The University of Northumbria at Newcastle

February 2009

Annex to the report

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Introduction

A team of auditors from the Quality Assurance Agency for Higher Education (QAA) visited the University of Northumbria at Newcastle (the University) from 22 to 26 February 2010 to carry out an Institutional audit. The purpose of the audit was to provide public information on the quality of the learning opportunities available to students and on the academic standards of the awards the University offers.

Outcomes of the Institutional audit

As a result of its investigations, the audit team’s view of the University of Northumbria at Newcastle is that:

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

On this occasion the team carried out a hybrid Institutional audit. The hybrid process is used where QAA considers that it is not practicable to consider an institution’s collaborative provision as part of standard Institutional audit, or that a separate audit activity focusing solely on this provision is not necessary.

Institutional approach to quality enhancement

The University does not have a specific quality enhancement strategy; rather it has taken an integrated and strategic approach to quality enhancement to underpins and bring cohesion to a broad range of enhancement activities.

Institutional arrangements for postgraduate research students

The audit team found that the arrangements for postgraduate research students, including those for support, supervision and assessment, were effective and met the expectations of the Code of practice for the assurance of academic quality and standards in higher education (Code of practice), Section 1: Postgraduate research programmes.

Published information

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

Features of good practice

The audit team identified the following areas of good practice:

- the comprehensiveness and clarity of University guidance materials provided to staff, students and external participants involved in its quality assurance processes (paragraph 63)
- the effective partnership between the University and the student body in ensuring the proactive involvement in and valuable contribution made by students at all levels to the quality assurance processes, the formal deliberative structures and other aspects of University deliberations (paragraph 82)
- the institution’s integrated and strategic approach to quality enhancement which underpins and brings cohesion to a broad range of enhancement activities (paragraph 140)
• the contribution of the Graduate School and its effective and complementary working relationship with the academic schools in providing a common support framework and sense of community for postgraduate research students across the University (paragraph 188).

Recommendations for action

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

Recommendations for action that the team considers advisable:

• given the diversity of deliberative structures below school level, the University should clarify more explicitly the level of responsibility delegated to the school learning and teaching committees in the formal consideration of the annual programme monitoring process, and articulate more explicitly the criteria for reporting at institutional level (paragraph 34)

• the University should review its approach at school and institutional levels to the management and monitoring of validated collaborative provision to ensure that all processes for its management adhere to the institution’s own quality assurance and regulatory frameworks. Furthermore, the University should clarify and articulate where responsibility and oversight for the management of collaborative provision lies at both school and institutional level (paragraph 166).

Recommendations for action that the team considers desirable:

• review the scope and ways in which management information/data is flagged and used to inform the annual programme monitoring process (paragraph 53)

• continue to monitor the academic performance of international students on all University programmes in relation to their respective entry profile and subsequent progression and award outcome (paragraph 108).

Section 1: Introduction and background

The institution and its mission

1 The University of Northumbria at Newcastle was established in 1992 when Newcastle Polytechnic received university title under the terms of the Further and Higher Education Reform Act. The Polytechnic had been established in 1969 through the amalgamation of Rutherford College of Technology, the College of Art and Industrial Design and the Municipal College of Commerce; the City of Newcastle and Northern Counties Colleges of Education joined later in 1974 and 1976 respectively. A further merger in 1995 with the Bede, Newcastle and Northumbria College of Health Studies meant that the University became one of the largest in the UK. The institution’s formal title is ‘University of Northumbria at Newcastle’ and this is used on formal documents including degree certificates; the shorter title ‘Northumbria University’ is used as the University’s trading name.

2 Currently, the University has over 34,000 students, including around 5,000 studying through collaborative arrangements and 2,000 studying on distance-learning or distance-delivery programmes. Of this population, approximately 15 percent are postgraduate and 32 percent study part-time. Of the student body at Northumbria 79 percent are from the northeast region and 14 percent are international students.

3 The University’s collaborative provision includes UK validation arrangements with 13 partners, including further education colleges and a private company. The majority of collaborative students study through overseas franchises or validation arrangements with nineteen partner institutions in countries including France, Germany, Hong Kong, India, Malaysia, Singapore, South Korea and Sweden. A number of articulation agreements are also in place to allow students advanced entry to the University’s programmes.
4 The University has two main campuses, the City Campus, within Newcastle city centre, and the Coach Lane Campus, 3.5 miles away and the location of the School of Health, Community and Education Studies. The City Campus itself is divided into two parts, linked by a footbridge across the City’s central motorway. The City Campus East opened in September 2007 and is the location for the Schools of Law, Design, and the Newcastle Business School. The remainder of the University’s schools are based at City Campus West which is currently undergoing a significant refurbishment, including the construction of a new sports facility and campus pedestrianisation. The School of Design also operates a small satellite campus in Islington, London, for fashion students.

