



Institutional audit

University of Worcester

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Preface

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

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

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

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

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

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

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

Audit teams also comment specifically on:

- the institution's arrangements for maintaining appropriate academic standards and the quality of provision of postgraduate research programmes

Institutional audit: report

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

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

Explanatory note on the format for the report and the annex

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

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

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

Summary

Introduction

A team of auditors from the Quality Assurance Agency for Higher Education (QAA) visited the University of Worcester (the University) from 14 to 18 March 2011 to carry out an Institutional audit. The purpose of the audit was to provide public information on the quality of the learning opportunities available to students and on the academic standards of the awards that the University offers.

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

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

Outcomes of the Institutional audit

As a result of its investigations, the audit team's view of the [official name of institution] is that:

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

Institutional approach to quality enhancement

The University's integrated approach to quality enhancement emphasises a management process of continuous and systematic improvement and a culture of critical self-evaluation of evidence and reflection. The audit team found the University's commitment and approach to enhancement to be a feature of good practice.

Postgraduate research students

The University has recently been granted research degree awarding powers (September 2010) and has been developing its own processes and procedures for awarding its own research degrees. The audit team concluded that the University's arrangements for its postgraduate research students met the expectations of the *Code of practice, Section 1: Postgraduate research programmes*.

Published information

The audit team found that reliance could reasonably be placed on the accuracy and completeness of the information the University publishes about the quality of its educational

provision and the standards of its awards, with just one exception around information on arrangements for students progressing from partner institutions to top-up programmes at the University.

Features of good practice

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

- the comprehensiveness of the Student On-Line Environment (SOLE), which is tailored to the individual
- the Student Academic Representatives (StARs) initiative, which enhances student representation
- the wide range of opportunities afforded to students to enhance their employability
- the proactive approach which supports the student experience for disabled students
- the institution's commitment to enhancement, exemplified by its reflective and self-critical approach
- development of the Link Tutor role and establishment of a Link Tutor Forum to share good practice across the institution
- the inclusive approach of the University in working with its collaborative partners.

Recommendations for action

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

The team advises the University to:

- to review the course approval process to ensure that all approval decisions are fully informed and have appropriate externality
- to ensure that external examiners and the Chief External Examiners comply fully with, and have sufficient data to fulfil, the requirements of their roles
- to review the University's admission requirements, and preparation of students, for entry to top-up programmes in line with the QAA Code of Practice and to ensure that these are clearly communicated to current and prospective students, and ensure that all Foundation Degrees programmes specify top-up programmes and bridging provision at the point of approval.

It would be desirable for the University to:

- to include in the future review of the new periodic review process the adequacy of reporting on the effect of changes to programmes, including those which are cumulative
- to evaluate the effectiveness of the operation of the new arrangements for partnership monitoring and review.

Reference points

To provide further evidence to support its findings, the audit team investigated the use made by the University of the Academic Infrastructure, which provides a means of describing

academic standards in UK higher education. It allows for diversity and innovation within academic programmes offered by higher education. QAA worked with the higher education sector to establish the various parts of the Academic Infrastructure, which are:

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

The audit found that the University has responded comprehensively and systematically to the *FHEQ*, subject benchmark statements, programme specifications and, on the whole, to QAA's *Code of Practice* in its management of academic standards and the quality of learning opportunities available to students.

Report

1 An Institutional audit of University of Worcester (the University) was undertaken during the week commencing 14 March 2011. The purpose of the audit was to provide public information on the University's management of the academic standards of the awards that it delivers and of the quality of the learning opportunities available to students.

2 The audit team comprised of the following auditors: Professor Peter Bush; Professor Clare Pickles; Mrs Karen Powell Williams; Mr Jon Rowson; and Mr Steve Topazio; and Ms Alison Blackburn (audit secretary). The audit was coordinated for QAA by Dr David Gale, Assistant Director (Development and Enhancement Group).

Section 1: Introduction and background

3 The University originated as a teacher training college in 1947 before diversifying and developing into the Worcester College of Higher Education by the 1970s. The University was granted taught degree awarding powers in 1997, university title in 2005, and research degree awarding powers in 2010. The University has two campuses in the city of Worcester and has made significant investment in its estate including teaching accommodation, halls of residence, and specialist facilities for physical education, sport, art and design and science.

4 The University has grown significantly in student numbers over the last five years. In 2009-10 there were 7,695 undergraduate full-time equivalent students, 1757 taught postgraduate students and 93 research postgraduates. Following the granting of research degree awarding powers the first students to be admitted under the University's own powers registered in September 2010. The academic structure of the University is comprised of six Institutes: the Institutes of Education, Health and Society, Humanities and Creative Arts, Science and the Environment, Sport and Exercise Science and the Worcester Business School.

5 As the only higher education institution in Herefordshire and Worcestershire, the University is committed to contributing to the skills and widening participation agendas of the region and has collaborative links with each of the further education colleges (FECs) in the two counties. The University currently has 41 formally approved UK partnerships and two active international partnerships, which together involve some 2500 students following University awards.

