

**University of Keele**

---

MAY 2004

Institutional audit

*Published by*  
Quality Assurance Agency for Higher Education  
Southgate House  
Southgate Street  
Gloucester GL1 1UB

Tel 01452 557000  
Fax 01452 557070  
Email [comms@qaa.ac.uk](mailto:comms@qaa.ac.uk)  
Web [www.qaa.ac.uk](http://www.qaa.ac.uk)

© Quality Assurance Agency for Higher Education 2004

ISBN 1 84482 164 1

All the Agency's publications are available on our web site [www.qaa.ac.uk](http://www.qaa.ac.uk)

*Printed copies are available from:*  
Linney Direct  
Adamsway  
Mansfield  
Nottinghamshire NG18 4FN

Tel 01623 450788  
Fax 01623 450629  
Email [qaa@linneydirect.com](mailto:qaa@linneydirect.com)

## 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.

## Contents

<b>Summary</b>	<b>1</b>		
Introduction	1	Assurance of the quality of teaching delivered through distributed and distance methods	17
Outcome of the audit	1	Learning support resources	18
Features of good practice	1	Academic guidance, support and supervision	18
Recommendations for action	1	Personal support and guidance	20
Summary outcomes of discipline audit trails	2		
National reference points	2	<b>Section 3: The audit investigations: discipline audit trails</b>	<b>20</b>
<b>Main report</b>	<b>4</b>	<b>Section 4: The audit investigations: published information</b>	<b>26</b>
<b>Section 1: Introduction: University of Keele</b>	<b>4</b>	The students' experience of published information and other information available to them	26
The University and its mission	4	Reliability, accuracy and completeness of published information	27
Collaborative provision	5		
Background information	5	<b>Findings</b>	<b>30</b>
The audit process	6	The effectiveness of institutional procedures for assuring the quality of programmes	30
Developments since the previous academic quality audit	6	The effectiveness of institutional procedures for securing the standards of awards	31
<b>Section 2: The audit investigations: institutional processes</b>	<b>7</b>	The effectiveness of institutional procedures for supporting learning	31
The University's view as expressed in the SED	7	Outcomes of discipline audit trails:	32
The University's framework for managing quality and standards, including collaborative provision	7	The use made by the institution of the Academic Infrastructure	34
The University's intentions for the enhancement of quality and standards	9	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	34
External participation in internal review processes	12	Commentary on the institution's intentions for the enhancement of quality and standards	35
External examiners and their reports	12	Reliability of information	35
External reference points	13	Features of good practice	36
Programme-level review and accreditation by external agencies	14	Recommendations for action	36
Student representation at operational and institutional level	15		
Feedback from students, graduates and employers	15	<b>Appendix</b>	<b>37</b>
Progression and completion statistics	16	The University of Keele's response to the audit report	37
Assurance of the quality of teaching staff, appointment, appraisal and reward	16		
Assurance of the quality of teaching through staff support and development	17		



## Summary

### Introduction

A team of auditors from the Quality Assurance Agency for Higher Education (the Agency) visited the University of Keele (the University) from 10 to 14 May 2004 to carry out an institutional audit. The purpose of the audit was to provide public information on the quality of the opportunities available to students and on the academic standards of the awards that the University offers.

To arrive at its conclusions the 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 opportunities 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 of the University is that:

- broad confidence can be placed in the soundness of the University's present and likely future management of the quality of its programmes and the academic standards of its awards. In coming to this judgement, the audit team took note of the KEELE2006 change initiative which, while in the early days of development, should ensure that effective structures are put in place to enable the University to exercise appropriate oversight of quality and standards at an institutional level in the future.

### Features of good practice

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

- the internal quality audit process;
- the thorough consideration of external examiner reports at institutional level;

- the promotion opportunities to the title of Chair on the basis of excellence in teaching and organisational and managerial activities;
- the support for teaching and professional development provided for graduate teaching assistants; and
- the wide range of student support services provided by the University.

### 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. The University is advised to:

- use the opportunity provided by KEELE2006 to reflect on the effectiveness of the structures it has in place to ensure that it is able to exercise appropriate oversight of quality and standards at an institutional level in the future. As part of this process, the University is advised to establish formal reporting relationships between appropriate departmental/school committees and key central committees responsible for matters of quality assurance and enhancement, for example, the Quality Assurance Committee, Academic Review Committee and the University Learning and Teaching Committee in the current structure;
- strengthen the institutional oversight of all existing collaborative provision, including that which is currently being phased out; and
- review the annual monitoring review process to ensure that the University obtains sufficient qualitative and quantitative information to enable it to exercise institutional oversight.

It would be desirable for the University to:

- consider establishing criteria for the appointment of external members in course approval and monitoring processes;
- consider formulating a policy that codifies the involvement of external examiners in the modification of programmes and modules;
- continue its support for staff working at module level in the development of module outlines expressing intended learning outcomes;
- review its student representation and induction arrangements for part-time students to ensure that such students are not disadvantaged;
- consider the development of internal benchmarks to measure student progress at both module and programme level;

- provide a consolidated, authoritative and accessible single reference point for both University-wide and course-specific regulations; and
- continue to keep under review the range of support services (social, pastoral, language and academic) available for international students to ensure the support of current international students and the prospectively larger numbers anticipated as part of KEELE2006.

### **Summary outcomes of discipline audit trails**

The audit team also looked in some detail at several individual programmes in the three discipline areas of history, management and mathematics 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 the team spoke to staff and students. As well as confirming the overall confidence statement given above, the team was able to state that the standard of student achievement in the programmes was appropriate to the title of the awards and their location within *The framework for higher education qualifications in England, Wales and Northern Ireland* and that the quality of learning opportunities available to students was, in each case, suitable.

### **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 the Agency 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 audit found that the University has sought to engage with all aspects of the Academic Infrastructure.

From 2004, the institutional audit process includes a check on the reliability of the information about academic quality and standards that institutions will be required to publish, as listed in the Higher Education Funding Council for England's (HEFCE) document, *Information on quality and standards in higher education (HEFCE 02/15)*, and in document *HEFCE 03/51, Information on quality and standards in higher education: Final guidance*. The audit found that the University was alert to the requirements of, and taking steps to fulfil its responsibilities with regard to, *HEFCE 02/15* and *HEFCE 03/51* and that the information published by the University about the quality of its programmes and the standards of its awards was reliable.

## **Main report**



## Main report

1 An institutional audit of the University of Keele (the University) was undertaken during the period 10 to 14 May 2004. The purpose of the audit was to provide public information on the quality of the University's programmes of study and on the discharge of its responsibility as an awarding body.

2 The audit was carried out using a process developed by the Quality Assurance Agency for Higher Education (the Agency) 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 the Agency at the request of UUK and SCOP, and universal subject review, undertaken by the Agency on behalf of HEFCE, as part of the latter's statutory responsibility for assessing the quality of education that it funds.

3 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 an example of institutional processes at work at the level of the programme, through discipline audit trails (DATs), 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 provision and collaborative arrangements leading to its awards.

## Section 1: Introduction: University of Keele

### The University and its mission

4 The University was founded as the University College of North Staffordshire in 1949, sponsored by the Universities of Birmingham, Manchester and Oxford, and building on a strong tradition of adult education in the region. It received its Charter as a university in 1962. Built in the grounds of a country estate two miles to the west of Newcastle-under-Lyme, the University was designed to be a small campus university in which virtually all staff and students lived on the same site in order to create an integrated intellectual and social community.

5 The University has full degree-awarding powers at undergraduate and postgraduate levels. The self-evaluation document (SED) stated that the early focus on undergraduate education has been supplemented by sustained growth and development in postgraduate education, which continues to be seen as a priority for growth 'on the basis of the fostering of strengths in this area'.

6 The most significant change in educational provision since the founding of the University has been Keele's expansion into health and health-related areas in 1978. In early 2000, the University moved into undergraduate medical education in collaboration with the University of Manchester, although this arrangement will be phased out between 2007 and 2012 as the Keele curriculum is introduced. Currently, the Manchester course is quality assured by the University of Manchester, with Keele representatives serving as members of all relevant Manchester committees.

7 As at December 2003, the total undergraduate full-time equivalent (FTE) student population for the 2003-04 academic year was 4,361, while the taught postgraduate and research postgraduate FTE student population numbered 1,170 and 283 respectively. Of the total FTE students, 20 per cent are taught postgraduates and 5 per cent are research postgraduates. The total volume of postgraduates has remained largely the same over the last three years.

8 Following a review of its academic departmental structure in 1998, the University is currently organised into 22 schools and departments, grouped in four faculties: Health; Humanities; Natural Sciences; and Social Sciences. Two thirds of the taught postgraduate students are in the Faculty of Social Sciences with the remainder being spread evenly across the other three faculties; 44 per cent of the total research postgraduates are also in the Faculty of Social Sciences, 26 per cent in the Faculty of Natural Sciences and the remainder spread equally between Humanities and Health.

9 The University remains committed to providing breadth of education and experience within a strong community and has maintained a concentration of dual honours (two principal subject) programmes but it has also introduced a range of single honours programmes. The foundation year was removed as a requirement for all students in 1973 and as an option in 1999-2000, and cross-disciplinary subsidiary subjects were discontinued in 2003. The SED stated that the values associated with that provision, however, have been retained in a new form oriented towards the acquisition of

employability skills, through the introduction of the complementary studies programme in 2003-04 which enables students of the University to extend their degree studies beyond their main subjects.

10 The University has a strong tradition of adult education and offers a programme of day and evening courses, through its Centre for Continuing and Professional Education (CPE), at the University and at up to 40 venues in the region. This programme constitutes an important aspect of the University's interaction with its wider community. In recent years, the integration of some courses offered through the Centre and provision as part of the complementary studies programme is underway, reflecting the interest of the University's students in some of the courses offered by the Centre. The University is also actively engaged in widening participation and has developed a range of initiatives to support this area of its work, including summer schools, compact schemes, taster courses, mentoring programmes, ambassador schemes, studentships, and master classes. Its achievements in relation to widening participation have been recognised recently by the award of the Higher Education Information Services Trust (HEIST) Gold Prize in 2002.

11 The University is currently undergoing a programme of change and development denoted KEELE2006. Its objective is to address the rapid rate of change currently taking place in the higher education market place, and to position the University optimally in 2006 with regard to its core businesses, its traditional strengths, and current and prospective markets to ensure its survival and growth over a 10-year time horizon. Following a consultation exercise with staff and students, agreement on the way forward is expected by July 2004, when a formal plan and the proposed timetable for implementation will be submitted to establish named research institutes and new academic structures. The University is also involved in developing proposals for a University of the Marches, a joint venture with the University of Gloucestershire involving collaboration with Harper Adams University College.

12 The University's mission 'is to be recognised as the UK's leading example of an open, integrated intellectual community', which:

- treats education and research as of equal importance;
- pursues high quality in educational programmes, both undergraduate and postgraduate;
- supports research which is of national and international significance;
- serves both regional and national needs.

## Collaborative provision

13 The University offers one masters level programme in its School of Life Sciences in conjunction with the Universities of Manchester and Salford. It has also established a collaborative link with Marie Curie Education (Liverpool) through the University's Centre for Professional Ethics. The University has decided to discontinue its overseas collaborative links with partners in Malaysia, Mauritius and the Netherlands, although some students have still to complete their studies. It has retained one overseas franchise link with the Informatics Institute of Technology (IIT) to deliver a masters programme in Information Technology in Sri Lanka.

## Background information

14 The published information available for this audit included:

- the report of a quality audit of the University (September 2000);
- reports of reviews by the Agency of provision at subject level, published since 1997;
- information on the Higher Education Statistics Agency (HESA), UCAS, Higher Education and Research Opportunities in the United Kingdom, HEFCE and the University's web sites.

15 In addition, unpublished reports relating to two developmental engagements conducted in 2003 were made available to the audit team.

16 The University initially provided the Agency with:

- an institutional SED;
- the University Calendar (2003-04);
- the Undergraduate Prospectus (2004);
- the Postgraduate Study Guide (2004-05);
- the CPE Brochure (2003-04);
- the Strategic Plan (2001-02 to 2005-06);
- two KEELE2006 consultation papers;
- three discipline self-evaluation documents (DSEDs) for the disciplines selected for DATs;
- access to the intranet.

17 During the briefing and audit visits, the audit team was given ready access to a range of the University's internal documents including a full set of all university regulations, committee minutes and departmental committee minutes, handbooks and sample course work for the three DATs. The team was grateful for the prompt and helpful responses to its requests for information.

## The audit process

18 Following a preliminary meeting at the University in September 2003, the Agency confirmed that three DATs would be conducted during the audit visit. On the basis of the SED and other published information, the audit team confirmed that the DATs would focus on history; management; and mathematics. The Agency received the institutional SED and supporting documentation in January 2004 and the DSEDs, accompanied by programme specifications, in March 2004. The SED and the DSEDs were written specifically for the audit with the latter including some information from internal reviews.

19 The audit team visited the University on 6 and 7 April 2004 for the purpose of exploring with student representatives, senior members of staff and the Vice-Chancellor, matters relating to the management of quality and standards raised by the SED and other documentation provided for the team. At the end of the briefing visit a programme of meetings was developed by the team and agreed with the University.

20 At the preliminary visit for the audit, students of the University were invited, through the Keele University Students' Union (KUSU), 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 standard of awards. The Agency received a students' written submission (SWS) from KUSU in January 2004. The document, which was not confidential, had been compiled on the basis of a broad cross section of student opinion collected by student officers and representatives, involving both quantitative and qualitative research methods. The audit team is grateful to the students for preparing this document to support the audit.

21 The audit visit took place from 10 to 14 May 2004 and included further meetings with staff and students of the University, both at central level and in relation to the selected DATs. The audit team comprised Mr P Devlin, Professor R Earnshaw, Dr P Hughes, Professor D Lockton, Dr K Tiller, auditors, and Miss D Cooper, audit secretary. The audit was coordinated for the Agency by Dr I Ainsworth, Assistant Director, Reviews Group.