5 Academic provision is based in nine schools: Applied Sciences; Arts and Social Sciences; Built Environment; Computing, Engineering and Information Sciences; Design; Health, Community and Education Studies; Law, the Newcastle Business School; Psychology and Sport Sciences. In addition, the Graduate School provides support for postgraduate research students across all of the schools. The schools have a degree of budgetary control and some autonomy in deciding their internal structures, with some having distinct ‘divisions’ or ‘subject groups’.

6 The University’s mission has recently been revised, following the appointment in 2008 of Professor Andrew Wathey as its Vice-Chancellor and Chief Executive, and a full review of its Corporate Strategy has recently taken place. The new mission, confirmed by the Board of Governors in November 2009, states that:

‘Northumbria creates and applies knowledge for the benefit of individuals, communities and the economy. Through excellent research, teaching and innovation we will transform lives, making a powerful contribution to cultural and economic development and regeneration, in the City and Region, nationally and globally.’

7 The mission is an integral part of the University’s Corporate Strategy 2009-2014 and was approved by Academic Board and the Board of Governors in November 2009. The new strategy builds on the Corporate Plan 2007-9 and on the achievements of the preceding period which included improvement in Research Assessment Exercise performance, increased entry grades and the major developments to the University’s estate. The new strategy seeks to respond to significant changes in the higher education environment, including economic challenges and potential changes to government policy, and sets out new directions for the University. While maintaining a focus on learning and teaching, the University states that it intends to place a ‘greater emphasis on research development, not only as an activity in its own right but one which also informs learning and teaching and its relations with business and the community’. Other key priorities for the University include increasing its regional engagement, strengthening partnership working and collaboration, and the enhancement of its reputation both nationally and internationally.

The information base for the audit

8 The University provided the audit team with a briefing paper and supporting documentation, including that related to the three partner link visits and the sampling trails selected by the team. The index to the Briefing Paper was referenced to sources of evidence to illustrate the institution’s approach to managing the security of the academic standards of its awards and the quality of its educational provision. The team had a hard copy of all documents referenced in the Briefing Paper; in addition, the team had access to the institution’s intranet.

9 The Students’ Union produced a student written submission (SWS) setting out the students’ views on the accuracy of the information provided to them, the experience of students as learners and their role in quality management.
In addition, the audit team had access to:

- the report of the previous Institutional audit, April 2005
- the report of the Collaborative provision audit, May 2006
- the Overseas collaborative provision audit report with Zhengzhou University (China), May 2006
- the report in relation to the Major review of healthcare programmes, March 2006
- the Foundation Degree report on Business and Management, June 2005
- the report on the mid-cycle follow up to audit activities, June 2007
- Review of research degree programmes, July 2006
- the institution’s internal documents
- the notes of audit team meetings with staff and students.

Developments since the last Institutional audit

The previous QAA Institutional audit, which took place in April 2005, found that broad confidence could be placed in the soundness of the University’s current and likely future management of the quality of its academic programmes and the academic standards of its awards. The audit team recommended that the University consider further desirable actions in a number of areas to ensure that the academic quality and standards of the awards it offers are maintained. These were to further embed good practice in the identification of plagiarism; continue to enhance the provision of library resources; and, continue the development of the Virtual Graduate School as a means of integrating the graduate research student experience across the schools.

The audit team explored the University’s response to these recommendations and established that good practice had indeed been further developed in the identification of plagiarism by the adoption of a more systematic approach to data collection in 2008 to inform a consistent approach for supported staff and student development. Further development in 2009 focused on recording mechanisms in schools and more targeted advice and support. The Academic Misconduct (Student) Group recommendations were received by Academic Board in July 2009 for inclusion in the Guidelines for Good Assessment Practice. The roll out to schools of Turnitin emphasises its use as a diagnostic tool. Implementation of academic misconduct regulations extends to postgraduate research provision.

Enhancement of provision of library resources has been the subject of considerable activity and development. A £6 million library refurbishment and increased access at the City Campus has seen substantial changes to the service.

The once ‘virtual’ Graduate School is now a physical presence with a Director, administrative staff and dedicated facilities. The reporting line is directly to Deputy Vice-Chancellor (Research and Innovation) with a formalised committee structure and an associate dean in each school with responsibility for research.