6 The University's Strategic Plan (2007 to 2012) sets out the institution's vision and aims which is to build on their 'fine reputation for providing excellent, inclusive higher education' to drive social, economic and cultural development in the region, and to promote opportunity in an inclusive way. In addition to this, the key ambitions of the University are to:

- provide first class student care and outstanding opportunities for learning
- produce highly employable, innovative, professional and entrepreneurial alumni
- promote first class scholarship, research and knowledge transfer
- play an outstanding part in the economic development of the of the region
- be an excellent employer
- be a very well managed, financially secure institution.

7 The University was subject to an Institutional audit in November 2005 which concluded with an overall judgement of broad confidence in the institution's management of the quality of its academic programmes and the security of its awards. The report made a total of five recommendations which the present audit team found that the University had responded to effectively. The report also recognised six features of good practice and the present audit team found that the University was continuing to build on these.

Section 2: Institutional management of academic standards

8 The key institutional document for setting out the formal arrangements for managing academic standards and quality of learning opportunities is the Framework for the Management of Quality Assurance and Enhancement. Formal responsibility for the oversight of academic standards and quality matters resides with Academic Board. It is responsible for advising the Vice-Chancellor and Board of Governors on these matters. By working through its subcommittee, the Academic Standards and Quality Enhancement Committee, Academic Board has oversight of the more detailed work of the institution in relation to academic standards and quality. Other subcommittees of Academic Board that are relevant to the management of academic standards include the Research Degrees Board with responsibility for matters in relation to research students and courses, and the Academic Portfolio Committee.

9 There are three subcommittees of the Academic Standards and Quality Enhancement Committee: the Learning, Teaching and Student Experience Committee, which makes recommendations on learning, teaching and assessment; the Audit and Review Committee, which reports on the effectiveness of the University's academic quality assurance systems; and the Externally Provided Programmes Committee, which takes oversight of matters associated with collaborative provision.

10 Each Institute has a Board and a Quality Committee which is responsible for implementing the quality assurance and enhancement policies and procedures, including those with collaborative partners.

11 The University's course approval process has recently changed from a model of validation and periodic revalidation to one based on course planning and approval through a process of collaboration. The development of a student course handbook and a programme specification are central to the process. An enhanced process operates for collaborative provision. The team heard that the new process placed more emphasis on the quality of the student learning experience. Once the design process is concluded, the Audit and Review Committee reviews the programme specification, a statement from the Head of Institute on the efficacy of the student handbook and the reports from two external advisers.

12 The team heard that the external advisers collaborate with the academic member of staff to develop the final programme specification. The audit team was unclear in this system as to the extent of the independent view in the programme design provided at the point of approval.

13 In some instances, proposals were approved by chair's action and one approved with just one external adviser report. In most cases proposals are approved subject to conditions that are often modification of the programme specification. Approval decisions are sometimes taken by chair's action, sometimes taken on limited external advisers' comments, often when advisers are part of the design team, as part of a busy agenda, and without sight of the full student handbook. Minutes do not always make it clear how or when conditions are met. In one example, the Chair of ARC identified a large number of significant issues in the documentation submitted for approval leading the audit team to query the rigour of the new course approval process.

14 The University undertook a review of this new process for course approval in October 2009 and identified concerns including the timing of course approvals. During the course of the audit the team heard that this concern has yet to be resolved. The team advises the

University to review the course approval process to ensure that all approval decisions are fully informed and have appropriate externality.

15 A process of annual evaluation takes place at programme, Institute and University level. At the heart of the evidence base is the external examiner report and statistical data. The Institute Quality Committee reviews programme reports and action plans. In addition, the Director of Quality and Educational Development produces an annual report which reviews all available external examiner reports. An annual report on academic standards and quality is presented both to the Academic Board and the Board of Governors. The audit team reviewed these reports across a range of Institutes and found the process to be generally effective in identifying and responding to issues relating to academic standards.

16 The audit team confirmed that the periodic review process was rigorous and thorough, and in line with the expectations of the *Code of Practice, Section 7: Programme design, approval, monitoring and review* published by QAA. Changes to programmes are made on a continuous basis under the scrutiny of the Institute Quality Committees. The team sampled module and programme changes and found the process at Institute level to be fair and scrupulous. The team noted that the new periodic review process would be evaluated at the end of the first year of operation. The team noted that it was not yet clear from the documentation how effectively the new process was in providing sufficient evidence to the Audit and Review Committee on the cumulative effect of changes over time to the design and operation of programmes and modules. The team, therefore, considers it desirable for the University to include in the future review of the new periodic review process the adequacy of reporting on the effect of changes to programmes, including those which are cumulative.

17 External examiners are appointed for each course or group of related modules. There are also Chief External Examiners appointed to the undergraduate modular programmes and programme boards for Foundation Degrees and HNDs. These examiners are responsible for maintaining oversight of the conduct and operation of procedures and regulations. External examining policy, process and practice are set out in an External Examiners' Handbook and requirements for external moderation are set out in the University Assessment Policy. The team considered these documents to set out clearly the expectations of the external examiners and the external examining process.

18 Proposals for appointing external examiners are made by Institutes and nominations are scrutinized appropriately by the Audit and Review Committee. The team considered the process of induction for, and mentoring of, external examiners to be sound.