## Developments since the previous academic quality audit

22 The University was last subject to an academic quality audit by the Agency in 2000 which gave rise to commendations relating to the University's

internal quality audit process; the role of departmental coordinators in supporting the maintenance of quality and standards and their relationship with the central administration of the University; the management of changes in a number of departments; the commissioning of a special inquiry into the workings of examination boards to inform the further development of assessment and progression; the thorough processing and follow up of external examiners' reports; new staff induction and training; dissemination of policy documents; and the work of staff-student liaison committees (SSLCs).

23 The quality audit identified a need for the University to review its institutional level policies and processes relating to overseas collaborative provision and to accelerate its schedule for the internal quality audit of each of its collaborative programmes. In addition, the audit report advised the University to consider clarifying the respective responsibilities of its Academic Review Committee (ARC), Academic Review Standing Committee (ARSC) and Quality Assurance Committee (QAC); reviewing the arrangements for the collection of annual monitoring information; reviewing committee arrangements in schools; assuring itself of the effectiveness of its quality assurance arrangements for CPE provision; developing policies and procedures to ensure consistency in the quality and standards of taught postgraduate courses by publication of a University-wide postgraduate handbook; reviewing its collaborative arrangements in the interests of consistency; archiving quality and standards documentation; developing a comprehensive quality enhancement policy; widening discussion of programme specifications and subject benchmarking; improving procedures for postgraduate research student recruitment and registration; improving the conduct of boards of examiners; involving Keele Information Services (KIS) and support staff earlier in the quality assurance processes; framing a policy on requirements for student support at departmental level; and developing procedures for requiring an operating statement for staff development at faculty and departmental level. The University was also invited to consider the desirability of developing guidelines on criteria for approving new modules and other variants and modifications in collaborative arrangements; optimising its space strategy to support the Learning and Teaching Committee (LTC) in the allocation of accommodation; and preserving the roles of deans as facilitators.

24 The University has addressed all the above issues in its SED. The Senate resolved at its meeting on 31 May 2001 that, as a matter of strategy, the University should not be involved in overseas collaborative

provision, with the exception of the link with IIT in Sri Lanka. The University has also reviewed the respective responsibilities of ARC, ARSC and QAC. ARSC was discontinued in 2002, with alternative provision being made for its function. QAC normally reports directly to Senate, but with provision to refer to ARC any relevant matters. The University has recently established a Quality Enhancement Committee (QEC), a joint committee of QAC and the LTC. The University has created a postgraduate division in the Department of Academic Affairs (DAA) and introduced a code of practice on postgraduate research degrees. The audit team explored these and other issues arising from the previous quality audit report in the course of the audit and its findings are recorded within the relevant sections of the main report.

25 Since the last audit, eight subject reviews have taken place at the University. In accordance with the University's standard procedures, a departmental response to the review reports has been formally considered by QAC. In the same period, the University has conducted 15 internal quality audits. While it appeared to the audit team that, in some areas, action taken by the University in response to external review was timely and appropriate (for example, the decision to withdraw from overseas collaborative provision with one exception), in other areas this was not the case. For example, the SED stated that a priority for 2003-04 would be the production of a postgraduate taught student handbook and also acknowledged that the full implementation of programme specifications was not, until recently, accorded appropriate priority.

## **Section 2: The audit investigations: institutional processes**

### **The University's view as expressed in the SED**

26 The University's framework for managing quality and standards has been strategically developed since 2001 and is embodied in a range of documents, including the Academic Quality and Standards Manual (AQSM), the Quality Policy, handbooks, codes of practice and relevant strategies and policies. The SED indicated that the AQSM, revised academic regulations, the procedure for considering external examiners' reports and the University Examinations Boards, together constituted the core of the quality and standards framework.

27 The SED cited the following perceived strengths in relation to quality, standards and regulation: the introduction of new University examination board arrangements intended to strengthen institutional

responsibility for quality and standards; the further strengthening of already robust course development procedures; and the way in which the University considers and responds to external review outcomes. The SED made reference to work in progress in this area, which included: improved institutional induction of, and response to, external examiners; the implementation of further quality assurance provisions in its CPE programme; the issue of enhanced guidance, particularly with regard to linking intended learning outcomes (ILOs) and assessment, to course development subcommittees; and revised methods used by the University to assess the resourcing and sustainability of courses within its course development procedures. The SED acknowledged that the University faced a challenge insofar as the dissemination of good practice and follow-up activity arising from external reviews were concerned and that further improvement was required in these areas.

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

28 The Quality Policy establishes the principles of quality assurance at the University and defines the Quality Assurance Framework as 'essentially a structured manifestation of good academic practice. It comprises the core quality assurance and control procedures which promote quality enhancement and the maintenance of academic standards'. The University's AQSM contains the policies and procedures applying to quality and standards at institutional and departmental level. Adherence to the processes in the AQSM is monitored through the annual monitoring visits (AMVs) (see paragraph 48 below).

29 The two major University committees for the management of quality and standards are the QAC and ARC. Both committees are chaired by a pro vice-chancellor and membership includes representatives from faculties and KUSU. ARC is a committee of Senate. At the time of the visit, constitutionally QAC was a subcommittee of ARC but had been reporting direct to Senate since 2001. The audit team was told that the University intended to clarify the constitutional relationship of the committees and that, in June 2004, it was intended to make QAC a subcommittee of Senate.

30 QAC is the central body concerned with matters of quality. The audit team was told that QAC takes an overview of quality assurance processes and their effectiveness. The SED gave examples of issues considered by QAC that included: the outcomes of internal and external monitoring and reviews; the scrutiny of, and response to, external examiner

reports; and major issues of policy and practice. In addition, QAC is empowered to investigate specific issues of concern affecting quality and standards and may refer to ARC items of business which, in its opinion, fall within the terms of reference of ARC. The team heard that there is a close relationship between QAC and the University LTC through their joint formation of a new QEC. At the time of the visit QEC had recently met for the first time.

31 ARC is the central body concerned with matters of standards and academic policy. It is responsible for the approval of all new and major revisions of programmes and receives reports from its subcommittees: faculty course development subcommittees (CDSCs), the University CDSC, the University LTC, Research Degrees Committee, and the Postgraduate Development Committee. In addition, there is a standards task force, formed in autumn 2002, which reports to ARC.

32 In faculties, deans chair CDSCs which include the University's Director of Quality Assurance as part of their membership. Proposals from schools or departments come to the faculty CDSC. In addition, there is a University CDSC which, as a subcommittee of ARC, is responsible for the complementary studies programme. At departmental/school level, as set out in the AQSM, there are LTCs, SSLCs, course committees and departmental/school meetings. There are reporting lines between the departmental committees; for example, course committees must present an annual review report and a triennial review report to the departmental LTC and report on the actions taken in response to student evaluation of modules to the departmental SSLC. Departmental committees do not formally report to central committees, for example, ARC, QAC, LTC. However, there are faculty representatives on both ARC and the University LTC and the Chair of the University LTC is also a member of ARC. The audit team was told this representation ensured the flow of information between departments and the centre. The team was also told that LTC use the departmental LTCs 'as a sounding board for new developments'.

33 From the evidence available to the audit team it did not appear that the cross-representation on committees always enabled a flow of information from the central committees to faculties and departments, and vice versa. Nor was it evident to the team, in all cases, that the departmental LTCs and other committees were systematically receiving the information they were required to receive, as stated in the AQSM. The team noted that there are reporting lines from faculty CDSCs to ARC; the new University Student Academic Issues Sub-Committee (a

subcommittee of QAC) will discuss issues raised in departmental SSLCs; and there is rigorous consideration of external examiner reports by QAC (see paragraph 60 below). It considered, however, that the lack of formal reporting lines from the school/departmental committees into University committees means that issues arising out of annual and triennial reviews may not be identified by the University until internal quality audit (IQA) (see paragraph 51 below) which occurs approximately every five years. The team did not consider that the AMV (see paragraph 49 below) gave the University sufficient qualitative and quantitative data to enable it to always maintain sufficient oversight of quality and standards issues arising in departments and schools.

34 The audit team took note of the changes foreshadowed by KEELE2006 which, while in the early days of development, should ensure that appropriate structures are put in place at an institutional level in the future. The team would advise the University to use the opportunity provided by KEELE2006 to reflect on the effectiveness of the structures it has in place to ensure that it is able to exercise appropriate oversight of quality and standards at an institutional level in the future. As part of this process, the University is advised to establish formal reporting relationships between appropriate departmental/school committees and key central committees responsible for matters of quality assurance and enhancement, for example QAC, ARC and the University LTC in the current structure. It should also keep under review the respective roles of these major committees and those of the new bodies which the team heard had recently begun or would soon begin to operate.

35 The SED indicated that the University had recently introduced revised academic regulations 'together with development of interpretation, application and guidance for staff'. During the academic year 2003-04 course regulations were approved for all undergraduate and postgraduate programmes. With regard to assessment, the Quality Assurance Office has issued new guidance to departments on the submission of module proposals to CDSCs, including particular reference to the links between ILOs and assessment. Within the context of the University's learning and teaching strategy, a working party on assessment has been convened to consider *inter alia* the links between assessment and ILOs and staff development sessions have also been provided. The audit team found that the implementation of marking criteria varied across programmes. While the provision of such criteria is not required by the University, the team noted that ARC's standards task force is working to produce institutional marking criteria and it would encourage

the early implementation of institutional marking criteria in view of the variability identified.

#### **Collaborative provision**

36 Following the recommendations of the last Agency quality audit report (2000) the University reviewed its provision and approved a code of practice on collaborative provision, based on the *Code of practice for the assurance of academic quality and standards in higher education (Code of practice): Section 2: Collaborative provision*, published by the Agency. Senate also endorsed a strategy of discontinuation of overseas collaborative provision, subject to one exception. The audit team was told that the sole exception, a link with IIT in Sri Lanka, was continued because the University felt that the existing arrangements were sound and, because of the profile of IIT, the University wished to maintain its association. The University will consider the performance of this link prior to a decision on renewal of the programme contract from 2004. The University has mapped the processes involved in the quality assurance of the IIT provision against its own code of practice and found them to be adherent. This mapping explicitly provides that the same quality assurance processes and procedures that apply to internal provision also apply to IIT.

37 As a result of the decision to discontinue overseas collaboration, the University has programmes in Malaysia, Mauritius and the Netherlands which are being phased out as existing cohorts complete, and an MBA in Malaysia where the cohort completed in May 2004. While QAC receives annual reports from the provision running in IIT, the audit team could find no similar reports to QAC on the operation of the MBA in Malaysia (which had now ceased), or in the Netherlands where there were still some continuing students, or on the MSC/PgDip in Information Technology in Malaysia and Mauritius which still have continuing students.

38 The University has one UK association which, following the review referred to in paragraph 36 above, it considers to be collaborative within the terms of the *Code of practice*. This is an MA programme in Cancer and Palliative Care delivered in conjunction with Marie Curie Education (Liverpool). The SED stated that since its last renewal, the programme has been conducted within the definitions and provisions of the University's Code. The initial collaboration was established in 1994 and there was an institutional validation visit in January 2002, in preparation for the renewal of the collaborative contract. On the evidence available to the audit team, the validation and subsequent memorandum of cooperation showed adherence to the *Code of practice*. The team saw the first annual

report made on this basis, for 2002-03, which was to be considered by QAC after the audit visit.

39 It appeared to the audit team that while the University was well informed about its provision in Sri Lanka, it was less well informed about other overseas provision. The team would advise the University to strengthen its oversight of all existing collaborative provision, including that which is currently being phased out.

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

40 The University has identified opportunities to enhance quality and standards in the following areas: the quality and standards framework; the quality assurance processes; and the integration of quality assurance with other University strategies. The SED cited the work undertaken by the ARC's standards task force, with regard to the degree classification algorithm and its work on a code of practice for external examiners and related matters, as examples of the University's commitment to enhancement. Other examples mentioned in the SED included: the implementation of a new Accreditation of Prior (Experiential) Learning policy; the further clarification of the relationship between QAC and ARC; the continuing development of the processes of University Examination Boards, and the introduction of course regulations to complement revised academic regulations, *inter alia*.

41 The SED also referred to the development of a student retention strategy which sought to build on the recent appointment of learning and teaching officers in some academic departments, enhanced resourcing of the central learning support division and the re-constitution of the Student Retention Group as an advisory body to a new pro vice-chancellor for staff and students. The SED indicated that the latter appointment offered KUSU a designated point of contact in the University's senior management team. The audit team noted that the University planned to develop a student retention strategy over summer 2004 with a view to the strategy being discussed by the Student Retention Group in autumn 2004.

42 The quality and assurance processes are addressing the introduction of a data management system through a new student course information management system (SCIMS), a review of course development procedures, and improvement of procedures for course review at institutional and departmental levels. The SED indicated that the integration of quality assurance with other university strategies is manifest in the University's learning and

teaching strategy; the establishment of its new QEC, a subcommittee of QAC and the LTC; the linking of the staff development strategy to quality assurance and enhancement; the development of a new widening participation strategy linked to quality assurance; and improved links to human resource, equal opportunity, and race equality strategies.

43 The SED indicated measures taken and proposed by the University to enhance quality assurance for continuing education students. The audit team learned that the University is currently reviewing its CPE provision and noted the hope expressed in the history DSED that the review should 'reintroduce a greater degree of academic control and direction'.

44 The SED acknowledged that the University needed to continue to improve its mechanisms for the dissemination of good practice and the audit team would agree with this view. In this context, the team noted that the new QEC had held its first meeting shortly before the audit and that this Committee was expected to provide a useful integrating mechanism, linking the work of the University LTC and the QAC. It further noted the introduction of course regulations to complement the revised academic regulations. The team considered that the University's plans for enhancement were appropriate and timely, in particular, the review of course development procedures and the improvement of procedures for course review at institutional level. However, at the time of the audit, many of the revisions had yet to be implemented and the team was, therefore, unable to comment on their effectiveness.

