committee to LTC on alignment of the University's procedures, resulting in the production of a comprehensive series of implementation reports. As appropriate, action plans were drawn up to address specific points, with progress against plans subsequently being monitored by relevant committees. In areas where policy development was seen to be necessary (for example, assessment of students) a working group was established with this remit.

233 The SED also admitted that during restructuring it had 'proved difficult to keep track of implementation of a complex series of planned actions, some of which [might] no longer be relevant in the revised structures'; slippage in the timescales for implementation of the Assessment Policy provides one such example. However, LTC has recently received a progress report on alignment with the *Code of practice*, which should provide a systematic mechanism for dealing with revisions to the *Code*, as well as updating the overall record of alignment.

#### The FHEQ and subject benchmark statements

234 The University adopted a similar approach to the FHEQ, giving the remit for the appropriate alignment of its awards within the FHEQ to the Academic Regulations Sub-Committee, including the introduction of any necessary regulatory measures. The University's current approach to mapping programme outcomes against qualifications descriptors and subject benchmark statements is outlined in the EDaLT guide, Designing your Programmes and Modules. Other reference points used in programme and module design include Southern England Consortium for Credit Accumulation and Transfer-level descriptors and PRSB requirements, where applicable.

235 The SED acknowledged that, while programme specifications referred to subject benchmark statements, not all mapped learning outcomes against relevant benchmarks and some predated the FHEQ. There is, however, a revised template to be used in programme approval from 2004-05 and for publishing all programme specifications from 2005-06. This template and accompanying guidance is

comprehensive and clear about the importance of making explicit the use of external reference points.

236 Although there is currently significant variability in the format of programme specifications, staff are clearly aware of the value of reference points in defining programme standards. Overall, the audit team shared the University's view that there was in place 'a workable approach that integrates the various external reference points and provides a mapping tool'.

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

237 The SED was well-structured and clearly drafted, giving a useful overview of the University's quality processes and structures, which are the product of recent and extensive organisational change. The SED made it clear that the majority of structural changes had now been implemented, but also acknowledged that new processes were still being adjusted and that in a number of areas policies were not yet fully formulated or procedures were still under review. In analysing strengths and limitations, the SED demonstrated that evaluation was the basis for future action and provided, as stated in the conclusion, 'a useful benchmark of progress'. Promoting local ownership of a common set of systems across all faculties was a strong theme, facilitating the audit team to ask appropriate questions to test whether processes and policies were understood by staff and working effectively to deliver enhancement of the student experience. In summary, the SED was accurate and comprehensive and provided a good platform for the audit.

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

238 In highlighting its commitment to quality enhancement of learning and teaching, the University identified the synergies between policy and practice, created by the network of associate deans; the institutional overview of quality and standards afforded by Quality Support; the dissemination of good practice through the Quality Network; and the central support for educational development. However, the University also acknowledged a number of areas that it still needed to develop, such as formulation and use of further statistical indicators at school level; evaluation and refinement of the new periodic review process; and possible modification of the SPQ to pick up student needs as changes are taking place.

239 It was apparent that quality enhancement was a key driver in the University's academic strategies, demonstrated by its success in the National Teaching Fellowship scheme and its achievement of four Centres for Excellence in Teaching and Learning, plus another in partnership with various other institutions. It is again reflected in the University's priorities for advancing its research and regional ambitions. Extensive revision to internal quality assurance processes has accompanied restructuring and significant emphasis has been given to developing effective electronic communication with staff and students during this period of organisational change (see 244 i). The role of associate deans is now seen as pivotal in taking forward routine improvements alongside enhancement initiatives and although these posts have existed for only a short period, there is evidence of the positive impact they are already having. In conclusion, the University's proposals for quality enhancement are appropriate and relevant to its current stage of development.

# Reliability of information

240 The University provides information for prospective and current students through prospectuses, brochures and handbooks, although increasingly they access information from its website. At induction, students are also given access to the intranet through a student portal, where the focus has been on providing information and materials such as lecture notes and presentations. The central Marketing and Communications Department has responsibility for coordinating the University's marketing, recruitment, external and internal communications, while faculties are responsible for both the accuracy and consistency of web-based and prospectus information; final proofs for prospectuses are signed off by faculty business managers.

241 Feedback from students has been generally positive about the accuracy and relevance of information provided for them, with the majority stating a preference for using the student portal. The intranet has developed rapidly, facilitated by its organisation into communities, enabling many users to post information. However, it is evident that the University is now taking a more directed approach to managing internal communications.