In 2006, the University was subject to a Collaborative provision (CPA) audit and an audit of the University which considered the overseas collaborative arrangement with Zhengzhou University (ZU), People’s Republic of China. The ZU audit concluded that the University was operating the partnership with an appropriate regard for the advice contained in the Code of practice. In addition to recognising a number of positive features, these audits identified the following points for consideration: that the University should continue to ensure that students for whom English is a second language are fully capable of learning through the medium of English from an early stage in their programme (CPA 2006) and keep language testing method under close review in respect...
of equivalence to the International English Language Testing System (IELTS) (ZU 2006). The University was also advised to ensure that the necessary documentation is available for partnership review so that major institutional issues may be addressed before consideration is given to programme delivery (ZU 2006).

16 In July 2007, the University’s Learning and Teaching English Language Task Group’s recommendations on standard minimum entry requirements (6.0/6.5 undergraduate, 6.5 postgraduate/postgraduate research) and mapping of recognised tests to IELTS scores was accepted. English language admission requirements were raised for some programmes in 2008 but lowered for one programme in the School of Computing, Engineering and Information Sciences with the removal of specified requirements for elements of language proficiency in 2009. However, in 2010, the SWS reiterated a concern about the impact on all students of low language proficiency. This matter is further addressed in section 3 and, in particular, the recommendation to continue to monitor the academic performance of international students.

17 The University’s Collaborative Handbook provides for a systematic approach, in clearly articulated guidance, for the documentation requirements for partnership review and their consideration. This is further reviewed in section 5 on the management of collaborative provision arrangements.

18 In addition to these developments in response to external scrutiny, the University has undergone substantial changes during the intervening period. These have included a period of growth, changes in the estate, restructuring of senior executive responsibilities and a reorganisation of the support services for learning and teaching. A new mission and Corporate Strategy for 2009 to 2014 was approved by Academic Board in November 2009. Over the next five years, the University aims to double its research capacity and income; achieve in all subject areas at least 90 percent satisfaction in the National Student Survey (NSS); create substantial new partnerships in the city and region to optimise its role in driving economic, social and cultural development in north-east England; increase global recognition and reputation by building its international presence and partnerships overseas; and extend its already leading position in the provision of master’s-level education and increase postgraduate research student numbers by 50 percent.

Institutional framework for the management of academic standards and the quality of learning opportunities

19 Responsibility for the primary mechanisms that define and maintain the academic standards of awards is specified by the University’s Quality and Standards Framework. The Framework is founded on three principles: responsibility for the quality of the student experience lies with school staff, support services and partner institutions at the point of delivery; quality assurance procedures are not an end in themselves but lead to enhancement of learning and teaching; and quality assurance processes are evidence-based, making full use of available management information and contributing to the further development of that information. The institution’s Briefing Paper summarised the key elements of the Framework as:

- ‘Alignment with external reference points, including the QAA Academic Infrastructure
- The University academic framework, including the Modular Framework for Northumbria Awards and the Assessment Regulations for Northumbria Awards, which apply to all taught programmes, and the University’s Research Degree Regulations and Framework for Professional Doctorates
- Examination boards and external examiners, whose responsibilities are defined in the Examiners’ Handbook. The University operates a two tier system of examination boards, Module Examination Boards and Progression and Awards Boards
- The Programme Approval Process for taught programmes
The Programme Review Process for taught programmes

The University’s Collaborative Procedures

Student involvement in quality assurance processes

Links between quality assurance and learning and teaching enhancement processes.

Responsibility for the University’s awards, the quality and standards of the academic programme and the quality assurance framework, rests formally with Academic Board but development and operation of the Framework for taught programmes is delegated to the University Learning and Teaching Committee (ULT). The Research and Innovation Committee (RIC) has equivalent responsibility for research degrees.

The ULT is responsible for developing and monitoring progress on the University Learning and Teaching Plan, for promoting enhancement activity and overseeing the development and operation of the quality assurance framework for taught programmes. An extensive range of subcommittees include the Programme Approvals Scrutiny Sub-Committee (LTPAS); External Examiners’ Appointments Sub-Committee; Regulations and Frameworks Sub-Committee; Innovations and Grants Sub-Committee; school learning and teaching committees (SLTs); school module examination boards and progression and awards boards; and school programme committees and staff-student liaison committees. Since the 2005 audit report, the University has devolved more responsibility to ULT’s subcommittees to manage the volume of business more effectively, including the transfer of additional responsibility to LTPAS and the creation of the Regulations and Frameworks Sub-Committee.