#### **Programme approval**

45 The process for programme approval is clearly stated in the AQSM and involves five stages. New course proposals, submitted by departments or schools, are subject to approval by the Deans' Group (a subgroup of the Vice-Chancellor's Committee chaired by the Deputy Vice-Chancellor). The Deans' Group ensures strategic fit with the University strategy, potential student demand and an initial assessment of viability. The detailed proposal, including alignment with any subject benchmarks, professional and statutory body (PSB) requirements and *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ), is then considered by the relevant CDSC, chaired by a dean and, if approved, it is subject to further internal and external consultation. External consultation involves three external referees who are approved by the relevant dean. The AQSM states that a proposal cannot go forward to the next stage without at least one external referee supporting the

proposal although, in the course approvals seen by the audit team, all had the approval of three referees. External referees, among other things, confirm adherence to the FHEQ and any relevant subject benchmarks. Once external consultation is completed, all the documentation is sent for consideration by ARC which can approve the proposal or refer it back. After completion of the process, the course team produces programme specifications and course regulations. The team noted that a market research and intelligence officer was appointed in 2002-03 to enhance the strategic basis of new course proposals.

46 The SED stated that, while the procedures have generally worked well, a number of improvements to the procedures are currently being considered, including the integration of programme specifications into the initial stage so as to clarify links between course and module aims and ILOs, assessment strategy and methods, and their relationship to the learning and teaching of skills. The SED also indicated that the procedures are supplemented by the monitoring, through QAC, of the first one to two years of the experience of a new course. The SED further stated, however, that this process is to be revised to ensure that appropriate information is sought and analysed and that, in the future, it is directed to more appropriate bodies in connection with the assessment of course viability.

At the time of the visit the audit team was shown the revised procedures demonstrating, in some cases, additional consideration by the Resources Sub-Group (a subgroup of the Vice-Chancellor's Committee) to ensure course viability and the input of adequate resources.

#### **Annual monitoring**

47 The University requires students to complete module evaluation questionnaires for all modules running for the first or only time and the AQSM states that 'every module should be evaluated at least once every three years'. Modules that have been changed are also evaluated. An evaluative summary of the responses is incorporated into the annual module report produced by the module staff for the relevant departmental/school committees. A report on the overall outcome of student evaluation for each programme should be made at least annually to the relevant course committee discussing the issues raised. Course committees should report their consideration of the outcomes of student module evaluation to the departmental LTC and reports, including the departmental/school response, should also be made to the departmental/school SSLC. Responses from the SSLC are made to the course

committees which feed back to students. The minutes of all such meetings are kept for three years to be available for IQA (see paragraph 51 below).

48 Annual monitoring of programmes operates at two levels. First, each course must have a course committee which must undertake an annual review. Such review must include consideration of module reports; outcomes of student evaluations; relevant statistical information, including student progression and mark distribution; first-destination statistics; admissions data; external examiners' reports; IQA or external review reports; and include action to be taken. Such annual review reports are presented to the departmental/school LTC. Second, staff of the DAA, on behalf of QAC, conduct an AMV to confirm the Department's maintenance of its own records. The Director of Quality Assurance reports on all AMVs to QAC which notes where there is non-compliance. QAC may initiate urgent action where serious problems have been identified, including an immediate revisit or extraordinary IQA. The audit team heard that new guidance was being drafted for departments on how to conduct annual course review, both in terms of process and auditable outcome.

49 On the evidence available to the audit team, it appeared that annual monitoring and the subsequent reporting from such activity were not always happening within the terms described in the AQSM, nor were student evaluations consistently being presented to departmental SSLCs. Moreover, the team's view of the AMV was that it was monitoring adherence to process rather than obtaining information for the University with regard to the quality and standards of its programmes, a view confirmed by the University in discussion with the team. The team would advise the University to review the annual monitoring review process to ensure that the University obtains sufficient qualitative and quantitative information to enable it to exercise institutional oversight.

#### **Triennial course review**

50 Every three years the annual course review must be extended to include consideration of any substantial revision to a programme. In addition to items considered in annual review, the triennial review must consider: the reports of the previous two annual reviews; programme specifications and module aims and learning outcomes to ensure that they are still appropriate; the requirements of accrediting bodies, where applicable; and whether student achievement continues to meet the requirements of the FHEQ. The report should also include any action to be taken, including substantial revision if necessary. The triennial review report is

presented to the departmental LTC and, if substantial revision is proposed, the course committee must seek and take into account the views of all stakeholders including students, potential employers and external bodies. Any proposed changes to modules or programmes should be sent to the Quality Assurance Office. Normally such changes must be approved by ARC, although the Director of Academic Affairs has 'delegated authority to approve proposals for changes...within the normal university pattern and timescale' and reports them to the next meeting of the ARC. The Director of Academic Affairs may refer a proposal to the faculty CDSC which will make a recommendation to the ARC.

#### **Internal quality audit**

51 The University undertakes a more in-depth review of provision every five years through its IQA process, which was commended in the September 2000 quality audit report. AQSM describes IQA as 'a cornerstone of the University's Quality Assurance regime'. The SED stated, however, that QAC began to consider proposals for the review and enhancement of the process during 2002-03 and the implementation of the schedule of IQAs was deferred pending confirmation of the DATs to be conducted as part of this audit 'to rationalize and co-ordinate requirements on departments'. IQA involves a team consisting of peer auditors, comprising one from the Department/School's own faculty; two from another faculty, all of whom are selected and trained by the Quality Assurance Office; and an external adviser. The Department provides a self study, which is read by the auditors, and then a visit takes place, involving meeting staff and students, where the auditors concentrate on curriculum design, content and organisation; teaching, learning and assessment; student progression and achievement; student support; learning resources; and quality assurance and enhancement. At the end of the visit, a report is written and presented to QAC and the Department/School produces an action plan which is approved and monitored, after six months, by QAC.

52 At the time of the visit QAC had approved a review of the IQA to further strengthen it and to align it more with AQSM and current Agency review methods. From the evidence seen by the audit team, the IQA is a rigorous process and the detailed reports and action plans considered by QAC, and QAC's subsequent monitoring of the action plans, show that the process is effective in providing the University with detailed information about its provision every five years. The team would wish to commend the University for the good practice of its IQAs.



## External participation in internal review processes

53 As noted in paragraphs 45 and 51 above, new programme proposals involve reference to three external referees and an independent external adviser is appointed to IQA teams. The audit team noted, however, that there are no University criteria for the appointment of external members involved in either course approval or monitoring processes. From 2003-04 the University has established employer advisory boards and the SED stated that these boards may develop a role in internal review as well as contributing to course development.

54 The SED also stated that the review of IQA envisaged a strengthened role for the external adviser in that, in some cases, two external advisers may be used and that the University intends to keep the role of the external assessor in course development under review to ensure 'the best and most effective use of the expertise which they offer'. In order to continue to build on the strength of its IQA process, the audit team would invite the University to consider the desirability of establishing criteria for the appointment of external members in its course approval and monitoring processes.

## External examiners and their reports

55 The AQSM, augmented by the University's code of practice on external examiners, contains comprehensive and detailed procedures for the external examining of taught provision. Similarly, comprehensive and detailed procedures for the external examining of research provision are contained in a separate code of practice on postgraduate research degrees. The appointment of external examiners is governed by the University's code of practice on external examiners (which is based on the *Code of practice, Section 4: External examining*). Nominating departments complete a pro forma demonstrating that the nominee is eligible for appointment. The nomination is checked by the Director of Quality Assurance (on behalf of the Director of Academic Affairs) before being forwarded to Senate for approval.

56 New external examiners are provided with information on appointment although the University does not provide a central, formalised induction event. In autumn 2002, the ARC set up a standards task force on external examining which was reconstituted in 2003 to revise the University's code of practice. The task force reviewed induction procedures *inter alia* but concluded that, because of pressures of time, a university induction event for

new external examiners would not be taken up by sufficient numbers of external examiners. At the time of the audit, the standards task force was proposing to recommend to the ARC that information, additional to that already provided to external examiners, should be made available on the Quality Assurance Office's web pages and that new external examiners should be invited to make a preparatory familiarisation visit to the University.

57 The rights and duties of external examiners are contained in the University's guidelines for external examiners. Neither the guidelines nor the letter of appointment make explicit provision relating to termination of appointment. The standards task force on external examining was planning to recommend to the ARC that conditions leading to the premature termination of appointment should be made explicit in both the guidelines for external examiners and in their letter of appointment. The guidelines indicate that external examiners are expected to engage fully with all aspects of assessment and examination and it is a University requirement that external examiners participate in the full range of processes necessary to decide on awards. One aspect of this is that external examiners are required to attend the meeting of the Departmental/School Board of Examiners at which the final marks for candidates are determined.

58 External examiners have commended many good practices. Their reports confirm that the University's academic standards are comparable with those at institutions with which they are familiar. The majority of issues raised by the external examiners related to the academic detail of the programmes for which they were responsible, all of which had been responded to by the relevant department/school.

59 A distinctive feature of the examining process at the University is the existence of University Examinations Boards. In addition to approving marks and classifications, where appropriate, the Boards approve the decisions of the Aegrotat Committee and also review outstanding issues. This process should help ensure consistent implementation of the University's procedures. Additional rigour is provided by the presence, at the level two and three Boards, of the Chief External Examiner, whose report is received by the ARC and the QAC and is considered by Senate.

60 The quality audit report of September 2000 commended the University for 'the thoroughness of its arrangements for processing the reports of external examiners' and the University, in its SED, affirmed that its process for considering and

responding to external examiners' reports had been repeatedly commended by the Agency. External examiners are required to submit a full report annually within one month of the meeting of the Board of Examiners. The report is sent to the Vice-Chancellor who may respond as appropriate to the Quality Assurance Office, the relevant academic department/school and/or the external examiner. The report is copied to the Quality Assurance Office where any areas requiring a response are identified before being forwarded to the relevant academic department/school with a request for a response. The SED stated that no department/school may fail to respond to an external examiner's report. Even if no areas requiring a response are identified, departments/schools are still required to confirm that the external examiner's report has been considered. The QAC considers external examiners' reports and departmental/school responses to them, together with an overview of all issues arising from the reports, and then reports to Senate on its consideration of the external examiners' reports. The audit team was provided with examples of the overview of external examiners' reports considered by the QAC. These were both rigorous and comprehensive. The team formed the view that the thorough consideration of external examiners' reports at institutional level was a feature of good practice.

61 Staff who met the audit team indicated that, although it was an expectation that external examiners would be consulted when substantial amendments were being made to programmes and/or modules, no formal policy operated. The team considers that it would be desirable for the University to consider formulating a policy that codified the involvement of external examiners in the modification of programmes and modules.

### External reference points

62 The University stated that it had been commended in recent Agency developmental engagements for its use of the Academic Infrastructure, especially the *Code of practice*. The audit team was told that the relevant sections of the *Code* were subsumed within the University's quality processes and procedures. The SED also stated that the University was reviewing its course development procedures, reviewing and updating its IQA and AMV procedures, and that it would be reviewing the adherence of its procedures to the *Code*. QAC was shortly to receive a paper which mapped the University's procedures and processes against the relevant sections of the *Code* to ensure continued adherence.

63 It was the University's view that, in addition to the *Code of practice*, it had reacted satisfactorily to the FHEQ and subject benchmark statements. At the same time, the University acknowledged that it needed to accelerate the development and active use of programme specifications and continue to ensure the adequate alignment of courses and programmes to the FHEQ.

64 The process of preparing programme specifications commenced in 2000-01 but the University acknowledged in its SED that full implementation of programme specifications had not been accorded appropriate priority until recently. In order to progress matters, learning and teaching web pages on programme specifications were set up in June 2003. These contained advice and guidance as well as a bank of programme specifications developed to date. The learning and teaching web pages identified that programme specifications were important in terms of pedagogy, student information, skills development and course management. Schools and departments were asked to submit completed programme specifications by September 2003 but not all schools and departments met the deadline. Moreover, although the Quality Assurance Office and CDSCs processed a large number of programme specifications during the academic year 2003-04, a number of programme specifications remained outstanding at the time of the institutional audit. The University required all outstanding programme specifications to be completed by the end of the academic year 2003-04. The audit team learned that the Vice-Chancellor's Committee would monitor progress and that failure to complete a programme specification by the required date would result in action being taken.

65 A developmental engagement in 2003 recommended that the University should give further consideration to the development and use of programme specifications. The University acknowledged that it had not fully developed the use of programme specifications within its quality assurance procedures. Consequently, course development procedures were revised and programme specifications, which previously formed part of the concluding stage of the University's approval process, are to be part of the initial process of course development. In addition, further work was to be carried out in order to more closely define the role of programme specifications. In carrying out this work, the audit team suggests that the University may wish to consider how best to convey programme-level outcomes to students.

66 Another developmental engagement in 2003 recommended that the University should review assessment criteria in order to demonstrate explicit articulation with the ILOs and the level descriptors in the FHEQ. The University acknowledged that the practice of reference to the FHEQ in the assessment of module specifications at course development subcommittees needed to be further developed. It noted that the FHEQ needed to be explicitly embedded in its approach to course development and review at all levels. In consequence, guidance for CDSC was revised in order that that they addressed the issue of articulation between ILOs and level descriptors in the FHEQ. The audit team considered that it would be desirable for the University to continue its support for staff working at module level in the development of module outlines expressing ILOs.

67 The University undertook a review in 2002-03 of masters level programmes in information technology, industrial relations, and Victorian studies, which the SED indicated was intended to test their alignment with the FHEQ, and further work on masters programmes has been commissioned. The audit team noted that the MBA and MD programmes were to be reviewed by the Dean of the Graduate School in order to clarify the level and the criteria for the award of both programmes. It further noted that the IQA of mathematics (June 2003) had highlighted a lack of adherence to the FHEQ (see paragraph 148 below) and would encourage the University to accelerate its progress in respect of the FHEQ.

68 In order to enhance its quality assurance processes, the University intends *inter alia* to review the alignment of its procedures and services and re-examine its practice against the *Code of practice*. In the University's view, there was no need for passive conformity, or for the creation of institutional codes of practice for each section of the *Code*. It considered, however, that the University should continue to engage with the principles underpinning the *Code* so as to reflect (or even improve upon) practice in institutional activities. At its meeting of March 2004, the QAC received a paper from the Director of Quality Assurance which confirmed where University practice was consistent with the *Code* and indicated where further work may need to be considered. In the course of the audit, the team saw evidence of the way in which the University has sought to ensure that its practices reflect the principles of the *Code*.