19 External examiner reports are copied to the relevant Head of Institute and other relevant staff. Responses are included in course annual evaluation reports. An overview of all external examiner reports is considered by the Academic Standards and Quality Enhancement Committee, highlighting good practice, identifying any concerns about quality or standards, and institutional issues and actions to be taken. In general, the audit team considered that this report and its consideration throughout the deliberative structures to contribute effectively to the management of academic standards. The team found evidence of serious consideration and action being taken where common issues or areas of concern have arisen.

20 The audit team reviewed Chief External Examiners' reports and noted the very different interpretation of the role by each Examiner. Reports in some cases appeared to repeat other University processes and to add little to existing assurance practices. The team also read a number of external examiner reports and found that a significant number of external examiners do not attend the Boards of Examiners. The team also noted requests from external examiners for better management information to enable them to fulfil their role.

The Chief External Examiner for the undergraduate modular scheme also expressed a concern for improved provision of monitoring data. Consequently, the team advises the University to ensure that the external examiners and Chief External Examiners comply fully with, and have sufficient data to fulfil, the requirements of their roles.

21 The University stated in its Briefing Paper that all awards reference the Academic Infrastructure and other external reference points in the design of new and the review of existing courses through reference to the *FHEQ*, subject benchmark statements and the standards of professional, statutory and regulatory bodies, as appropriate. The audit team saw evidence of effective reference to the Academic Infrastructure in the process of course design, approval, monitoring and review for both undergraduate and postgraduate provision as well as evidence of systematic reference to the *Code of Practice* in policy documents and committee deliberations. The team confirms that the University engages appropriately with the Academic Infrastructure and external reference points in the management of academic standards and quality of learning opportunities of its programmes.

22 The audit team learnt of student concerns over the different levels of preparedness of students who join Level 6 cohorts as top-up students. For Foundation Degrees, the team reviewed the process of course approval, the programme specifications and a sample of public information relating to progression routes. The team found that in some cases no progression route was approved or stated in the programme specification at the point of approval and learnt that progression agreements were sometimes developed once students were studying. This led to student confusion over progression requirements, differing arrangements for admissions (including availability of bridging programmes), and incomplete, late or inconsistent information being made available to students. In conclusion, the team advises the University to review the admission requirements, and preparation of students, for entry to top-up programmes in line with the QAA *Code of Practice* and to ensure that these are clearly communicated to current and prospective students, and ensure that all Foundation Degrees programmes specify top-up programmes and bridging provision at the point of approval.

23 The undergraduate and postgraduate regulatory frameworks provide guidance on passing modules, classification of awards, mitigation, academic misconduct and plagiarism, guidelines on the conduct of Course and Scheme Boards of Examiners. The audit team, having reviewed the relevant documentation, confirms that these procedures are in place and appropriately administered.

24 The University operates a 20 point letter grading system for undergraduate programmes and a percentage system for postgraduate taught programmes. Taught postgraduate students clearly understood the grading and classification system, less so undergraduates who expressed confusion over the relationship between a suite of letter grades and degree classifications or the final mark for a group of component marks. External examiners comment upon aspects of operation of the undergraduate grading system, occasionally uneasily about the 20 point system. The University carried out an informal review of the undergraduate grading system and how it compares with grading systems operated by other institutions. The University concluded that while there were no grounds for changing the system, particularly as it was well embedded and understood across the University, there was a need to produce enhanced guidance.

25 A key principle of the University's Framework for the Management of Quality Assurance and Enhancement is that quality assurance processes should be evidence based. The University ensures this process through providing departments with management information statistics that informs the annual evaluation and periodic review processes. Statistical information is provided through Registry Services and the audit team found that staff were able to request specific data sets to supplement the information. The

team confirmed that this data was used effectively by staff to inform internal monitoring and review processes. The University maintains oversight of the effective use of statistical information through the Audit and Review Committee and guidance is issued to assist staff in the analysis of data.

26 The University has identified negative trends in its withdrawal and completion rates in recent years. The audit team found evidence that both the University and departments are taking effective actions to rectify this downward trend including the annual report on progression, retention and attainment at the University. The team found that in the two years previous to the Institutional audit that retention rates had improved.

27 The audit team concluded that the University makes comprehensive and effective use of management information and reporting throughout the University.

28 Students' main access to information is through the Student On-Line Environment or SOLE. Through SOLE students are able to amend personal information, make module choices, access course handbooks and contact their personal tutor and StAR. Student's spoke highly of SOLE to the audit team. The team considered the comprehensiveness of the SOLE system and its tailored approach to each individual student to be a feature of good practice.

Section 3: Institutional management of learning opportunities

29 The key committees for advising the Academic Board on matters relating to the assurance and enhancement of the student learning opportunities are the Academic Standards and Quality Enhancement Committee and the Learning, Teaching and Student Experience Committee. The University deploys 'standing' and 'task and finish' groups to support the work of the committees. Two notable examples reviewed by the team are the Student Employability and Enterprise Group which developed the University's strategy for employability, and the Student Inclusion and Diversity Group which has promoted a number of enhancements to the experience of disabled students.