The RIC monitors and evaluates the level and quality of research activity and outputs, including postgraduate research student outcomes. The RIC has a number of subcommittees. Of these, the Graduate School Committee (GSC) operates with direct delegated authority from Academic Board for aspects of research degrees including regulations, frameworks and procedures, research training and supervision, and the progress of research students. Other subcommittees include GSC Examinations Panel; GSC Professional Doctorate Standing Group; school research and innovation committees (or equivalent); and the University Ethics Committee.

At school level there is a diversity of structures and the audit team experienced some difficulty in identifying precisely where reports are considered in each case. There was some concern at the potential for dilution of key issues as quality assurance reporting proceeds through multiple layers of structure, which may be at different levels in different schools. It was not always clear to the team precisely how ULT manages the level of responsibility delegated to SLTs, particularly for monitoring of the annual programme monitoring process (see Section 2).

Executive responsibilities

The Vice-Chancellor and Chief Executive is responsible to the Board of Governors and has ultimate executive responsibility for the quality and standards of the University’s awards. He is supported by the Vice-Chancellor’s Executive Group which includes the Deputy Vice-Chancellor and Finance Director, and Deputy Vice-Chancellors (DVCs) for Learning and Teaching, Research and Innovation, Region and Engagement, and Strategic Planning, and the Human Resources Director. Deans report directly to the Vice-Chancellor and have devolved responsibility for resource management, quality assurance, and management of the academic programme in their school. Thematic responsibilities are held by associate deans in schools appropriate to the nature of provision within each. A Director heads the Graduate School with responsibility for operation and maintenance of the academic frameworks and regulations for research degrees and reports to the DVC (Research and Innovation). The Academic Registrar, reports to the DVC (Learning and Teaching) and has responsibility for operation and maintenance of academic frameworks and regulations for taught programmes and for programme approval and review processes. Consistency in operation of University procedures is supported by the Registrar through a less formal responsibility arrangement for school registrars.
Section 2: Institutional management of academic standards

Approval, monitoring and review of award standards

24 The University’s framework for assuring the academic standards of Northumbria awards has been aligned with The framework for higher education qualifications in England, Wales and Northern Ireland (FHEQ), the Framework for Qualifications in the European Higher Education Area (FQ-EHEA) and the Higher education credit framework for England: Guidance on academic credit arrangements in higher education for England. QAA’s Code of practice has been used in the design of procedures and the subject benchmark statements inform academic programme developments.

25 The University’s schools have delegated authority for validating and approving new programmes and for approving changes to existing ones, within the agreed processes detailed in the Programme Approvals Handbook. New programme proposals, however, are considered initially by the University Learning and Teaching Committee’s (ULT) Programme Approval Scrutiny (LTPAS) Sub-Committee for alignment with the University’s academic framework; the University’s Executive for resource issues, before permission is granted for development. The LTPAS determines the level of external scrutiny required and the type of validation and approval event.

26 Approval events are chaired by a member of staff who is external to the school and drawn from the ULT register of approved panel chairs. Panel members consist of an independent, external subject specialist; internal University academic staff, including a member of the school learning and teaching committee; and a secretary nominated by the school Registrar. For programmes including placements, work-based learning and/or distance learning, panel members with specific expertise are selected. Where professional, statutory or regulatory body (PSRB) approval for the programme is required, the events, whenever possible, are held simultaneously with representatives from the PSRB included as panel members. The University engages with over 50 PSRBs and engages each in the approval, accreditation or recognition of its awards.

27 For professional doctorate programmes, the validation and approval panel comprises two members of the Professional Doctorate Standing Group, one being independent from the school, as chair; an external adviser; a school learning and teaching committee (SLT) member or University Service staff member who is experienced in the application of the Assessment Regulations for University awards. Proposals for new Professional Doctorate programmes are also submitted to the Graduate School’s Professional Doctorate Standing Group for initial approval.

28 Proposals for new programmes and named pathways within programme frameworks are subject to a rigorous process of pre-development scrutiny, documented via the New Programme Proposal and Financial Costing Form which must be approved by the SLT committee and signed off by the Dean and the Director of Library and Learning Services. The outcomes of programme approval events are recorded and SLT is responsible for ensuring that all conditions are met before the programme commences. Programme approval, with the exception of collaborative programmes, is not time-limited. The audit team examined a number of programme approval trails and confirmed that the process is well embedded within the University and that all requirements are met before programmes can operate. Programme specifications, using agreed templates are published on the University web pages for all programmes.