69 The audit team found that the developmental engagements, and the DATs conducted as part of the institutional audit, served to indicate that the University has engaged with the relevant subject

benchmark statements. It was also of the view that the University would appear to be seeking to ensure that proper cognisance is taken of the FHEQ in its revised course development procedures and, although the University acknowledged that the full implementation of programme specifications had not been accorded appropriate priority, it has taken steps to remedy the matter.

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

70 Since the last academic quality audit the University has participated in eight subject reviews. Departmental responses to the reviews were considered and approved by QAC and, in 2001, QAC considered an overview report of all subject reviews including details of where points were lost and how departments had responded. During 2002-03 the University participated in two developmental engagements, the reports of which, and departmental and institutional responses to which, were considered by QAC in 2004. In particular, the audit team noted that, as part of its institutional response, QAC was about to consider *inter alia* revised course development procedures and a revision of the annual review of courses process. The team discussed the proposed changes to course approval (see paragraph 46 above) with the University and considered that such proposals were an appropriate response to issues raised in the developmental engagements. In respect of the revision of the annual review of courses, the team was told that new guidance was being drafted for departments on how to conduct annual course review, both in terms of process and auditable outcome. The team would encourage the University to produce this guidance, in particular, to ensure that the appropriate information is being considered at the discipline level.

71 The AQSM details procedure in respect of external accreditation of programmes. Heads of department inform the Quality Assurance Office of any impending accreditations and then the Office liaises with the relevant PSB to establish the proposed nature of the accreditation visit to see if it can be undertaken in conjunction with a University event such as IQA. Once a report is received, it is considered by QAC, alongside the departmental response. The SED indicated that the University was considering the enhancement of its procedures during the 2002-03 academic year 'to ensure appropriate central university involvement, record and response'. The audit team was told that, in the past, positive reports, or those with no significant recommendations, were not always scrutinised by QAC, but that in the future all PSB reports would

be so presented. The team noted that AQSM now specifically states that QAC should consider and comment on such reports, together with the departmental response, where one is required. The team considered that the University takes appropriate account of external reports on its provision.

### **Student representation at operational and institutional level**

72 The SED described institutional arrangements for student representation on the University's strategic, operational and executive liaison committees, including Senate and Council. As indicated in paragraph 29 above, KUSU is also represented on the QAC and ARC. In addition, the KUSU President has monthly meetings with the Vice-Chancellor. KUSU representatives are members of groups such as the Library Users' Group and the First Impressions Group (which meets yearly to review the arrangements for induction and open days). Halls of residence have Halls Councils with student members. The Keele Postgraduate Association represents the interests of the graduate student body. SSLCs are the principal formal channel of student views at departmental level. SSLCs are a requirement of the University's AQSM which lays down details of their operation, such as student chairing. Students are also represented on departmental learning and teaching and course committees. Students whom the audit team met indicated that the extent to which SSLCs were active and effective varied between departments.

73 The SED and students both indicated some recent tensions between the University and KUSU, citing the proposed development of the Union building. The audit team heard about a number of recent steps to improve communications, including new posts of a pro vice-chancellor for staff and students and a deputy director in the Quality Assurance Office, both having particular responsibilities for student relations. KUSU had been involved since 2002-03 with a student academic representative scheme (StARS) to support and train student representatives in all departments, although the SWS acknowledged that there were differences in the quality of student representation across departments which might be addressed by further training. A new student academic issues subcommittee of QAC had been created to consider generic issues arising from the business of departmental SSLCs. Student officers whom the team met expressed themselves satisfied with the representation available to them, and that the student voice was heard, even if the University did not always agree with them.

74 The SED indicated that the University convened annual meetings of CPE student course representatives, but part-time students whom the audit team met were not aware of any representative arrangements available to them, and the team considered that it would be desirable for the University to review its student representation and induction arrangements to ensure that such students are not disadvantaged.

### **Feedback from students, graduates and employers**

75 The SED described the arrangements for obtaining student feedback with particular emphasis on end-of-module evaluation. The AQSM lays down a procedure for collecting student comments by questionnaire. A report on the outcome is then included in the module leader's annual or semester report for discussion by departmental/school committees, including learning and teaching committees. The audit team saw examples of discussion of module evaluation reports generating developments in the curriculum, assessment and administration of modules. Evaluation reports are part of the evidence considered in the annual and triennial monitoring of programmes (see above, paragraphs 47 to 50). The SED expressed the intention to produce a student evaluation questionnaire template as a matter of urgency as the provisions of the AQSM were not yet fully in force. As indicated in paragraph 47 above, students complete module evaluation questionnaires for all modules running for the first or only time, and for modules that have been changed, and every module is evaluated at least once every three years. The team also learned of the formal and informal channels by which students could provide feedback on the central library and IT support provided by KIS.

76 The University does not survey its outgoing students at graduation, or subsequently for information on their employability. Its first destination survey statistics are presented on a subject basis and had been among central statistics considered by the QAC. This process has been discontinued pending the availability of more satisfactory data following the implementation of the new student course information management system. The University's main contact with its alumni is through the Alumni Office which produces an on-line newsletter and supports an email directory and other information for graduates. A Keele Society Advisory Group has been inaugurated.

77 Until recently, links with employers have been a matter of contacts between various firms or alumni

and specific departments/schools, or via the Keele Careers Service. The audit team saw, through the DATs in management and history, the continuing importance of such links, for example, in history's work-based learning course. In 2002 the University instituted a central initiative to form employer advisory boards to provide greater employer input into the University's academic processes, particularly course planning and design. Three advisory boards covering Business, Science and IT; and Public Services met for the first time in October 2003.

78 The students met by the audit team indicated that they were generally satisfied with the feedback mechanisms, both formal and informal, that were available to them.

### **Progression and completion statistics**

79 The University stated that it works hard to ensure that progression and completion rates are optimised. It was the University's view that its retention and completion rates reported through HESA statistics indicated favourable performance in comparison with other institutions. The University stated also that the HEFCE performance indicators, with regard to withdrawal rates and employability, indicated a positive comparative position.

80 The University acknowledged that it was dissatisfied with the quality and accessibility of its central statistics. Many departments were able to give considerable, detailed attention to progression and completion statistics in their annual course reviews. This was confirmed by the audit team while conducting the DATs. However, this detail was not replicated at University level. As a result, central records figures on student progression were not available at the time of the institutional audit.

81 In order to improve matters, a new SCIMS was being introduced. SCIMS has a number of key objectives, including *inter alia*: providing the University with more sophisticated and flexible student records; eliminating the need for departments and schools to have their own systems; improving data quality and accuracy; and improving accessibility. The project to oversee the design and implementation of SCIMS ends in June 2005.

82 The audit team was informed that SCIMS was being used in 2003-04 in connection with postgraduate provision and that it would be extended to cover undergraduate provision in 2004-05. Before 2003-04, when the process was suspended pending the development and implementation of SCIMS, the QAC received and considered a set of central statistics relating to

progression and completion. QAC used the statistics (together with external examiners' reports) to help it to reach an informed view on academic standards. The team noted that information received and considered by QAC did not include internal benchmarks and a meeting with staff confirmed that internal benchmarks are not used. The team considered that it would be desirable for the University to consider the development of internal benchmarks to measure student progress at both module and programme level.

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

83 The SED outlined a range of means by which the University seeks to assure itself of the quality of teaching staff and the development of procedures to ensure that staff are appropriately supported. These included a requirement for members of appointment panels to be trained before taking part in any selection process; recruitment and selection training being updated regularly to reflect best practice and legislative changes; and making the Keele Knowledge Programme, provided by the University's Staff Development and Training Centre, mandatory for all new staff in 2004. The SED indicated that this programme includes 'raising awareness of equal opportunities and Keele's approach, policies and procedures'.

84 At the time of appointment, the majority of staff are expected to make a presentation relating to their subject or research area in addition to the curriculum vitae and interview process. Staff met by the audit team considered this to be an important contributory factor in their appointment. The requirement to make a presentation does not extend to graduate teaching assistants (GTAs) or to teaching fellows.

85 Training is provided for both appraisers and appraisees to ensure the effective operation of the appraisal scheme at the University. Appraisal focus is largely determined by the appraisee and teaching is one of the areas that may be reviewed. The Human Resources Strategy 2003-04 proposes the introduction of an annual staff planning exercise (ASPE), which will link the aims of individuals with those of their school/department and will be linked to promotions. There is a policy on promotion on the basis of teaching, outlined in the University's criteria for promotion and promotion is on the basis of performance in two out of the three areas of teaching, research and organisational roles. Readership is a research only grade. An annual prize is awarded for innovation and outstanding contribution to teaching. Individuals must be nominated by their department.

86 The University is confident that it has introduced effective standards and structures to support quality in the areas of appointment, appraisal and reward. The audit team considered that the promotion criteria were transparent and implemented as intended, and further considered that the promotion opportunities to the title of Chair, on the basis of excellence in teaching and organisation and managerial activities, constituted a feature of good practice. The team also welcomed the annual teaching prize initiative as an indication of the significance attached to rewarding staff performance in teaching.

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

87 Newly appointed staff must attend the one-day Keele Knowledge Programme explaining how the University works, its current priorities and culture. New staff are allocated a mentor and training for mentors is provided by the Staff Development and Training Centre. The University provides teaching development opportunities for staff new to lecturing and those seeking to develop their teaching skills through its Teaching and Learning in Higher Education programme (TLHEP) which, the SED indicated, is accredited by the Staff and Educational Development Association (SEDA) and is awaiting accreditation in October 2004 by the Institute for Learning and Teaching in Higher Education (ILTHe) (now part of the Higher Education Academy).

88 The University's code of practice for postgraduate students outlines training and support that departments must offer GTAs. GTAs attend the TLHEP (either the Science Demonstrator Certificate or Associate Teaching Certificate) and departments must ensure they have time for this. In the course of the audit, the audit team learned that not all departments/schools were requiring their GTAs to attend the TLHEP.

89 Departments are required to appoint a mentor or teaching supervisor who supervises all the teaching undertaken by GTAs and advises on any additional training needs. The audit team heard that the teaching and research training and supervision provided for GTAs were positively received. Contact teaching hours for GTAs are limited to no more than 96 per year, less in year one when GTAs attend the TLHEP. The team considered that the support for teaching and professional development provided for graduate teaching assistants constituted a feature of good practice.

90 In February 2001 a new Quality and Standards Strategy was approved by Senate, requiring departments/schools to have a learning and teaching committee that articulates the departmental/school learning and teaching strategy. Departments/schools are required to have a scheme of peer observation of teaching and staff met by the audit team reported a general acceptance of peer review of teaching. While the SED indicated that the University has established a structure that supports and monitors arrangements for staff development, it does not discuss how it deals with non-compliance with mandatory requirements on the part of individuals or departments, nor does it indicate action that might follow an unsatisfactory report from peer observation of teaching. Consequently, although new staff attended programmes as required, the team was less clear how the University assures itself that its staff development funding is well spent and reflects training needs of an updating or awareness raising nature.

91 Overall, the audit team considered that courses provided by the Staff Development Centre were relevant and useful and that the training it provided in relation to teaching and quality assurance was comprehensive. However, the team found evidence to suggest that there were variations in practice in that some departments/schools do not have a staff development policy, and not all departments/schools were requiring their GTAs to attend training in teaching. The team considered that the University's annual monitoring of departments/schools might usefully include monitoring of staff development policy or activity and it would encourage the University to consider how a more systematic institutional oversight of departmental approaches to teaching quality and staff can support the spread of good practice.

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

92 The SED stated that the University does not offer a wide range of provision in distributed and distance learning. In distance learning the major provision is located in the Departments of: Human Resource Management and Industrial Relations; Medicines Management; and in the Centre for Professional Ethics. The SED stated that such provision is subject to the same quality assurance arrangements with adjustments made to fit the nature of the delivery, for example, in establishing student representation and feedback. Such arrangements are approved by QAC through the annual monitoring visit procedure. On the evidence available to it, the audit team concluded that such arrangements are appropriate and address the *Code of practice*.

## Learning support resources

93 The SED indicated the importance attached to the provision of effective learning support by the University and the DAA has clustered its student services in this respect (disability, careers, and academic support and guidance) into a learning support division. Since September 2003 there has been a drop-in learning support centre centrally located on the campus. Learning and teaching officers are in post in five subjects to date. Although these posts are allocated to the DAA, they are based in academic departments. Their common core activities are: learning and study skills; communication skills; academic guidance; feedback and analysis on retention and progression; and liaison with teaching staff. They also meet together as a group and with central learning support services staff. It appeared to the audit team that the role was a useful and popular one with students, complementing written materials and providing tutorial support in areas such as skills, and coping with assessment. However, the extent of the scheme was still limited given the small number involved.

94 The University's main learning support, to date, has been found through traditional, campus-based library services. The audit team was told of the formal and informal channels by which students and staff could provide feedback on the central library and IT support provided by KIS. The current course development process requires assessment of learning support implications in its early stages. The team was told that new course proposals could not proceed further until signed off by KIS and that, additionally, external referees comment on any need for additional resources. Monitoring of learning support is included in course evaluation procedures and KIS staff may attend SSLCs in departments. Link librarians in the central library are designated to departments and departmental library representatives sit on central committees. There are focus groups, a library strategy group, a library users' group, and a wall in the main library where users can post comments, with a response required from KIS within 24 hours. The team heard of an increasing number of initiatives in the use of IT, and of the University's intention to draw on these and to make additional provision so as to develop an institutional framework for e-learning which is at an early stage.