30 The revised process for course approval aims to give greater prominence to the student handbook in order to provide more emphasis on the student learning experience. New course proposals are submitted to the Academic Portfolio Committee for initial approval; part of the submission is a statement on the level of resources to support the new programmes. The Committee then reports directly to the Academic Board. It was not clear to the audit team how initial resource approval related to the continuous commitment by Institutes to support these resources.

31 The annual monitoring process considers evidence available on the student learning experience, including external examiner reports and reports to the Institute Quality Committees. The audit team was satisfied that the annual monitoring process contributed effectively to the management of learning resources.

32 External examiners readily comment upon staff and resource matters in support of the quality of the students learning experience. External examiners also comment upon access to specialist resources; where concern is expressed, such issues are reported to Academic Board. However, it was not clear to the audit team how the Academic Board subsequently satisfied itself with the responses to these concerns regarding resourcing or how the Academic Portfolio Committee recognised such resourcing matters.

33 The University gathers student feedback through service user surveys, focus groups and the student representation system. There is a policy for student evaluation of modules and the audit team found that module evaluations are used consistently across the University. There was evidence of comprehensive and systematic use of the National Student Survey with analysis and action plans considered both at institutional and departmental levels. The University is introducing a Student Experience Questionnaire in 2011 to collect feedback on the wider student experience at the University. Overall, the audit team concluded that student feedback was obtained effectively from students across the University, and that there was evidence of systematic analysis and action planning that had contributed to improving the student experience.

34 Students are represented at all levels of the University's committees and all course management committees. Students are involved in quality management processes through working groups and focus groups, and meet external examiners and panel members of periodic reviews.

35 The University has a student academic representative system, which has been recently revised and representatives are now known as 'StARs'. Each programme or group of programmes elects a StAR. The audit team noted how the effectiveness of the StAR system had been improved through the University's use of a thematic audit to include minimum requirements in the recruitment of StARs, clear guidelines on the operation and function of course management committees, and named individuals within Institutes to support the StAR system. The team considered the StAR initiative, which enhances student representation, to be a feature of good practice.

36 The audit team concluded that the University had effective arrangements for the involvement of students in its quality management processes and that students made a valuable contribution to the management of the quality of learning opportunities.

37 The University's commitment to learning and teaching being linked to and underpinned by research are embedded in the Research and Knowledge Transfer Strategy. There is a guide to research related teaching to help staff make this link. The University is promoting research informed teaching through an in-house journal, staff workshops and project funding. The audit team saw examples of research and scholarly activity being fed into teaching and students confirmed that staff research had enhanced their learning. The audit team found that the University's strategic arrangements and approach to be effective in encouraging and maintaining links between research/scholarly activity and learning opportunities.

38 The University has no distance or flexible learning programmes, although it does provide a number of blended learning programmes which are supported through the University's virtual learning environment (VLE). The University ensures standard and consistent practice through a set of quality standards. The audit team considered the processes for supporting staff in delivery, support and assessment of blended learning programmes to be satisfactory. All students have access to the University's VLE, including placement students and students were positive about their experience in using it. While the University has not adopted an e-learning strategy, the team considered the arrangements to be effective.

39 Students value placements and a significant amount of support is provided by the University. The University has a requirement that each course with placements or work-based learning produces a student and employer guide. Students felt that they were supported well by the University while on placement and had full access to the VLE, student support services and SOLE while on placement.

40 The University places considerable importance on employability and workbased learning. Employability is embedded within the Learning, Teaching and Assessment Strategy in which a substantial section is devoted to an Employability Statement. Depending on the subject area, employability is embedded in the curriculum and there are links with employers through placements. Significant support is provided to enhance student employability through a wide range of mechanisms and opportunities: for example, Employability champions in the Institutes, an Employability Week, a PDP and Employability conference, an Enterprise Calendar of opportunities, and a number of events and specific opportunities. The University offers an 'Earn while you learn' scheme with opportunities to work in paid jobs during their time at University. The Worcester Award recognises activities and experiences that contribute towards future employability and it is recognised on the degree transcript. The audit team found evidence of a systematic and comprehensive approach to enhancing employability by the University, along with relationships between the centre and the Institutes that supported initiatives and student employability development. The team considered the wide range of opportunities available to students to enhance their employability to be a feature of good practice.

41 The University has embarked on a period of rapid growth in student numbers coupled with an expansion of its physical estate. The National Student Survey results have shown that student satisfaction with learning resources has fallen consistently over the previous three years, which the University has attributed to the rapid increase in student numbers. The audit team learnt that the University has taken significant steps aimed at reversing this trend including additional IT facilities and investment in online learning resources. The audit team found that students were generally satisfied with the overall quality and accessibility of resources and facilities. Lead responsibility for learning resources is taken by Information Learning Services. There are effective links between Information Learning Services and the course management committees and Institutes. There are a number of mechanisms for evaluating the effectiveness of the service. The audit team concluded that the arrangements for the managing of learning resources were effective in maintaining the quality of student learning opportunities.