29 Proposals for revisions to a programme are made using a standard template that is considered by SLT, which decides on the appropriate approval mechanism. To assist the SLT in making their decisions, the programme team must submit a ‘log of changes’ to the committee. Major changes require an approval event; minor changes require the support of the external examiner and, in some instances, a report from an external subject specialist; administrative changes are recorded on the Programme Specification Change Log. SLT is also responsible for approving changes to modules or the addition of new modules. SLT is guided in its decision-making concerning the level of change by a set of informative documents including the Programme Approvals Handbook and the Programme Specifications Guidelines. Major and minor
changes to programmes require the production of a revised programme specification, published on the website with the Programme Specification Change Log appended. Procedures for the withdrawal of modules or programmes are comprehensive and detailed within the PAH. SLTs are responsible for ensuring that suitable arrangements have been made for any continuing students on the programme.

30 Procedures for module, annual programme and periodic review are detailed in the Review Handbook which provides a comprehensive guide for all review processes. It is a requirement of the University that all reviews are evidenced-based and the main purpose for each review is defined clearly. Module review uses a standard template and takes place at the end of delivery, initially by the module tutor, but overseen by a school committee. Individual programmes or clusters of programmes that share common modules are reviewed annually, using a standard template. Collaborative programmes are normally included within the review of the home-based provision but must be evidenced specifically. SLT consider the annual programme monitoring (APM) reports before reporting any issues and identified good practice to the ULT. All templates that consider collaborative provision or Foundation Degrees are forwarded to the Academic Registry for the preparation of institutional-level reports which are considered by ULT and Academic Board.

31 Schools operate a variety of procedures for reviewing and evaluating the APM reports and for reporting to the SLT. In one school this is undertaken by a review subcommittee of the SLT, in another it is undertaken by programme directors and in a third by the programme committee and the Learning and Teaching Management Group before reporting to SLT. The audit team considered a number of APM reports and concluded that, although the template for the report was comprehensive, not all reports were completed as fully as the University requirements demanded. In a number of instances incorrect templates were used, specific sections were not completed and statistical information was not included or not appended to the report. In one school, similar issues relating to these inconsistencies were reported to the SLT in consecutive years.

32 The audit team noted that many of the blank sections within the APM templates were associated with the requirement to analyse statistical information which is provided via ‘Northumbria World’ to populate the relevant sections. Northumbria World is a desktop application which integrates the main University databases, providing designated users with access to up-to-the minute data and reports. This system is used to provide a range of data for monitoring, review, examination boards and for the generation of student transcripts. Programme teams are required to comment on the statistics provided but only if they are ‘flagged’ as being outside of the agreed targets or criteria. Where the data set is not flagged then no statistical information is inserted. An issue raised by a number of schools is the requirement to report against flagged data only, recognising the limitations this imposes on analysing trends. Additionally, data for the home and collaborative delivery is amalgamated for the programme as a whole, making a comparative analysis for individual cohorts on admissions, progression rates and award outcomes more difficult, or for the internal review groups to verify the accuracy of comments made within the reports. Given that the work of the specially convened International Student Performance Task Group had found that the average rate of ‘good’ awards for students outside Europe was lower than for those in the UK or European Union (EU) (see paragraph 53), the audit team considered that a lack of disaggregation of the performance of different cohorts at the systematic APM level is not currently conducive to more efficient monitoring of progress at the institutional level.

33 Once completed, there is a requirement for the SLT to sign off the APM reports, but the audit team noted that this section of the report was infrequently completed. Staff explained that this was due to the reports being produced electronically; however, the same issue has been identified as a ‘disappointing aspect’ of the process within an internal report to the ULT during 2009. The same report confirmed the findings of the audit team that there were no comments or points to be taken forward to ULT from the SLTs for the range of international collaborative provision APMs, particularly when one collaborative APM reviewed by the team had a number of
issues associated with progression rates and assessment completions. This programme was not included within the internal report presented to ULT resulting in the issues not being reported to the University’s senior committee. Given the lack of consistency in completing the reports, the monitoring of actions resulting from them, and that the issues are not always reported to ULT, the University may find it helpful to reflect on whether the levels of variability within the reports and the actions taken to address identified issues at the school level fall within the bounds of acceptability.