95 Students whom the audit team met expressed some concerns about the currency of book and journal stocks, and about access to e-journals. In November 2003 the Library Users' Group had discussed problems in funding e-resources and some titles had been cancelled. However, the team heard

of the launch of a major e-book facility in March 2004, and noted that the web sites of some departments/schools act as portals to on-line resources which should help to address the problems identified. Students praised the Halls Net internet/campus network service linked to all student bedrooms on campus, to which 75 per cent of on-campus students were signed up, with numbers continuing to increase. They also appreciated the fact that opportunities for comment and feedback were available on teaching accommodation and indicated that the size and equipment of teaching rooms could be a problem, an area for improvement acknowledged in the SED.

96 The University's current and planned expansion in student numbers, involving increased proportions of graduate and international students, and the further development of new fields such as health, present extra demands on learning support services. These have included provision of off-site, satellite libraries as part of the Medical School development, involving joint appointments in National Health Service libraries, library and IT project groups, and management groups including one for facilities.

97 Some features of the University's provision are still prospective. It has acknowledged the major importance of further and coordinated development of e-resources: to support learning; assist students with special needs; develop off-campus learning; and maintain and support the quality of teaching and research. The audit team concluded that the University's capacity to realise its institutional framework for e-learning and carry through associated work such as the selection and implementation of a virtual learning environment (VLE) will play a major part in the future quality assurance of its learning support.

## Academic guidance, support and supervision

98 The SED identified the offices of director of studies, course director, quality assurance co-ordinator and personal tutor as 'the cornerstones of student academic guidance' for both undergraduate and postgraduate taught students. The audit team found that, in practice, more than one of these offices might be held by an individual. Students confirmed the view of the SED that departmental offices and support staff also played 'a vital 'front-line' role in supporting and advising students at an appropriate level'.

99 The SED identified two primary developments in policy and procedure for student support. These involve a re-definition of the personal tutor function and the introduction, initially into larger departments, of learning and teaching officers. The

AQSM now states that 'the role of the Personal Tutor will be: to monitor the student's overall academic progress and to provide feedback and academic guidance; and to advise students on sources of support in the University in relation to issues of personal welfare and academic advice'. It goes on to describe how all undergraduates are to be allocated a departmental staff member as their personal tutor, and will meet him or her at least three times a year.

100 The SWS, students whom the audit team met, and the evidence of DATs suggested that this policy is not yet uniformly applied throughout the University. For example, in management, the team learned that personal tutors are not allocated for resource reasons. Alternative means of monitoring and guidance are provided by year and module tutors, directors of undergraduate studies, monitoring of class attendance and formative assessment. Some students expressed their preference for seeing a staff member of their choice if they need guidance.

101 The audit team heard that, within the dual honours system, students had a personal tutor in both subject departments/schools. In this, and other respects, 'double' provision could lead to problems of clarity and a lack of communication between departments/schools. Students cited examples such as clashing deadlines or varying guidelines on referencing. The team concluded that it would be helpful if documentation available to staff and students at course level included a consolidated, authoritative and accessible single reference point for both University regulations and course-specific regulations. Overall, the team concluded that there was some variability between departments/schools in the amount and delivery of support for students.

102 A range of written guidance is available to students. Course and module handbooks are generally available and the audit team saw some excellent examples. As noted elsewhere in this report, programme specifications were not available for all courses. The team noted that learning outcomes, as opposed to aims, were not always specified or related to assessment. The team met students who expressed satisfaction with pre-entry information in print, web site and video form, and with induction on arrival. However, some part-time students had received limited information and found induction events were held at times when they could not attend.

103 The SWS and students whom the audit team met expressed concerns about the guidance and support available to international degree students after initial induction events. Support was felt to be fragmented, with gaps during holiday periods, and

worries over help with English language and understanding the rules on plagiarism. The audit team noted the work of the Centre for International Exchange and Languages, formerly the International Office of the DAA, as a central reference point for international students and learned that the post of International Student Support Officer in the DAA was to become full-time. Language skills were an admissions requirement but, if problems emerged after arrival at the University, the team was told that diagnostic testing was available and an English Language Unit is based in the Faculty of Humanities. Options within the Complementary Studies Programme could also enable an intensive language tuition package to be created.

104 The audit team considered that, with numbers of international students expected to increase, continued development and monitoring of support for them would be needed. Consequently, it suggests that the University may wish to consider the desirability of continuing to keep under review the range of support services available for international students.

105 With respect to Study Abroad students, of whom the University sent 117 and received 115 in 2003-04, the audit team noted the work of the Centre for International Exchange and Languages in supporting them, and the drop-in service, and the excellent range of web sites and printed information available to exchange students through the Centre.

106 The SED indicated that the University has paid particular recent attention to its support for graduate students, both taught and research-oriented. This was an area acknowledged to be less well developed than support for undergraduates. The Postgraduate Students Liaison Committee and the Postgraduate Development Committee are responsible for the development of policies and procedures to ensure consistency in quality and standards of taught postgraduate provision. A postgraduate division of the DAA has been created, and a code of practice on postgraduate research degrees was introduced in 2002, while the formalisation of research training for doctoral students within a University framework remains to be completed. Handbooks and programme specifications for postgraduate courses are also being produced. Postgraduate student records and course management are the subject of the first phase of the student course information management system.

107 The audit team heard of the University's plans to establish a graduate research school and to house humanities and social sciences postgraduates and postgraduate students in some other subjects, in the new Moser Centre, providing a home for both



full and part-time students. The graduate students, both taught and research, whom the team met were enthusiastic about the support offered them at the University, including career development opportunities through work in GTA, learning and teaching officer positions and resident tutor roles, and through undertaking the Teaching and Learning in Higher Education Programme. The team concluded that the University provides active and increasing support for its graduate students.

### Personal support and guidance

108 Students at the University may draw on a multiplicity of sources of personal support and guidance. Students in halls of residence may turn to resident tutors, who are usually postgraduates or junior staff, and trained by the University. The University requires all its undergraduate students to have a personal tutor although, as the DAT in management indicates, the system does not always operate fully. Module and year tutors, and other academic and support staff, are also involved in monitoring student progress. Students whom the audit team met also valued the work of the Independent Advice Unit in the KUSU.

109 Specialist university pastoral services (residential welfare, financial support, international student support and counselling) are grouped in the Student Support Division of the DAA, while learning support and academic guidance, career management and disability services are located in the Learning Support Division of the same Department. A range of on-line materials, courses and opportunities for advice on aspects of coping academically is available to students. Personal and spiritual support is offered by the chaplains in a number of faiths.

110 Students whom the audit team met were generally satisfied with the levels of personal support received, identifying particularly with academic and support staff in departments. As mentioned in paragraph 104 above, the experience of international students was less positive. Overall, the range of support offered, and the evidence of concern for students on the part of staff, demonstrated the University's evident commitment to supporting the quality of the student experience at the University. The team considered that the number of different sources of help and guidance might be a source of complication or difficulty for those in need of help but was told that, in practice, the range of support available helped to ensure that any problems experienced by students were identified and addressed. However, the SED indicated that the University 'is conscious that it still has some way to

go in realising an integrated student support system'. It is to introduce personal development planning through a central system, based in the Learning Support Centre, and a student support quality circle, bringing together users and stakeholders, has been established to discuss the effectiveness of services and make proposals for their development and improvement. The team considered that the wide range of student support services provided by the University constituted a feature of good practice.

### Section 3: The audit investigations: discipline audit trails

111 In each of the selected DATs, appropriate members of the audit team met staff and students to discuss the programmes, studied a sample of assessed student work, saw examples of learning resource materials, and studied annual module and programme reports and periodic review documentation relating to the programmes. Their findings in respect of the academic standards of awards are as follows.

#### History

112 The DAT included the following programmes: dual honours History (BA, BSc, LLB); dual honours International History (BA, BSc, LLB); dual honours Russian History and Culture (BA, BSc, LLB); MA in Local History; MRes in the Humanities; MPhil; and PhD.

113 In addition to the programmes listed above, the School of History contributes two modules to the University's complementary studies programme and provides teaching for medical students. The School is currently involved in developing modules for the intercalated medical degree and participates in a cross-faculty MA in Victorian Studies. The School is also involved in an extensive annual programme of day and evening classes for adult students. These are held on campus or at various centres in Cheshire, Shropshire and Staffordshire and administered through the University's Centre for CPE. Students may submit written work, successful completion of which can contribute to award of Keele's Certificate in Open Studies. Within the University's CPE offering, the School also teaches undergraduate-level Certificates in Local History, Archaeology and Post-Medieval Archaeology.

114 In 2003-04 the School of History had 428 undergraduate students, 41 postgraduate students, and around 600 CPE students. There are 14 full-time academic staff, a learning support assistant, and a GTA. The School is currently part of the Faculty of Humanities. Under the provisions of the KEELE2006 reorganisation, it will be part of a new Faculty of Humanities and Social Sciences.

115 The DSED, which was specifically prepared for the DAT, described and evaluated all aspects of the School's provision. It was accompanied by programme specifications, the School's learning and teaching strategy 2003-04, a degree programmes questionnaire (sent to undergraduate students in February 2004, a report on the results of which was provided to the audit team during the audit), first destination figures for 2001 and 2002, a graph of staffing and student numbers 1993 to 2004, the School policy on staff development for sessional teachers, a survey of use of the history web pages 2001 to 2004, and a sample module evaluation report (including correlation of lecture attendance and examination marks).

116 The DSED and the School's learning and teaching strategy identified a number of key characteristics of the School, and evaluated its current situation in terms of quality management and other respects. Emphasis was placed on the School's record of development and innovation in teaching and assessment, as in pioneering the director of undergraduate studies role, the introduction of work-based learning at level 2, of skills-based modules at level one, of initiatives in the use of communication and IT in teaching and in first developing the MRes degree (introduced at faculty level in 2002). A major issue identified in the DSED, and confirmed by staff during the audit, was the ongoing review of the School's undergraduate Principal Subjects in the light of its commitment to maintaining a 'chronologically based and culturally diverse' programme including a double-weighted, final year dissertation, regarded as 'the gold standard of our work', at a time when the Russian history and culture subject was to be discontinued and recruitment to that in international history had fallen appreciably. The DSED also stated that 'in recent years our postgraduate systems have been less formal' and that 'Quality assurance in the area of Continuing Education is less robust'. The hope was expressed that the University 'will reintroduce a greater degree of academic control and direction' for CPE programmes.

117 Programme specifications for undergraduate, postgraduate and CPE programmes were provided with the DSED, but are not reproduced in the course handbooks or on the School's web site. 'Upholding the guiding assumptions of the History benchmarking document' was the first key objective of the School's learning and teaching strategy, and explicit reference to the benchmark was made in each programme specification. The care with which the subject benchmark was related to the 'several distinct outcomes' of different undergraduate pathways within the University's course structures (dual honours, single honours law, complementary

studies, and international exchange students) was notable. Specific aims for masters courses were stated in the DSED and reflected in programme specifications. Explicit reference to the *Code of practice* is made during course approval processes via the Faculty CDSC. The DAT confirmed that all the elements of the *Code* are implicitly covered in the School's provision. With regard to the FHEQ, the audit team noted that a review and clarification of the credit rating and level of the Certificate in Local History, and of the module credit structure of the MA in Local History in relation to other qualifications, including the MRes, would be helpful.

118 The School's LTC plays the major, direct role in quality assurance and enhancement. It is responsible for course review and validation, quality assurance matters and staff development, including peer review of teaching, sharing good practice, and monitoring and support of part-time and temporary lecturers. Triennial and annual reviews are reported to its June meeting. Module evaluation reports, based on student performance compared with other modules, and on student evaluations are prepared by module co-ordinators, in conjunction with module tutors, and brought to the LTC by the Director of Undergraduate Studies (DUS). Progression statistics, which the audit team learned were generated by the School in the current absence of central information systems, are considered.

119 The audit team heard that new module proposals are submitted to the LTC for approval, before being sent to the Faculty CDSC, on which the DUS sits. Reports of relevant Senate business are made to the LTC. The Staff Development Committee is a subcommittee of LTC. The SSLC reviews all courses, including Erasmus and Complementary Studies (but not CPE). The team noted that this is chaired by a student, and a student representative sits on the LTC which discusses issues raised at the SSLC. Students of the School described how ideas and proposals for developments such as new kinds of assessment were both raised and received by the SSLC.

120 The School has a postgraduate committee, responsible for course review and validation, quality assurance matters and monitoring and support of postgraduate students. The work of this committee had been developed to provide a more formal framework for the School's postgraduate processes, as had the role of Director of Postgraduate Studies (DPS). There is now also a research committee dealing with research management, including research ethics.

121 The School has undergraduate and postgraduate examination boards and there are two undergraduate and one postgraduate examination

secretaries, the latter introduced in February 2003 as explained in the DSED 'in response to an evaluation of the robustness of our postgraduate examining process'. The Examination Secretaries are members of the School's academic staff and are responsible for all procedures connected with examinations, including liaison with external examiners, scrutiny of examination papers, approval of dissertation subjects, production of marks, drafting responses to external examiners' reports for consideration at the School Meeting, and liaison for students making cases for extenuating circumstances to the University's Aegrotat Committee.

122 The School's undergraduate examination board operates chiefly in the context of dual honours. The University had recently introduced central examination boards, on which undergraduate secretaries represent the School. The DSED expressed some misgivings about the implications of this for the authority of the School's examination boards. The audit team learned of concern in the School that the whole of a student's mark profile across both dual honours subjects might not be available at final examination boards in history. It was confirmed that full information would in fact be considered at subject boards, with University boards dealing with 'problem cases' and generic issues. The team noted the importance of the availability of consistent and full information at the point of assessment and of appropriate oversight and support in the University's central examination processes.

123 The DSED and staff illustrated the School's capacity for self-generated reflection and internal monitoring. The audit team also saw evidence of interactions with the University's quality assurance and enhancement processes, as in the most recent IQA (1999), the recommendations of which were responded to in an action plan and subsequent follow-up by the School. Annual monitoring visits take place and are subsequently discussed in the School. Staff represent the School on central bodies including the Faculty CDSC, University Examination Board, and Senate. In addition, there are informal links with other staff of the University through, for example, meetings of the senior school managers' and director of undergraduate studies groups.