42 Institutional oversight of recruitment and admissions at the University is shared between the Academic Standards and Quality Enhancement Committee, Academic Board, the Vice Chancellor's Advisory Group, and the Board of Governors. The admissions office handles all applications which distribute them to individual admissions tutors in departments. Minimum entry requirements are set at an institutional level through Academic Board. The University provides support and training to admissions tutors through new staff training, an admissions forum, briefing notes, Institute staff meetings and through the University staff development programme. The audit team considered the admissions process to be appropriate.

43 The University provides clear information and guidance to staff and students on student support services available to students. There is a Student Services department that oversees support for students ranging from induction to disabled support. The audit team reviewed the support offered to disabled students, noting that the University has developed a strong reputation for good practice in this area. The University has a Centre for Inclusive Learning Support and operates various inclusive practice projects in sport, art and drama. The audit team considered the University's proactive approach which supports the student experience for disabled students, to be a feature of good practice.

44 Information on the student's personal tutors is provided through SOLE. The audit team heard from students of an inconsistent picture between the expectations and realities of the personal tutor system across the Institutes. The audit team learnt that the University planned a review of the personal tutor system in 2011 and the team encourages the

University to address the concerns raised by students over inconsistent approach and expectations.

45 Support for staff is underpinned by the University's framework for staff development which is integrated with the University's strategic plan. The framework has a comprehensive set of policies and processes for supporting academic staff. These are implemented alongside a new leadership development project and the Post Graduate Certificate in Learning and Teaching in Higher Education for new and existing staff. The Academic Development and Practice Unit provides support through publications, web resources, events, conferences, special interest groups, seminars and development projects. There is a peer learning through observation scheme being implemented in the Institutes but the audit team found that uptake was variable. There is a "What is Inspirational Teaching?" staff programme which is supported by the Institute of Education and the Academic Development and Practice Unit. The Unit also introduced in 2010 an award for a student nominated module that most inspires students to learn. Opportunities for staff development are available to all categories of academic and support staff, including part-time, hourly paid and partners in collaborative arrangements. The appraisal process is seen as a cornerstone of staff development and as an integral part of the quality enhancement process.

46 The effectiveness of staff support, development and reward is evaluated both through annual appraisal and through student feedback on their experience. The audit team concluded that the institution's arrangements and procedures for academic staff support and development were effective.

Section 4: Institutional approach to quality enhancement

47 The University states that it is committed to a culture of continuous improvement and takes an enhancement led approach to quality assurance, in which thematic audits play an important role. The purpose of the thematic audit is to assess current practice in one or two areas each year and make recommendations which will improve the quality of the student experience. The audit team was able to confirm that the University's thematic audits were deliberate and systematic steps to enhance quality.

48 An aspect of this culture of continuous improvement is critical self-evaluation and peer review. One example of this is course approval which is a developmental process. Critical self-evaluation and reflection is also embodied within the new staff development and appraisal processes which the University regards as part of the quality enhancement process.

49 Currently the University is focusing on student engagement through the philosophy of students as partners in learning and as long term members of the University. The University is now taking this forward by looking at ways to improve student engagement in course approval and review processes. Indeed, the students felt that the integration of staff and students as a community of equals was one of the best aspects of being at the University. Postgraduates were also aware of the university's partnering approach by the Institute/ School engaging with students as equals.

50 Sharing and dissemination of best practice is encouraged at University level from the recommendations of thematic audits and external examiner reports. At Institute level good practice is identified from annual evaluation, annual monitoring and periodic review. These reports are reviewed and discussed through Institute committees although the audit team was not able to identify specific examples in Institutes' reports. As a consequence, the team encourages the University to be more explicit in documenting and disseminating these

features of good practice. The University has an annual Learning and Teaching conference for sharing and disseminating good practice to which partners are invited. Examples of other mechanisms in which good practice is disseminated include an 'Interesting Practice' blog, the Annual Learning and Teaching conference, the Employability and PDP conference, Work Based Learning Symposium, Research Supervisors Forum, inspirational teaching programme, the HE Partners' Forum and the electronic Worcester Journal of Learning and Teaching.

51 The University's Learning, Teaching and Assessment Strategy, is a key driver in the University's strategy for quality enhancement of the student experience. A new Strategy, approved at the time of the Institutional audit, focuses on the qualities and attributes for graduates to have achieved and the approaches to make this happen. The concept of the Employable Worcester (Post)Graduate and what s/he should be able to do is developed at every level of study through to Level 8.

52 The University measures its success in quality enhancement through student retention, progression and achievement, and student satisfaction statistics. Its commitment to improvement and quality enhancement is recognised by external agencies including the Nursing and Midwifery Council, General Social Care Council and Strategic Health Authorities.

53 In summary, the audit team found evidence of many examples of activities and processes that contributed to the continuous and systematic improvement of the student experience. In particular, the team noted the high quality and self reflective nature of documentation, including the Briefing Paper, the University's proactive approach to continual reflection and improvement, and the development of an ethos which expects and encourages reflection and the enhancement of learning opportunities. In conclusion, the team considered the University's commitment to enhancement, exemplified by its reflective and self-critical approach, to be a feature of good practice. Notwithstanding this, the team encourages the University to take further deliberate steps to disseminate explicitly good practice arising from Institute evaluations.