34 ULT is cognisant of many of the issues raised and has instituted, from January 2010, a Review of Review Process Task Group to evaluate and report back on the review processes. The audit team supports this approach and advises that, given the diversity of deliberative structures below school level, the University should clarify more explicitly the level of responsibility delegated to the SLTs in the formal consideration of the annual programme monitoring process, and articulate more explicitly the criteria for reporting at institutional level.

35 Periodic review operates on a six-year cycle and includes the completion of a standard template, a self-evaluation document, a student written submission (SWS), programme specifications, external examiner and APM reports for the previous three years, approval reports for new programmes where there is no APM and key performance data. The review panel, approved by ULT, consists of an independent chair; two members of staff; an external subject specialist; a Students’ Union nominee; and a PSRB representative where appropriate. All reports are submitted to ULT and actions required are signed-off when completed by the chair of the panel and the ULT chair.

36 The audit team found that the periodic review process was detailed and effective, taking place over two days with the second day including an enhancement showcase, offering a presentation of good practice associated with the programme(s). An examination of reports produced by the periodic review panels demonstrated that the process is robust and concludes with an identification of strengths and recommendations for further development. The programme team is responsible for compiling an action plan which is monitored by SLT.

37 The University has clear procedures for the approval, monitoring and review of programmes with good quality guidance materials for all involved the processes. Notwithstanding some issues that the audit team found in relation to the quality of management information used (see paragraphs 51-55), overall, the team confirms that the clarity and quality of these contribute to the assurance of academic standards and the quality of the student learning opportunities.

External examiners

38 The contribution of, and feedback, from external examiners are seen by the University as a key element of its quality assurance framework by providing assurance of the academic standards of its awards. The Examiners’ Handbook makes the role of external examiners explicit in that they are appointed to report on procedures and standards of assessment and to act as critical friends.

39 External examiners are appointed to all taught programmes offered by the University. They are nominated by the schools and considered by the ULT’s subcommittee for External Examiner Appointments before being ratified by the ULT. Criteria for the appointment of external examiners, and their role and purpose, is detailed in the Examiners’ Handbook which is a comprehensive and informative document. The ULT has the authority to replace, extend or vary the work of an external examiner. All new external examiners are provided with an induction by the school and receive a copy of the Examiners’ Handbook, an Introductory Guide for External Examiners and other relevant documentation. All external examiners have access to a dedicated web page and are invited to an annual seminar where a summary of the previous year’s comments from their reports is discussed. The Academic Registry maintains a register of all external examiner appointments and periods of tenure.
40 External examiners attend either the Module Assessment Board and/or the Programme Assessment Board. Following the Boards, they submit their reports on a standard University template, which contains both short response and detailed commentary sections. Schools are then responsible for posting the reports to a public folder which Registry staff can access for the preparation of an annual summary report to ULT and the Academic Board. External examiner reports are considered at school level by the SLT and it is the responsibility of the chair to ensure that actions are taken to address any issues, and that a response is provided to individual examiners from the Associate Dean, the programme manager or the programme leader. These are then made available to the school or programme student representatives. Administrative staff within the schools are responsible for monitoring that all reports have been received and responses have been sent: these together with any relevant action plans, are included in the subsequent APM report.

41 The audit team confirmed that the external examiner system within the University is well-established and that the external examiners overwhelmingly judge the standards attained appropriate to the level of the awards. The external examiners make a significant contribution to the assurance of academic standards within the University.

Academic Infrastructure and other external reference points

42 The audit team saw evidence that QAA’s Code of practice is embedded into the University’s guidelines and procedures and that the Academic Registry has undertaken a comprehensive mapping exercise to demonstrate where each section of the Code has been applied. ULT is responsible for monitoring the alignment of the University’s Academic Infrastructure with QAA’s Academic Infrastructure. New and revised sections of the Code of practice and subject benchmark statements are notified to ULT, SLTs and subject teams, and alignment with these is considered by the relevant University Service. Implementation is monitored through programme approval and periodic review processes.

43 The University’s modular framework is aligned with the FHEQ and the Higher education credit framework for England and alignment for new programme proposals is checked by LTPAS at the initial and approval stages. The University awards are aligned with the FQ-EHEA and Diploma Supplements are issued to all university-based and franchise students. Where University awards result from international collaboration, alignment with the relevant national quality assurance agency’s requirements is achieved.