124 According to the DSED the 'undergraduate programme seeks to develop subject specific skills, reflexivity, independence and employability'. Evidence of this was seen in a range of modules and student work involving formative and summative assessment using varied methods such as group work, presentations, student self-assessment and work-based learning as well as more traditional

assessment. Processes of grading for the new assessment modes were well-developed and supported by staff and student handbooks, and through use of the School's part-time learning and teaching assistant. There was awareness of, and links to, wider contexts including the HEFCE History 2000 Consortium, the Work Related Learning Project with Keele Careers Service, and regional networks. The audit team concluded that the School's provision demonstrated its capacity for development which was both creative and carefully managed.

125 The DAT team reviewed a range of assessed coursework, examination papers and dissertations across the programmes under review, together with external examiners' reports. The reports were generally complimentary about the academic standards achieved. Where comments were made, these were carefully considered at University and School level, and responded to by the School. The team was satisfied that the nature of the assessment and the standard of student achievement met the expectations of the programme specifications and was appropriate to the titles of the awards and their location within the FHEQ.

126 Teaching is monitored and supported by the School in a number of ways, including module review by teaching teams each semester, reported to the DUS and LTC; student evaluation; peer review of teaching; mentoring of new staff; the Staff Development Committee; annual appraisal; and attendance at University and external training programmes. All new staff attend the University's TLHEP programme and staff within the School expressed their satisfaction at the career development opportunities they had received while working in the School.

127 Students are represented on the SSLC, which is chaired by a student, and attended by the Head of School, DUS and other staff. Students are also represented on the LTC. Membership and minutes of the School's committee meetings are published on the School web pages. Students whom the audit team met expressed satisfaction with their formal representation and cited examples of input to important changes to assessment such as portfolios, and to course evaluation. They also appreciated the general accessibility of staff. There was, however, no evidence of representation for part-time and CPE students.

128 Students are provided with information, through the printed prospectus, web site and video virtual tour, before they apply. Once at the University, there are handbooks for each History Principal Subject, supplemented by module information and two postgraduate handbooks, for

the MA in Local History, and for MRes, MPhil and PhD students. The handbooks cover a full range of information on regulations, pastoral and academic support, contacts and facilities. Programme specifications are not included. Regulations are at two levels, notably at School and general University-level, which are not brought together in any single source for reference and the School may wish to consider the desirability of doing so. Departmental web pages also contain course and other information. Students met by the audit team declared themselves satisfied with both pre-course and on-course information, although it was suggested that induction sessions for part-time and CPE Certificate students should be scheduled at times which they could take part and that there may be merit in more specific assessment criteria for postgraduate taught students. Overall, the team considered the student handbooks and other information to be clear and comprehensive.

129 The learning support and resources provided by the School and University were described by students as good or very good. Sufficient book and journal supply was a concern, but expansion of e-books and e-journals was an increasing help. Use of the School web site had grown by 410 per cent between 2001 and 2003 and includes Teaching and Learning Technology Programme tutorials and acts as a portal to major study resources. Off-campus access was a problem for some students. The audit team learned that part-time students had experienced some difficulties getting library induction and evening and weekend access to local history collections. Feedback to students on written work was systematically provided, and students expressed particular appreciation that essays were handed back directly by academic staff. Written comment was also made, although sample assessed work indicated variable quantity of feedback at level one. Study skills support was available through guidance in handbooks and through sessions run by the learning and teaching assistant, whose main duties involved the provision of learning and teaching support for students, analysing and advising on retention and progression issues and liaison with academic and administrative staff inside and outside the School to disseminate information and best practice. The team concluded that the quality and amount of learning support in the School was high.

130 Students are requested to complete feedback forms at the end of each module. These are considered by module tutors, and are the subject of a report as part of the module evaluation, discussed by the LTC and SSLC. As part of the School's current

review of undergraduate Principal Subjects, all undergraduate students were asked to complete a degree programme questionnaire, and 52 per cent did so. The audit team heard that 94 per cent would recommend the School to prospective students. Those students met by the team were satisfied by opportunities available to express their views and by the responsiveness of the staff.

131 Pastoral support is provided through the personal tutor system and general accessibility of staff. Students who met the audit team also valued the resident tutor system in halls of residence and the KUSU Independent Advice Unit. The School's courses include considerable coverage of explicit skills and opportunities for work-based learning. Information for students with special needs is provided by the School and University. The team saw examples of the handling of assessed work from a dyslexic student. It concluded that information and provision for personal support for students was well developed and that the School had a strong sense of responsibility for, and commitment to, its students.

132 The audit team considered that the School of History has a well-developed culture of academic purpose, reflective practice and careful processes, demonstrated in its approach to quality assurance and enhancement. This includes increasingly robust structures in respect of graduate courses. In the areas of part-time study and CPE programmes, the team concluded that it would be desirable for the arrangements for these courses to be reviewed so as to consolidate their quality assurance and enhancement and to ensure the appropriate learning experience of their students. The quality of the learning opportunities available to the School's students was suitable for courses of study leading to the awards covered in the DAT.

### **Management**

133 The DAT covered the following programmes: dual honours BA/BSc with a principal subject in Business Administration; dual honours BA/BSc with a principal subject in Business Administration - Marketing; Masters in Business Administration (including part-time mode).

134 The DSED was written specifically for the institutional audit. It included programme specifications for both the undergraduate and MBA programmes. The programme specification for the BA/BSc Business Administration (dual honours) and the BA/BSc Business Administration - Marketing (dual honours) contained explicit references to the *Subject benchmark statement* for general business and management and the FHEQ.

135 The programme specification for the MBA programmes contained no explicit reference to either the *Subject benchmark statement* for masters awards in business and management or the FHEQ. The DSED acknowledged that the Department of Management's undergraduate principal subjects and MBA programmes predated the *Subject benchmark statements* for general business and management, and masters awards in business and management. Before the audit, the University had scrutinised selected postgraduate taught programmes with respect to their alignment with the FHEQ. The audit team was informed that the Dean of the Graduate School would review the MBA programme against the FHEQ and would report to the QAC at the beginning of academic session 2004-05. The team would encourage the University in its efforts to progress this matter.

136 The Department produced its own progression and completion data which allowed it to monitor quality and standards. Thus, degree classifications for the undergraduate programmes were analysed, including a trend analysis for the years 2000-01 to 2002-03, as were MBA completion statistics. Examples of module report forms were made available to the audit team which considered that these were of good quality. In all cases, the module tutor had analysed student performance, summarised the results of the module evaluation questionnaires, and evaluated the module.

137 The audit team studied examples of external examiners' reports and noted that these had been carefully considered and that, where appropriate, action had been taken in response to examiners' comments. All responses to external examiners' reports were sent to the Director of Quality Assurance. The team reviewed a range of students' assessed work and was satisfied that the nature of the assessment and standard of student achievement in the programmes met the expectations of the relevant programme specification and was appropriate to the title of the awards and their location within the FHEQ.

138 Examples of student handbooks made available to the audit team were of good quality. Undergraduate students who met the audit team were appreciative of the handbook which contained an extensive study guide, *inter alia*. The team noted that, with some exceptions, course outlines provided to students were not written in terms of ILOs, and would encourage the Department to ensure that future course outlines are written in these terms, thereby further aiding students' understanding of learning and assessment expectations.

139 The DSED indicated that eight senior members of staff left the Department in the 18 months preceding the start of the academic year 2003-04. While some replacements were in post by the time of the institutional audit, and others were expected to be in post by the start of the academic year 2004-05, the DSED stated that the Department had operated under some difficulties in the academic session 2003-04. Staff who met the audit team confirmed that this had been the case and had resulted in a number of instances where the Department had taken a pragmatic approach. For example, the personal tutor system, which had been put in place in 1998-99, had not operated (although an alternative pastoral care system was operating) and staff had been unable to develop further links with employers, which could include developing placement opportunities for undergraduate students. While curricular development work in respect of a marketing principal subject had continued, development relating to a Doctor in Business Administration could not take place and some staff research could not be undertaken.

140 The DSED indicated that GTAs had taught some higher-level modules during the period of a shortfall of staff. Staff who met the audit team confirmed that this was a consequence of the Department's staffing difficulties but indicated that, in all cases, the GTAs were experienced individuals. The arrival of additional staff should help prevent a recurrence of these difficulties. The DSED noted that additional staff being in post would also enable the Department to re-balance its research activity in that, rather than focusing heavily on one particular area of research, the Department would seek to establish a better balance in its coverage of the functional areas of management.

141 Students who met the audit team had experienced some difficulties with administrative support in the Department, which staff attributed mainly to the use of temporary staff who were unfamiliar with procedures. In the view of the staff, the return of experienced staff, together with a reorganisation of administrative support, should ensure that the difficulties experienced by students within the Department do not recur.

142 The students confirmed that recruitment information provided to potential students was accurate and reliable and that, for the most part, staff in the Department provided them with all the information they required, with the exception of staff expectations with regard to assessments. Students had observed that practice was variable and that assessment criteria were not always made clear to

them. However, staff who met the audit team pointed out that the student handbooks contained information on assessment criteria and that further guidance was contained in course outlines. As indicated in paragraph 138 above, the audit team was of the view that course outlines written in terms of ILOs would further aid students' understanding of learning and assessment expectations.

143 The students also confirmed that regular meetings of SSLCs were held and that they were satisfied with the manner in which SSLCs operated. They provided examples of the Department's responses to issues raised at SSLC meetings. The DSED acknowledged that provision of books in hard copy was less comprehensive than is the provision of electronic resources. Staff who met the audit team indicated that the social science librarian attended SSLC meetings and that work had started to identify precisely where provision of books could best be improved.

144 The audit team was satisfied that the quality of learning opportunities available to students was suitable for programmes of study leading to the named awards.

#### **Mathematics**

145 The DAT covered the following programmes: dual honours mathematics; dual honours statistics; single honours mathematics; single honours mathematics and statistics; and the undergraduate masters MSci degree.

146 The DSED was written specifically for the institutional audit and included programme specifications for the above programmes, with the exception of the MSci degree which is currently being phased out due to low student numbers. Programme specifications reference the *Subject benchmark statement* for mathematics, statistics and operational research and give ILOs, although these are not always linked to assessment.

147 A manual card system is currently used to record student data, pending the roll-out of the University's SCIMS. The University's entrants have higher qualifications than the national average, yet have an above average drop-out rate. Drop-out between years one and two was between 27 per cent and 44 per cent over recent years (compared to a national average of 20 per cent non-progression from level 1 to 2), and between 25 per cent and 31 per cent for years two to three. The audit team noted that a number of the students who do not progress in mathematics choose to transfer to other departments in the University.

148 The University's IQA of June 2003 of provision in this area commended the School's innovations to meet the evolving curricular needs of its incoming students, including: diagnostic testing on entry with remedial work, drop-in sessions for students, revision sessions for modules at all levels, and special 'blitz' weeks on differentiation and, soon, on integration. The IQA expressed some concern that the Department accepted too readily the consequences of the national downturn in the fortunes of mathematics. The audit team agrees with the IQA finding and was concerned at the view of staff and successful students that students fail only because of lack of aptitude. Students who met the team are mostly happy with their experience of the School's ethos, however, these are individuals who succeed within the Department's culture. The team considered that the Department should continue to explore more innovative and supportive approaches to help students before they fail or drop out. The IQA indicated that programmes are aligned with the *Subject benchmark statement* for mathematics, statistics and operational research but queried how final year undergraduates demonstrated their ability to make use of primary sources, initiate and carry out projects, and communicate ideas and solutions to various audiences, these forming part of the FHEQ descriptor for Honours awards. In many subjects, this is done through projects or dissertations, but in these programmes the final year project is optional. This issue is currently under consideration by the School.

149 Students complete an evaluation form for each module every two years and these are compiled into the Department's annual monitoring report, then reviewed by the University's annual monitoring visit (the most recent of these being March 2004). Module reviews for 2002-03 are available and use the University's standard form. Some have no information or reflection on the module, even when marks are extremely low. A triennial course review was carried out, and recorded, by the Department's LTC in June 2003.

150 The Department receives copies of the IQA and annual monitoring visit reports and considers them in its LTC, which reports to the departmental meeting. However, although the IQA report noted that the Department was assiduous in accommodating changes and developments agreed by Senate, it also expressed concern at the Department's lack of engagement in the consultative phases of developments in the University's quality and standards framework. These include the AQSM, revisions to academic regulations, the review of the degree algorithm and discussions about marking criteria.

151 The University receives copies of all external examiners' reports and monitors the Department's response through annual monitoring visits. External examiners have expressed satisfaction with assessment, noting that poor performance was explained by natural variation in the quality of students. One external examiner had made recommendations on scaling, remarking borderline students, and computer-based assignments and the Departmental meeting discussed these before referring them to the Department's LTC. Appropriate action was implemented.

152 There is inconsistent documentation of expected learning outcomes and no explicit link between assessment and learning outcomes. The audit team considered that the assessment strategy would be strengthened by linking assessment directly to the expected learning outcomes for each module to enable students to understand the basis on which they will be assessed.

153 The audit team studied examples of external examiners' reports and reviewed a range of students' assessed work. It was satisfied that the standard of student achievement in the programmes met the expectations of the relevant programme specification and was appropriate to the title of the awards and their location within the FHEQ.

154 The audit team found that the Handbook for Principal Students 2003-04 meets minimal outline standards required by the University in its content. An overview of the Department gives a staff list, information about modules, the method of teaching and assessment but it was unclear how students would find information about an individual member of staff's area of research or special expertise, staff telephone numbers or email contact information, as this is not provided in the Handbook. Although the programme specifications were published in the DSED, there is no clear link to the module outlines published in the Handbook which include topic lists, but not learning outcomes, expected hours of study, module credits, course notes available, or specific assessment methods. There is information about how to achieve a particular degree class, but some students met by the audit team did not understand this. The team noted, however, that the staff operate an open door policy for students, but considered that this is no substitute for clear written guidance which can be consistently applied.

155 Although University regulations require that there is an effective staff development policy at departmental level, the audit team noted that staff development issues are not routinely addressed in any departmental committee.