Section 5: Collaborative arrangements

54 The University's approach to collaborative provision reflects the Strategic Plan which sees 'high achieving work with partner institutions' as a means of enhancing 'regional education, social and cultural development' and as contributing to its widening participation and inclusion agendas. As the only higher education institution in Herefordshire and Worcestershire, the University takes its responsibility for contributing to the regional skills and widening participation agendas very seriously, and has developed relationships with most of the further education colleges in the counties, as well as further afield. Academic Board approved in 2008 a Partnerships and Collaborative Academic Provision Policy and Strategy statement setting out the typology of partnerships, the criteria for the selection of partners, the principles governing the relationships with partners and the strategy for the development of collaborative academic provision.

55 The University's approach has been to develop a diverse range of partnerships with a variety of providers in specialist niches. The University maintains a comprehensive and detailed list of collaborative arrangements. As the numbers of students studying through collaborative arrangements and the number of partners has increased, the University has acknowledged the higher risk implicit in collaborative activities. As a contribution to the University's post-2012 strategic thinking, the University is consulting widely on a revised

partnership strategy that would primarily continue to focus on widening access and enhancing progression into higher education.

56 Oversight for collaborative matters rests with the Externally Provided Programmes Subcommittee which reports to Academic Board through the Academic Standards and Quality Enhancement Committee, although the operational management of collaborative activities is vested in the Institutes. The Director of Regional Engagement has strategic oversight of collaborative activities whilst the Institutes and the partners are in turn supported by the Head of Collaborative Programmes, and the Senior Quality Officer (Collaborative) who also ensures that collaborative processes and procedures are kept under review.

57 The University has in place well documented and clear arrangements for the approval and review of partnerships. The main criteria for the selection of partners are the compatibility of the educational objectives of the proposed partner and those of the University, the potential for a long term relationship in terms of widening participation and progression, and the standing, sustainability and environment of the partner. The approval process includes early informal discussions with senior staff at both organisations, and the preparation of a risk assessment on which the Board of Executive Managers bases a decision whether or not to approve a partnership in principle. A full report is considered by the Academic Standards and Quality Enhancement Committee which recommends approval to Academic Board. Partnership Agreements are detailed and comprehensive, and are normally valid for five years.

58 The operation of the partnership is reviewed in terms of the formal Partnership Agreement, to secure a further five years' approval and to note good practice and recommendations for development. These reviews are intended to be consultative, self-critical and collaborative. A report with an action plan is considered by the Externally Provided Programmes Subcommittee which recommends via minutes to the Academic Standards and Quality Enhancement Committee and on to Academic Board for formal authority to continue the Agreement for a further period. The audit team noted the thoroughness with which partner reviews were carried out and the comprehensive nature of the reports presented to the Externally Provided Programmes Subcommittee, which receives annual overview reports offering a generic summary of themes emerging from the previous year's partnership review activity. The Committee also receives and monitors an action plan for each partnership.

59 Partnership monitoring operates through the normal arrangements for programme monitoring through Institute processes and additionally through the establishment of Strategic Partnership Planning Groups (SPPGs) and the work of Link Tutors. The Planning Groups, which are currently undergoing review to reflect the diversity of partnerships and the University's developing partnership strategy, meet two or three times per year to monitor the partnership and keep a strategic oversight on its development. In future, it is intended to hold one of these meetings as an annual strategy meeting. The University has also agreed to adopt similarly a more flexible approach to its review of partnerships. The team recommends that it would be desirable for the University to evaluate the effectiveness of the operation of the new arrangements for partnership monitoring and review.

60 Partnerships are overseen at a local level by a course leader or higher education manager from the partner and a University Link Tutor, for whom there is a role description, guidance pack and mandatory training. The thematic audit of the Link Tutor's role resulted in still further clarification of the responsibilities of Link Tutors and their reporting lines, the strengthening of the Link Tutor Forum for University staff working with partners, and the inclusion of a collaborative/partnership standing agenda item on Institute Quality Committees. The audit team considered the University's development of the Link Tutor role

and the establishment of the Link Tutor' Forum to share good practice across the institution to be a feature good practice.

61 The audit team confirmed that the University's arrangements for the approval, monitoring and review of programmes offered by partners are essentially the same as those for University based programmes. These are governed by a formal course agreement and involve the approval of partner institution's staff as teachers on the programme. The team confirmed that the arrangements for the scrutiny of collaborative programmes were robust and that they were scrutinised in detail.

62 The audit team confirmed that the arrangements for securing the academic standards of University awards apply equally to collaborative programmes. Established University and Institute procedures are applied to programme approval, monitoring and review and the appointment of and responses to external examiners, irrespective of the location of delivery. On the whole, external examiners acknowledged collaborative activity in their reporting, and often offered specific comments on matters relating to the partners. The team though would encourage the University to persuade all external examiners involved with collaborative provision to comment specifically on consistent or variable performances between students at specific partners and those at the University. The team noted the University's efforts to secure a greater standardization of the arrangements for all examination boards, irrespective of delivery site.