44 The audit team also saw evidence that PSRB requirements and reports are considered appropriately by ULT.

Assessment policies and regulations

45 The University’s objective for assessment is set out in its Learning and Teaching Plan which states that assessments should secure the standard of its awards and be an effective tool for learning. The Assessment Regulations for University Awards, which are reviewed annually, apply to all taught programmes and variations to these must be approved by ULT. Policies and regulations specific to marking, moderation and the provision of feedback are contained in the Examiners’ Handbook. The regulations are supported by the Guidelines for Good Assessment Practice, designated learning and teaching advisers and the Centre for Excellence in Teaching and Learning (CETL) in Assessment for Learning.

46 The University has demonstrated its commitment to improving its support for staff in all aspects of assessment. The Assessment Enhancement Group has identified the top 10 priorities for action and has identified resources available for staff to access information associated with these issues. Additionally, a series of ‘Red Guides’ have been produced on specific aspects which include topics associated with assessment for learning and formative assessment and feedback.
47 The SWS identified some issues associated with the assessment process including the ‘bunching’ of assignments and inconsistencies between markers. The main issue, however, was associated with assessment feedback where students raised a variety of concerns relating to the timeliness of feedback and its usefulness. These concerns are reflective of the University’s scores in the NSS, which, although improving steadily until 2008 demonstrate a slight dip for 2009, and accord with the priorities identified by the University for the enhancement of the assessment process. The SWS recognised that the University has made progress in these areas and the comments from students met by the audit team assured them that the attention given to these areas, particularly, the Focus on Feedback campaign, and the introduction of a policy for the return of examination scripts to students, has been received positively and is leading to improvements. The students seen by the team displayed a sound understanding of the purpose of assessment and the ways in which the scores contributed to their final awards and related classifications.

48 Policy and procedures for the operation of a predominantly two-tier examination board system of Module Examination Boards (MEBs) and Progression and Award Boards are clearly identified and understood by all groups associated with the process. The audit team was confident that assessment boards were conducted consistently across the University. For collaborative programmes, MEBs and progression boards may be conducted at the partner institution; however, all award boards are conducted at the University.

49 The team saw evidence that the University has acted positively on the recommendation from its previous audit to embed further its good practice in the identification of plagiarism by requiring schools to produce an annual report to ULT; introducing postgraduate research Academic Misconduct Regulations; updating advice in the Guidelines for Good Assessment Practice on the design of assignments to avoid plagiarism; extending the use of TurnitinUK to students as a formative tool; establishing an Academic Misconduct Task Group, reporting to ULT, that reviews regulations and practices.

50 The audit team saw evidence that the University’s examination and assessment frameworks are supported by detailed and comprehensive policies and guidelines, including complaints and appeals procedures: the audit team considers these to be fit for purpose.

Management information - statistics

51 A key principle of the University’s Quality and Standards Framework is that quality assurance processes should be evidence based. The Academic Registry is responsible for the operation of the SITs record system and the Finance Department for the operation of the University’s data warehouse which is fed from SITs. Access to management information is through ‘Northumbria World’ (see paragraph 32). Information from this system has also been used to evidence the University’s Equality and Diversity Report and is being used to monitor the IELTS scores of international students against progression rates.

52 The SITs system is used for all student records, offering a range of reporting processes relating to students and programmes. Students can access their marks and information stored on the system via My Northumbria. They are also able to access it for, updating personal information, enrolling and re-enrolling, selecting from option choices and monitoring library books and other resources. The students met during the audit week spoke positively about the development of My Northumbria and its usefulness. This is not yet available to collaborative partner students although the University intends to provide access for all students.

53 Annual programme monitoring data sets are provided to programme leaders where the data is flagged against key performance indicators. The University states that this approach facilitates efficient and effective annual programme monitoring by allowing exception reporting. The University recognises that there remain some cases where the data has to be supplemented by local sources and is continuing to address these issues with the Data Quality Enhancement.
Project’s findings contributing to the debate. APM reports from some schools have questioned the accuracy of the data provided and also the effectiveness of the exception reporting process. Where no flags are raised, sections of reports contain no data sets and frequently result in no commentary for the designated sections within reports. In such instances the audit team concluded that the University’s claim that quality assurance processes should be evidence-based cannot be entirely verified, and considers it desirable for the University to review the scope and the ways in which management information/data is flagged and used to inform the APM process.

54 The periodic review process is supported by a detailed set of statistical information, provided separately from the APM reports, together with trend analysis figures for the last three years which is then flagged against performance indicators. These data sets, generated by the Northumbria World system, focus the team’s attention on key issues and enable the review panels to make informed decisions.

55 Notwithstanding the issues raised in this section, the audit team concludes that confidence can be placed in the soundness of the University’s present and future management of academic standards.