156 Students who met the audit team were satisfied that departmental computer facilities meet their needs. They also found diagnostic sessions, drop-in sessions and additional training sessions on differentiation useful. The students indicated that lecturers mainly use the blackboard (the *Subject benchmark statement* for mathematics, statistics and operational research notes the 'substantial merit' of the traditional blackboard lecture in this subject area) with some lecturers giving handouts. They indicated that projection facilities 'are unnecessary' (although overheads and computer projectors are also used in lectures). Although students considered library provision to be adequate, they would like off-campus access to reserve books. The team noted that materials on the teaching and learning server cannot be accessed from outside the campus and that the use of departmental learning resources is not monitored. Student feedback for 2003-04 was generally positive. The main criticism on forms available to the team suggested some lectures may be too fast. The team found no documentation to indicate action taken in response to the student feedback.

157 The most recent meeting of the SSLC was November 2003 when two students attended. Other student representatives could not attend because of timetabled lunchtime teaching. Students met by the audit team raised no 'matters of substance', indicating that problems were resolved efficiently by the Department, except where it had no control, for example, using outside lecture theatres for mathematics lectures, and bunching examinations because of constraints from the dual honours system.

158 Overall, the audit team was satisfied that the quality of learning opportunities available to students was suitable for programmes of study leading to the named awards.

## **Section 4: The audit investigations: published information**

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

159 At University level, the DAA is responsible for the Regulations Handbook and a range of other central publications for students, while the DAA's undergraduate division is responsible for the undergraduate prospectus for prospective students and the module catalogue for current students; its postgraduate division is responsible for the postgraduate study guide. The Centre for CPE is responsible for the CPE programme brochure. These

central units liaise with departments to ensure that the published information is accurate, of good quality and reliable.

160 The University web site also offers a substantial amount of useful information for prospective and current students. The SED indicated that departmental/school heads are responsible for the quality and accuracy of information they publish either on the internet or in hard copy for interested parties. KIS bears responsibility for the maintenance of the University's web site and for monitoring the quality and accuracy of the information published on it, liaising with departments/schools as appropriate.

161 The SED indicated that the University had prescribed mandatory items to be included in departmental/school student handbooks for both undergraduate and postgraduate students. The audit team found that the quality of the student handbooks provided for the DATs conducted as part of the audit varied. Those for history and management were considered to be comprehensive and clear, while the mathematics handbook was less helpful. The team noted the absence of explicit learning outcomes in the mathematics student handbook and also found Information about assessment requirements to be very limited in some handbooks. It considered that explicit learning outcomes should be routinely communicated to students. The team noted that student handbooks are monitored annually with reports being submitted to the QAC, but it was not evident to the team that action always followed any gaps identified in the handbooks. In general, however, students met by the team declared that they were satisfied with information in their departmental/school handbooks.

162 Student feedback is available to the University from the First Impressions Group, SSLCs and by way of communications from the KUSU Independent Advice Unit. Students who met the audit team were satisfied that the University provided adequate information about courses and about other aspects of student life at Keele. The team heard that students selected the University primarily because they were attracted to the dual honours system and the Keele campus, and most were less likely to look in detail at departmental/school issues and course content.

163 The audit team considered that, in general, the University's published information was up to date, well constructed and comprehensive and found that it was easy to access specific topics of interest. The team further considered that the University had established a number of useful initiatives to ensure communication with the student body.

## **Reliability, accuracy and completeness of published information**

164 The University has taken steps to enable it to meet its obligations with regard to HEFCE's document 02/15, *Information on quality and standards in higher education*, and the SED indicated that it is currently considering the implications of the final guidance issued in *HEFCE 03/51, Information on quality and standards in higher education: Final guidance* and would be contributing to the HESA consultation exercise. The SED stated that the University's QAC had noted the need to establish a University-level project on the coordination of information to be published and that a teaching quality information officer post had been approved and was to be advertised shortly.

165 Although the audit team found that programme specifications are not available on a consistent basis at present, it noted that the University planned to have these in place by the end of the 2003-04 academic year. The University is awaiting the outcome of the national initiative relating to feedback from recent graduates to enable it to determine action required on its part with regard to publication of student feedback. The team learned that current omissions, for example, information on student progression and retention in relation to ethnicity and disability, would be addressed with the full implementation of the new SCIMS.

166 The audit team noted that the University had available much of the information required by *HEFCE 02/15*. It found that the University was alert to the requirements of this document and the final guidance provided in *HEFCE 03/51* and was taking steps to fulfil its responsibilities in this respect. The team noted the actions proposed and considered that there would be merit in the University putting expected implementation dates on planned publication of information. The team further found that the information published by the University about the quality of its programmes and the standards of its awards was reliable and accurate.





## Findings

## Findings

167 An institutional audit of the University was undertaken during the period 10 to 14 May 2004. The purpose of the audit was to provide public information on the quality of the University's programmes of study and on the discharge of its responsibility as a UK degree-awarding body. As part of the audit process, according to protocols agreed with HEFCE, SCOP and UUK, the audit included consideration of examples of institutional processes at work at the level of the programmes through DATs, together with examples of those processes operating at the level of the institution as a whole. This section of the report summarises the findings of the audit. It concludes by identifying features of good practice that emerged during the audit, and making recommendations to the University for action to enhance current practice.

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

168 The two major University committees with operational responsibility for quality and standards are the QAC and the ARC. QAC is the central body concerned with matters of quality, with a direct reporting line to Senate. ARC is the central body concerned with matters of standards and academic policy. It is a committee of Senate and has a number of subcommittees reporting to it including, at faculty level, faculty CDSCs. Both QAC and ARC have faculty representation.

169 There is an AQSM which clearly lists the University's procedures for programme approval; annual and triennial monitoring; and internal quality audit. The AQSM also details reporting lines between committees at school/departmental level. The University stated that the processes outlined in the AQSM apply in respect of any collaborative provision, although the University took the decision, in May 2001, to discontinue its overseas collaborative partnerships, subject to one exception approved by Senate.

170 While the processes are clearly stated in the AQSM, the audit team concluded that, on the evidence available to it, such processes and reporting lines were not consistently applied by all schools and departments. The team found that cross representation on committees did not always enable information to flow between central and departmental/school committees. Nor was it evident to the team, in all cases, that departmental LTCs and other relevant committees were systematically

receiving the information they were required to receive, as stated in the AQSM. Consequently, the team came to the view that the University should be advised to establish formal reporting relationships between appropriate departmental and school committees and key central committees responsible for matters of quality assurance and enhancement, for example, the QAC, ARC and the University LTC in the current structure.

171 In addition, while regarding the treatment of external examiners' reports by QAC, and IQA as features of good practice, the audit team was less clear how the University obtained information, from annual and triennial reports, on quality and standards issues arising from programmes delivered within the University or, in some cases, arising from delivery by its collaborative partners. The team considered that, given the lack of formal reporting lines from departmental/school committees to central committees, issues arising from annual and triennial reviews may not be identified by the University until the next internal quality audit. The team concluded that it would be advisable for the University to review the annual monitoring process with a view to ensuring that the University obtains sufficient information, both qualitative and quantitative, to enable it to exercise institutional oversight.

172 The audit team noted that the University had decided to withdraw from overseas collaboration, with one exception in Sri Lanka. It appeared to the team that, while the University was well informed about its provision in Sri Lanka, it was less well informed about other overseas collaborative provision that was currently being phased out. The team concluded, therefore, that it would be advisable for the University to strengthen its oversight of all existing collaboration, including its UK-based provision, and the overseas collaborative provision that is currently being phased out.

173 The audit team was made aware of the structural changes being implemented by the University as part of KEELE2006. This audit confirms that there can be broad confidence in the soundness of the University's present and likely future management of the quality of its programmes and the academic standards of its awards. In coming to this judgment, the team took note of KEELE2006 which, while in the early days of development, should ensure that effective structures are put in place to enable the University to exercise appropriate oversight of quality and standards at an institutional level in the future.

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

174 The University considered the procedure for considering external examiners' reports, the Examinations Boards, the AQSM and the Academic Regulations to constitute the core of its quality and standards framework. The AQSM, augmented by the University's code of practice on external examiners, contains comprehensive and detailed procedures for the external examining of taught provision. Similarly, comprehensive and detailed procedures for the external examining of research provision are contained in a separate code of practice on postgraduate research degrees.

175 Many departments/schools were able to give considerable, detailed attention to progression and completion statistics in their annual course reviews. However, this detail was not replicated at University level. As a result, central records figures on student progression were not available at the time of the institutional audit. The University acknowledged that it was dissatisfied with the quality and accessibility of its central statistics. A new SCIMS was in the process of being developed and implemented at the time of the audit visit. It was being used in 2003-04 in connection with postgraduate provision and would be extended to cover undergraduate provision in 2004-05. The audit team noted that information received and considered by the QAC did not include internal benchmarks and it would encourage the University to consider developing internal benchmarks in order to measure student progress at both module and programme level.

176 External examiners have identified many areas of good practice within the University. Their reports confirm that the University's academic standards are comparable with those at institutions with which they are familiar. The majority of issues raised by the external examiners related to the academic detail of the programmes for which they were responsible, all of which had been responded to by the relevant department/school. External examiners are required to submit a full report annually to the Vice-Chancellor. The report is copied to the Quality Assurance Office. Areas requiring a response are identified before being forwarded to the relevant academic department/school with a request for a response. External examiners' reports and departmental/school responses to those reports, together with an overview of all issues arising from them, are considered by QAC, which then reports to Senate on its consideration of the external examiners' reports. The audit team formed the view that the thorough consideration of external examiners' reports at institutional level was a feature of good

practice. The team was informed that, although it was an expectation that external examiners would be consulted when substantial amendments were being made to programmes and/or modules, no formal policy operated. The team would encourage the University to consider formulating a policy that codified the involvement of external examiners in the modification of programmes and modules.

177 The findings of the audit confirm that broad confidence can be placed in the University's present and likely future management of the academic standards of its awards.

### **The effectiveness of institutional procedures for supporting learning**

178 The University's main learning support has been found through traditional, campus-based library services. This is managed, together with IT provision, through KIS. The audit team heard evidence of extensive communication and consultation between these central services and programme providers at department/school level. These links operate at programme planning and approval stages and then throughout courses. There are also various opportunities for student feedback which, together with the SWS, indicated some anxiety about how up-to-date journal and book stocks were, and about access to e-journals. The University, however, believes that its provision of access to e-journals bears favourable comparison with many other universities. At the same time, the University has indicated that development and implementation of an overall e-learning strategy will play a major part in its future educational provision.

179 There has been an increasing number of initiatives in the use of IT for teaching and learning in various parts of the University. Students much appreciated the HallsNet internet/campus network service linked to all student bedrooms on the campus. An e-book facility had been launched in the University library in March 2004. The audit team heard of the University's intention to draw on existing experience and to make additional provision so as to achieve an institutional framework for e-learning, the aims of which will be to support learning, assist students with special needs, develop off-campus learning, and support the quality of teaching and research. The team concluded that the University's capacity to successfully realise this institutional framework and to carry through in a timely way the associated work, such as the selection and implementation of a VLE, will be a major factor in assuring the future quality of its learning support.

180 Students at the University may draw on a multiplicity of sources of academic and personal support. This plays an important part of providing the relatively small and integrated intellectual and social community which many students indicated was a major reason for choosing Keele. The audit team found that the University's commitment to supporting students' learning was evident from the range of support provided, which is generally appreciated by students. However, both they and the University have identified areas where there is a need to ensure consistency of provision and integration of advice and guidance, or to cater to the needs of particular groups of students. The University is seeking to generalise its personal tutor system and expand the use of learning and teaching officers in departments/schools. As noted elsewhere, programme specifications are not yet part of the information available for all programmes. Some particular support needs for international students have been raised and are to be addressed by the University, while academic and personal support for graduate students has been the subject of recent developments and a number of further actions are planned, including formalised research training programmes, student record systems, and a dedicated graduate student centre. The team concluded that the University provides active and increasing support for its graduate students, and is paying necessary attention to developing the support of international and part-time students.

181 The audit team considered whether the extensive number of sources of help and guidance might be a source of complication or difficulty to a student with problems. It noted action by the University, through its DAA, to integrate functions as, for example, in a postgraduate division and in learning and student support divisions encompassing careers, disability, and counselling services and financial advice. Students indicated the value of having a choice of services, including also resident tutors in halls of residence, chaplains, the KUSU Independent Advice Unit, and academic and support staff in departments/schools. The team concluded that moves to coordinate and generalise support were valuable, and that the range of existing services and concern displayed for students demonstrated the University's commitment to supporting the quality of the students' learning experience.

182 The audit team noted the University's system of mandatory support for training in teaching provided for graduate teaching assistants which the team considered constituted a feature of good practice.

## Outcomes of discipline audit trails

### History

183 The DAT included the following programmes: dual honours History (BA, BSc, LLB); dual honours International History (BA, BSc, LLB); dual honours Russian History and Culture (BA, BSc, LLB); MA in Local History; MRes in the Humanities; MPhil; and PhD.

184 The DSED was written specifically for the audit. It included programme specifications which showed how the programmes aligned with the *Subject benchmark statement* for history and the FHEQ. The careful alignment of different undergraduate pathways with the *Subject benchmark statement* was notable. Issues of skills, independence of learning and employability were explicitly addressed in undergraduate programmes and demonstrated through a range of outcomes. Some further clarification of specific aspects of some part-time and CPE awards would be desirable. The DAT indicated that School and University programme review processes are regularly and effectively undertaken.

185 Reports of external examiners were positive about the quality and standard of awards. Where external examiners raised issues, these were discussed and responded to. Assessment, particularly in undergraduate courses, was varied in form and showed a capacity for careful innovation related, *inter alia*, to student need and developments in skill- and work-based learning. The audit team concluded that the aims of the provision are being met, and that the standard of student achievement is appropriate to the title of the awards and their location within the FHEQ.