63 The audit team confirmed that formal certificates and transcripts are signed at appropriate senior levels within the University, and conformed with the expectations of the *Code of Practice, Section 2; Collaborative provision and flexible and distributed learning*, clearly indicating the award, the University as the awarding body and the identity of the teaching institution.

64 Whilst course agreements with partners set out the extent to which students at partner institutions have access to University resources and services, the expectation is that the partner is responsible for the provision of learning resources and personal and academic guidance. The Link Tutor has primary responsibility for advising the relevant Institute that student support arrangements at the partner continues to be appropriate and the audit team noted examples where the intervention of the Link Tutor had resolved issues in this regard. Students at partner colleges confirmed that they had full access to University facilities, electronically (especially via SOLE) and otherwise, and that their induction related to both college and University facilities and processes. Additionally, students at partner Colleges have the same representational arrangements as those studying at the Worcester campus. Some students, however, indicated that they had been unaware at the outset of their course of the need to meet certain levels of pass and /or be interviewed before progressing to a University top-up programme. This finding contributed to the team's advisable recommendation around the preparation and progression of Foundation Degree students to top-up programmes (paragraph 22).

65 Staff teaching on University courses in partner institutions are required to be approved as Registered Lecturers of the University. The approval criteria have recently been revised in the light of the developing UK Professional Standards Framework and following consultation with University and partner staff. They include the requirement to hold (or to follow a course leading to) an appropriate teaching qualification, and to demonstrate engagement with relevant research and/or scholarly activity. Applications for Registered Lecturer status are considered by the relevant Head of Institute (or nominee). The team identified, as an example of good practice, the widespread consultation with partner organisations on the revised criteria for appointment to Registered Lecturer status. This status offers partner institution staff the opportunity to access the University's staff

development activities, including a discount for registering on University courses and free participation in the Postgraduate Certificate Learning and Teaching in HE.

66 The arrangements for the management of standards and learning opportunities for collaborative courses adhere to the various elements of the Academic Infrastructure through the direct application of the University's quality assurance arrangements for all programmes and through the additional arrangements in place for the approval, monitoring and review of partnerships. The audit team confirms that the arrangements adhere closely the *Code of Practice, Section 2* and noted the role of the Head of Collaborative Programmes in advising partners of the key elements of the *Code of Practice* to provide the University with additional assurance of its alignment with the various elements of the Academic Infrastructure and on the use of external examiners in partnership programmes.

67 The audit team concluded that the University's arrangements for the management of quality and standards of collaborative provision are appropriate and effective, and reflect the expectations of the *Code of Practice, Section 2; Collaborative provision and flexible and distributed learning*. Furthermore, the team considered the inclusive approach of the University in working with its collaborative partners to be a feature of good practice.

Section 6: Institutional arrangements for postgraduate research students

68 The University has recently been granted research degree awarding powers which came into effect from September 2010. Before this the University was operating research degree programmes accredited by Coventry University. The University has research degree programmes leading to the awards of MPhil and PhD. Following the granting of research degree awarding powers, the University is looking to expand further its research degree portfolio to include the MRes and professional doctorates in certain disciplines.

69 The Research Degrees Board is responsible, on behalf of Academic Board, for the quality of standards and learning opportunities for research degrees. It also monitors the overall success rate of research degree programmes which, because of the small number of students, is currently managed relatively informally. The audit team suggests that the University may need to consider a more formal approach to monitoring success rates if student numbers increase.

70 The Graduate Research School is responsible for the detailed management of research degree programmes and the general support of research students. There is also a Research and Knowledge Transfer Committee which is in charge of matters relating to research and produces the University's Research and Knowledge Transfer Strategy. Each Institute also has its own Research and Knowledge Transfer Committee.

71 A Regulatory Framework document defines a range of procedures and policies governing the admission and registration of students, supervisory arrangements and examinations. The audit team found this framework document to be clear and comprehensive. The Graduate Research School also issues a Handbook for students and supervisors that includes a Code of Practice on the responsibilities for both research students and their supervisors. The audit team also found this handbook to be clear and to provide useful advice. The handbook is supplemented by further information published electronically along with all the forms needed by research students during their programme.

72 The University's Research and Knowledge Transfer Strategy sets out a range of objectives aimed at strengthening the research environment along with plans to achieve

them. The Strategy includes objectives to increase the visible research activity of staff which is mirrored in several Institute strategies. The audit team found that staff were aware of the targets and that systematic efforts were being made to measure progress towards these.

73 Information and Learning Services has a dedicated service aimed at research students as part of their overall support package. Overall, research students were satisfied with the library and computing resources as well as the general support available to them.

74 The University website provides information to prospective research students on the application process. Suitable candidates are interviewed by a panel of at least two members of staff who have to undergo training. Final registration takes place when the student's research proposal is approved by the Research Degrees Board. Induction consists of a series of workshops in the first week followed by a further programme after registration. The audit team heard from students and staff that these arrangements operated effectively.