242 With regard to the information which according to HEFCE 02/15: Information on quality and standards in higher education should be available internally, the University expressed confidence as to its availability, but there was a concern about accessibility, since much of the designated information is held in

individual schools or departments, often in hardcopy. However, the SED suggested that development of the document management system would in part address this issue and also pointed to the improved reporting capacity of the new student administration system. With regard to the information for publication, the subject of *HEFCE 03/51: Final guidance*, the University has succeeded in uploading onto the TQI site the majority of the requisite summaries and the quantitative data are due to be provided by the Higher Education Statistical Agency.

243 The audit team concluded that the University was engaging appropriately with the HEFCE-led developments for publication of TQI and was in a good position to meet its attendant responsibilities. In relation to programme specifications, the team noted that these were not currently published on the University website, so there could be no link to the TQI site. However, there was information on the University site about how to obtain copies of programme specifications.

# Features of good practice

244 The following features of good practice were noted:

- i the active use and continuous development of the staff and student intranet portals, allowing both currency of information and relevance of communication to be maintained during a period of extensive organisational change (paragraph 45)
- ii the effectiveness of IQA as a mechanism for investigating the operation of key quality processes (paragraph 62)
- iii the partnership between the University and UPSU to improve student representation (paragraph 86)
- iv the work of EDaLT in supporting staff academic and professional development, as exemplified by its comprehensive guide, Designing your Programmes and Modules (paragraph 108)
- the effectiveness of the SkillsPlus strategy in drawing together policies relating to student academic support, skills development and employability (paragraph 121)
- vi the support for postgraduate research students provided through the Graduate School, facilitating development of the University's research student community (paragraph 124).

# **Recommendations for action**

245 Recommendations for action that is advisable:

i to give the necessary impetus to ensure full implementation of the University Assessment Policy at faculty and school levels, with an emphasis on achieving local consistency in arrangements for the moderation of marking and the provision of feedback to students (paragraph 73).

246 Recommendations for action that is desirable:

- i to be proactive in monitoring the effectiveness of associate deans in interpreting institutional quality requirements and promoting local ownership and consistent operation of quality assurance and enhancement processes in their faculties, while working to achieve an equivalence of student experience across faculties (paragraph 41)
- ii building on the practice in certain subject areas of publicising module reviews to students, to adopt a university-wide approach to utilising module evaluation and communicating resultant action (paragraph 90).

# **Appendix**

# University of Plymouth's response to the audit report

The University welcomes the institutional audit report, which confirms that the University's approach to its quality assurance arrangements is sound, while also identifying a number of areas of good practice. As the University continues to implement its plans, which were discussed in its self-evaluation document, it will be giving due consideration to the audit report recommendations. Planned actions were already identified in the University's initial self-evaluation document, and it is re-assuring to note that the auditors in the main concurred with the University's own view of its strengths, as well as its areas for improvement.

#### RE actions that are advisable:

1. Assessment Policy: The University acknowledged in its self-evaluation report that there was more work to do on the implementation of its assessment policy. The University's Learning & Teaching Committee has agreed that the Assessment Policy working group should continue to monitor progress in the implementation of the University's Assessment Policy, and is receiving regular reports. With regard to the moderation of marking, the working group is currently undertaking a survey of external examiners, to see if good practice can be identified elsewhere. It is anticipated that in due course, a set of guidelines for the moderation of marking will be published. The effectiveness of the implementation of these guidelines may well be the subject of an internal quality audit at a suitable later date.

## RE actions that are desirable:

2. To be proactive in monitoring the effectiveness of Associate Deans in interpreting institutional quality requirements... while working to achieve an equivalence of student experience across faculties:

The University chose to devolve responsibility for the implementation of its quality assurance arrangements to faculties, and is aware of the significant role it has assigned to Associate Deans within faculties in implementing these arrangements. So far these arrangements have been working well. Associate Deans (Learning and Teaching) already meet regularly with the Director of Quality Support to discuss developments in quality assurance arrangements and their implementation across faculties. They also participate in the University's Quality Network, which includes in its membership quality representatives from all Faculties as well as the University's Partner Colleges. These meetings promote dialogue and the sharing of good practice.

The University also has an internal quality audit facility which it can use to investigate the effectiveness of the interpretation of QA arrangements across its faculties and partners. Once the University has completed its next (collaborative) audit (scheduled for 2006), it is anticipated that the internal quality audit programme will re-commence.

3. To adopt a University-wide approach to utilising module review and resultant action

The University takes seriously all student evaluations of its provision, and is seeking ways to develop a University-wide approach which provides all students with the assurance that their views will be heard and will receive a timely response. It intends to build on existing good practice in sharing the outcomes of module review to establish some minimum guidelines which all subject areas will be expected to implement. In particular, the arrangements will ensure that students and their representatives can see a summary of the outcomes of any evaluation to which they contribute. The Vice Chancellor has identified the need for Academic Board to address the development of policy, and it is anticipated this will be addressed within the next academic year.

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