186 Learning support and resources are carefully monitored and there are numerous opportunities for student evaluation of these and of tuition. Students spoke highly of the level of support they received and the commitment of staff. There was pressure on some traditional library resources and in access hours for some part-time students. However, the School had undertaken new initiatives in web site development and deployment of a learning and teaching officer which had significantly extended the support available. The audit team concluded that the quality of learning opportunities available to students was suitable for the programmes of study leading to the awards within the scope of the DAT.

### Management

187 The DAT comprised programmes of study offered by the Department of Management leading to the awards of a dual honours BA/BSc with a principal subject in Business Administration; a dual

honours BA/BSc with a principal subject in Business Administration - Marketing; and an MBA (full and part-time).

188 The DAT was supported by a DSED specially written for the audit and included programme specifications for both the undergraduate and MBA programmes. The programme specification for the BA/BSc Business Administration (dual honours) and the BA/BSc Business Administration - Marketing (dual honours) contained explicit references to the *Subject benchmark statement* for general business and management and the FHEQ. The programme specification for the MBA programmes contained no explicit reference to either the *Subject benchmark statement* for masters awards in business and management or the FHEQ. The audit team was informed the MBA programme would be reviewed against the FHEQ by the beginning of the 2004-05 academic session. The team was satisfied that the nature of the assessment and standard of student achievement in the programmes met the expectations of the relevant programme specification and was appropriate to the title of the awards and their location within the FHEQ.

189 The audit team noted that, with some exceptions, course outlines provided to students were not written in terms of ILOs. The team would encourage the Department to ensure that future course outlines are written in terms of ILOs, thereby further aiding students' understanding of learning and assessment expectations. Documentation reviewed by the team indicated that students were broadly satisfied with their programme of study. Students who met the team confirmed that this was the case. The audit team concluded that the quality of learning opportunities available to students was suitable for programmes of study leading to the named awards.

#### **Mathematics**

190 The DAT comprised programmes of study offered by the Department of Mathematics leading to: dual honours awards in mathematics and in statistics; single honours in mathematics and in mathematics and statistics; and an undergraduate masters MSci award. The DAT was supported by a DSED specially written for the audit, and included programme specifications for the above with the exception of the MSci degree which is currently being phased out due to low numbers.

191 The University's IQA of provision in this area in June 2003 commended the School's innovations to meet the evolving curricular needs of its incoming students, including: diagnostic testing on entry with remedial work, drop-in sessions for students, revision

sessions for modules at all levels, and special blitz weeks on differentiation and, soon, on integration. The IQA expressed some concern that the Department accepted too readily the consequences of the national downturn in the fortunes of mathematics. The audit team agrees with the IQA finding and was concerned at the view of staff and successful students that students fail only because of lack of aptitude. Students who met the team were mostly happy with their experience of the School's ethos, however, these are individuals who succeed within the Department's culture. The team considered that the Department should continue to explore more innovative and supportive approaches to help students before they fail or drop out. The IQA indicated that programmes are aligned with the *Subject benchmark statement* for mathematics, statistics and operational research, but queried how final-year undergraduates demonstrated their ability to make use of primary sources, initiate and carry out projects, and communicate ideas and solutions to various audiences, these forming part of the FHEQ descriptor for honours awards. In many subjects, this is done through projects or dissertations, but in these programmes the final project is optional. This issue is currently under consideration by the School. Under the informed guidance of the DUS, the Department is assiduous in accommodating changes and developments agreed by Senate. However, the team regretted that from the minutes of Departmental committee meetings, it could find little evidence of the Department's engagement in the consultative phases of the introduction of recent developments in the University's Quality and Standards framework, including the AQSM, the revision to the Academic Regulations, the review of the degree algorithm and discussions about marking criteria. Furthermore, although University regulations require an effective staff development policy at Departmental level, this has yet to be formulated.

192 The audit team noted that there is inconsistent documentation of expected learning outcomes, and no explicit link between assessment and learning outcomes. The team would strongly recommend that the Department strengthen its assessment strategy by linking assessment directly to the expected learning outcomes for each module.

193 Students complete an evaluation form for each module every two years and these are compiled into the Department's annual monitoring report, then reviewed through the University's annual monitoring visit process. The audit team noted a lack of reflection on the module, in some instances, even when marks are extremely low. The team found that the students were mostly happy with their

experience of, and considered that issues raised were resolved efficiently within, the Department except in areas where it had no control, such as using lecture theatres outside the Department, and examinations held very close together caused by constraints imposed by the dual honours system. The team noted that the student feedback for 2003-04 was generally positive. It did not, however, find documented evidence to indicate action taken in response to the student feedback. Students indicated that they found the staff approachable and enjoyed a high level of personal support and the team would wish to encourage the Department to extend that support through the exploration of more innovative and supportive approaches to help those students who are failing or in danger of dropping out.

194 Overall, notwithstanding the points made above, the audit team formed the view that the standard of student achievement was appropriate to the titles of the awards and their location within the FHEQ. It also concluded that the quality of learning opportunities available to students was suitable for programmes of study leading to the named awards.

### **The use made by the institution of the Academic Infrastructure**

195 The University considered that it had reacted satisfactorily to the *Code of practice*, the FHEQ and subject benchmark statements. At the same time, it acknowledged the need to accelerate the development and active use of programme specifications; continue to ensure that its courses and programmes are consistent with the FHEQ; and to test practices against the *Code*.

196 The process of preparing programme specifications commenced in 2000-01 but the University acknowledged in its SED that full implementation of programme specifications had not been accorded appropriate priority, until recently. In spite of the fact that web pages on programme specifications were set up in June 2003 to help schools and departments prepare programme specifications, not all schools and departments met the deadline of September 2003 set by a joint working party formed by the QAC and LTC. Moreover, although the Quality Assurance Office and course development subcommittees processed a large number of programme specifications during the 2003-04 academic year, a number of programme specifications remained outstanding at the time of the institutional audit.

197 The University acknowledged that the FHEQ needed to be explicitly embedded in its approach

to course development and review at all levels. In consequence, guidance for course development subcommittees has been revised to address the issue of articulation between ILOs and level descriptors in the FHEQ. In 2002-03 the University undertook a review of selected masters level programmes to test their alignment with the FHEQ. The audit team learned that the MBA and MD programmes were to be reviewed in order to clarify the level and the criteria for the award of both programmes but this had not been completed at the time of the audit visit. The team also noted that the University's IQA of mathematics (June 2003) had highlighted a lack of adherence to the FHEQ. It would encourage the University to accelerate its progress in respect of the FHEQ.

198 The University considered it timely to re-examine its practices against the sections of the *Code of practice*. In the University's view, there was no need for passive conformity or for the creation of institutional codes of practice for each aspect of the *Code*. It considered, rather, that it should continue to engage with the principles so as to reflect (or even improve upon) practice in institutional activities. The QAC received a paper confirming where University practice was consistent with the *Code* and indicating where further work may need to be considered. Earlier developmental engagements and the DATs conducted within the institutional audit confirm that the University has engaged with subject benchmark statements.

199 The audit team saw evidence of the means by which the University has sought to ensure that its practices reflect the principles of the *Code of practice*. The University would appear to be seeking to ensure that proper cognisance is taken of the FHEQ, for example, in its revised course development procedures. Programme specifications had not been accorded appropriate priority but the University has taken steps to remedy the matter. Overall, the audit found that the University has sought to engage with all aspects of the Academic Infrastructure.

### **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**

200 The SED provided a useful description of the University's main committees, processes and key personnel as they apply to the management and enhancement of provision and the assurance of quality and standards. It included the University's reflection on its framework for managing quality and standards which has been strategically developed

since 2001. The audit team found that the evaluation sections of the SED were helpful and comprehensive statements of: the University's perceived strengths; the actions it had taken, or will be taking, to address issues; and the challenges it faced.

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

201 The SED identified the University's intentions for the enhancement of quality and standards as consequences of the development of its policies, procedures and practices. These have been commented on, as appropriate, in this audit report. However, the audit team identified two issues which were considered to be of particular significance to quality enhancement at the level of the University. These concerned the management and accuracy of the University's data and information, and KEELE2006, a major initiative for change involving the restructuring of the University.

202 A SCIMS is to be implemented over the next three years, accompanied by improved networking and IT facilities, and support for a VLE. The former will enable the University to achieve its objective of improving the availability and quality of its student data for use by the University and its departments for monitoring and review purposes. More effective mechanisms for routine monitoring of information to ensure reliability, accuracy and completeness will be implemented, and more systematic capture of feedback from students on their experience of the University's published information will be undertaken. The University also has implementation plans for publication of the data required to comply with teaching quality information requirements. The audit team believes that these improvements will provide the systems and infrastructure for more timely and efficient evaluation of its procedures and processes.

203 In common with many other universities, Keele is currently undergoing a programme of change and development denoted KEELE2006. Its objective is to address the rapid rate of change currently taking place in the higher education market place, and to position itself optimally in 2006 with regard to its core businesses, its traditional strengths, and current and prospective markets, to ensure its survival and growth over a 10-year time horizon. Consultation has been taking place in the University with staff and students following the Vice-Chancellor's initial consultation paper of September 2003. Agreement on the way forward is expected at the Council meeting on 1 July 2004, when a formal plan will be submitted to establish named research institutes, new academic structures, and the proposed timetable for

implementation. The University expects that, following this strategic review and restructuring, enhanced procedures and processes will be put in place to take forward its commitment to monitoring and review.

### **Reliability of information**

204 The audit process included a check on the progress made by the University towards production of the information set out in the format recommended in *HEFCE 02/15* and *03/51*. The University has identified action necessary to ensure that it complies with teaching quality information requirements and produced a timetable detailing the dates by which action is to be completed. At the time of the audit visit, the University had identified the senior management, main information and technical contact personnel within the University. A teaching quality information officer post had been approved and the University planned to appoint to the post immediately.

205 The audit team found that no significant issues were identified in the SED or the SWS with regard to information available to students, and no such issues emerged from the team's discussions with students and staff. Students who met the team were positive about the usefulness of the information available to them at University and departmental levels.

206 The SED details the current system for monitoring accuracy of information, with both academic and administrative departments bearing responsibility for information on their web sites. KIS are responsible for the University's web site, in collaboration with departments. Although there are some omissions in current published information (for example, some programme specifications), it is intended that this will be rectified as the University completes its plans to meet the requirements set out in *HEFCE 02/15* and *03/15*.

207 The audit team found that, overall, the University makes good use of internet, intranet and print materials as sources of information to students and a wider audience. The team found the information provided by the University to be reliable and accurate, although it noted some variation in quality and completeness of information, in particular, in relation to publication of programme specifications. The University's web site was attractive and easy to use. The team concluded that the University is taking a sound approach to the production of information, which has the potential to ensure that the information it publishes will be comprehensive and of a high standard when its current plans are fully implemented across the University.



## Features of good practice

208 The following features of good practice were noted:

- i the IQA process (paragraph 52);
  - ii the thorough consideration of external examiner reports at institutional level (paragraph 60);
  - iii the promotion opportunities to the title of Chair on the basis of excellence in teaching and organisation and managerial activities (paragraph 86);
  - iv the support for teaching and professional development provided for GTAs (paragraph 89); and
  - v the wide range of student support services provided by the University (paragraph 110).
- iv review its student representation and induction arrangements for part-time students to ensure that such students are not disadvantaged (paragraph 74);
  - v consider the development of internal benchmarks to measure student progress at both module and programme level (paragraph 82);
  - vi provide a consolidated, authoritative and accessible single reference point for both university-wide and course-specific regulations (paragraph 101); and
  - vii continue to keep under review the range of support services (social, pastoral, language and academic) available for international students to ensure the support of current international students and the prospectively larger numbers anticipated as part of KEELE2006 (paragraph 104).

## Recommendations for action

209 The University is advised to:

- i use the opportunity provided by KEELE2006 to reflect on the effectiveness of the structures it has in place to ensure that it is able to exercise appropriate oversight of quality and standards at an institutional level in the future. As part of this process, the University is advised to establish formal reporting relationships between appropriate departmental/school committees and key central committees responsible for matters of quality assurance and enhancement, for example, the QAC, ARC and the University LTC in the current structure (paragraph 34);
- ii strengthen the institutional oversight of all existing collaborative provision, including that which is currently being phased out (paragraph 39); and
- iii review the annual monitoring review process to ensure that the University obtains sufficient qualitative and quantitative information to enable it to exercise institutional oversight (paragraph 49).

210 It would be desirable for the University to:

- i consider establishing criteria for the appointment of external members in its course approval and monitoring processes (paragraph 54);
- ii consider formulating a policy that codifies the involvement of external examiners in the modification of courses and modules (paragraph 61);
- iii continue its support for staff working at module level in the development of module outlines expressing ILOs (paragraph 66);

## **Appendix**

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

The University welcomes the report of the institutional audit carried out in May 2004 and the audit team's confirmation of broad confidence in the University's present and likely future management of quality and standards, the standards and quality of its learning opportunities as demonstrated in the discipline audit trails, and the positive engagement by the University with the demands of the national reference points. We are also aware of the considerable contribution made by Keele students to the positive outcome of the audit.

The University is pleased to note that the general tone of the report is one of positive appraisal and that it identifies five specific substantial areas of activity as features of good practice, which include essential quality assurance procedures such as the internal quality audit process and the treatment of external examiners' reports, the support and opportunities provided for staff at various points in their career development, and the range of support services offered to our students. The University will continue to work towards the further enhancement of all these areas.

The University takes seriously the advice given to it in the 'Recommendations for Action' section of the report, which relate primarily to the strengthening of certain aspects of institutional oversight, particularly better coordination of information flow and procedures between the University's schools and its centre, and further improvements in the provision of information, support and representation for students. An agenda will be formulated from the beginning of the new academic year to respond to these recommendations, and a strategic review in two years' time will assess progress against the objectives set.

We appreciate the fact that the audit team has taken appropriate note of the University's KEELE2006 change initiative, both in its finding of 'broad confidence' and in the advice given to the University. We welcome the broad thrust and many of the specifics of this advice, considering them to be in general well-founded and constructive, enabling us to build on developments which in many cases had already begun, not least in relation to the implementation of KEELE2006.