75 All students have a supervisory team comprising at least two members of staff, one of whom takes primary responsibility. The team as a whole must have previously supervised at least three students. The proposed arrangements for each individual student, along with other aspects of the research environment, are scrutinised for their suitability both by the relevant Research and Knowledge Transfer Committee and the Research Degrees Board. The audit team considered that it may be difficult to sustain this approach if the number of research students increases.

76 The only formal progress point during research degree programmes is the upgrading process from MPhil to PhD which involves assessment by a panel with an independent chair. All students are required to participate in an annual monitoring process which involves both the student and supervisor submitting a report to the Research Degrees Board. These reports were found to give a full account of the student's progress. The audit team found these arrangements to work satisfactorily but suggests that the process is kept under review if there is a growth in student numbers.

77 Students are advised to keep a formal record of all supervisory meetings but in fact the audit team heard that students did not always keep records. University staff confirmed that this practice was not compulsory. As both students and supervisors are required to provide details of supervisory meetings during the annual monitoring process, the team suggests that the University may like to consider whether record keeping should be made compulsory.

78 The Graduate Research School provides a Research Training Programme which includes two compulsory modules. A further optional module can lead students to the award of a Postgraduate Certificate in Research Methods. The programme is supported by a comprehensive course handbook. The programme underwent periodic review in 2009 and has been followed up with appropriate actions.

79 New research students complete a formal Training Needs Analysis in consultation with their Director of Studies and this is reviewed on an annual basis. There are also opportunities for students to engage in PDP although this is optional. The audit team supports the University's review of both these processes with a view to clarifying and strengthening them.

80 The audit team heard in meetings with students that there was a range of opportunities to assist in teaching at undergraduate level. All the students who had been engaged in teaching confirmed that they had received appropriate training for the tasks they had undertaken.

81 Responsibility for proposing an examination panel of at least two examiners, one of whom must be external to the University, rests with the student's main supervisor. In addition, the Research Degrees Board appoints an independent chair for the viva voce examination after which the examiners present a joint report giving their decision. Appeals are allowed only on well-defined grounds and must be submitted and considered in accord with the general student academic appeals procedure. Complaints procedures are also detailed in the Handbook and on the SOLE web pages.

82 The audit team concluded that the arrangements for postgraduate research students met the expectations of the *Code of practice, Section 1: Postgraduate research programmes*. The team suggests the present arrangements will need to be kept under review if there are intentions to increase the number of research students.

Section 7: Published information

83 The University publishes a large amount of information including prospectuses, a Student Handbook and course guides. The departments that produce this published material are given the main responsibility for checking its accuracy and currency although some additional checking is provided centrally. The audit team found that there was a strong commitment to this responsibility in the Institutes. There are extra levels of scrutiny for checking the accuracy of information relating to collaborative provision, and these are set out in a University policy document, and the audit team found that partner institutions were well aware of their responsibilities.

84 Students that the audit team met generally confirmed that the information they had received was accurate and useful although some students did express the opinion that the rules for progression from FDs and HNDs to Level 6 top-up programmes were not so clear. Students told the audit team that SOLE (the Student OnLine Environment) was particularly effective at providing them with the information they needed to know about their courses and were complementary about the ease of use of the system.

85 The audit team concluded that on the whole reliance could reasonably be placed on the accuracy and completeness of the information that the University publishes about the quality of its educational provision and the standards of its awards. There was just one exception around information on arrangements for students progressing from partner institutions to top-up programmes at the University.

Section 8: Features of good practice and recommendations

Features of good practice

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

- the comprehensiveness of the Student OnLine Environment (SOLE), which is tailored to the individual (paragraph 28)
- the Student Academic Representatives (StARs) initiative, which enhances student representation (paragraph 35)
- the wide range of opportunities afforded to students to enhance their employability (paragraph 40)

Institutional audit: report

- the proactive approach which supports the student experience for disabled students (paragraph 43)
- the institution's commitment to enhancement, exemplified by its reflective and self-critical approach (paragraph 53)
- development of the Link Tutor role and establishment of a Link Tutor Forum to share good practice across the institution (60)
- the inclusive approach of the university in working with its collaborative partners (paragraph 67).

Recommendations for action

87 Recommendations for action that is advisable:

- to review the course approval process to ensure that all approval decisions are fully informed and have appropriate externality (paragraphs 12 to 14)
- to ensure that external examiners and the Chief External Examiners comply fully with, and have sufficient data to fulfil, the requirements of their roles (paragraph 20)
- to review the University's admission requirements, and preparation of students, for entry to top-up programmes in line with the QAA Code of Practice and to ensure that these are clearly communicated to current and prospective students, and ensure that all Foundation Degrees programmes specify top-up programmes and bridging provision at the point of approval (paragraphs 22, 64 and 84).

88 Recommendations for action that is desirable:

- to include in the future review of the new periodic review process the adequacy of reporting on the effect of changes to programmes, including those which are cumulative (paragraph 16)
- to evaluate the effectiveness of the operation of the new arrangements for partnership monitoring and review (paragraph 59).

Appendix

[INSERT: official name of institute]'s response to the Institutional audit report

[Text – amount will vary between reports]

RG XXXa [month/year]

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