Section 3: Institutional management of learning opportunities

Academic Infrastructure and other external reference points

56 Responsibility for the primary mechanisms that define and maintain the quality of learning opportunities is also specified by the University’s Quality and Standards Framework. Responsibility for the quality of learning opportunities for collaborative provision rests with the partners, but their capacity to do so successfully is considered through approval mechanisms by the University Learning and Teaching Committee (ULT) and is subsequently monitored by school learning and teaching committees (SLTs) through the Annual Programme Monitoring (APM) cycle. The Research and Innovation Committee has equivalent responsibility for the quality of learning opportunities of postgraduate research students.

57 The Institutional Briefing Paper states that ‘The University approaches the QAA Academic Infrastructure as a valuable reference source for the development and management of its processes and programmes’. The audit team found much evidence of the use made of the Academic Infrastructure and familiarity among staff with its principles and purpose. The University seeks to align its frameworks, procedures and guidelines with the relevant codes that support the assurance and enhancement of the students’ learning opportunities. Currency is maintained and examples were seen of mapping exercises to evaluate alignment with elements of the infrastructure that had been updated, for example, the Code of practice, sections 8 and 9: Work-based and Placement Learning and Careers Education, Information and Guidance.

58 The audit team saw evidence that the Academic Infrastructure is used consistently and effectively across the University.

Approval, monitoring and review of programmes

59 Scrutiny of resources for learning and of programme learning, teaching and assessment takes place at the point of programme approval. The programme approval process requires the panel, which includes external members, to consider documentation in respect of the quality of learning opportunities that includes the learning, teaching and assessment strategy and how students are supported in their learning, employability and career development. Resource information for new modules, programmes or major revisions to programmes is considered and for programmes involving use of distance learning, evidence of appropriate scrutiny of a significant sample of the learning materials is required.
Periodic review assures the ongoing quality of student learning opportunities through student involvement, scrutiny of data including student feedback and by focusing on measures taken to enhance learning, teaching and assessment. The audit team looked at two specific reviews as well as a range of other review reports and action plans submitted for consideration by ULT. These illustrate panels’ attention to the quality of the student experience through the specification of actions about, for example: students’ access to a range of learning experiences; students’ finances and access to field trips and visits abroad; collecting, collating and responding to student evaluations; physical resource issues; review and revision of reading lists; the timing and quality of student feedback; the timetabling of classes more evenly to improve the experience of full time students; and the responsiveness to evolving internal and external contexts and professional requirements. Reports also identify good practice for dissemination more widely across the University, including employer engagement in the delivery of programmes that affords students regional networking collaborations, particularly in community-based work; good pedagogic balance between theory and practice; development of a school-based Student Advice Centre; and synergy between research and teaching.

The process is inclusive of students and Student Written Submissions (SWSs) seen by the team are comprehensive and allow for an iterative conversation with the discipline area, providing the panel with comprehensive information about the students’ experience.

Postgraduate research programme provision is periodically reviewed on a six-yearly cycle using a modified version of the standard periodic review process. Annual monitoring of performance of research degree students is conducted by the School Research Committee which provides a report to the Graduate School Committee, which in turn reports to Academic Board (via the Research and Innovation Committee). Periodic review of postgraduate research includes a self-evaluation document and an SWS. To support critical evaluation by the panel of the quality of the student experience, evidence provided by the Graduate School includes details of staff supervision accreditation and student training. Postgraduate research students’ responses to the most recent Postgraduate Research Experience Survey (PRES) and details of school-based research topics and capacity to supervise postgraduate research students.

Reporting tools provide panel members with clear guidance to appraise the students’ experience. Reports confirm the studentship process and the range of practice and skills developed. They comment on the appropriateness of opportunities for progression and completion and whether student views are sought and reflected upon. The SWS and review programme allow appropriate opportunities for students to engage in dialogue with the panel and represent their views and experience. Documentation provides evidence that these views and experience are received seriously, are valued and the quality of student learning opportunities carefully considered. The audit team found that the comprehensiveness and clarity of University guidance materials provided to staff, students and external participants involved in its quality assurance processes to be a feature of good practice.

The University states that the APM is a strongly evidence-based process drawing on a programme data set containing a range of data, including student feedback data, to support evaluation of the student experience. The APM template requires comment where data is flagged as outside of the expected range, either indicating need for action or as providing evidence of good practice. The APM process seeks to identify activity in relation to areas of good practice and innovation in learning and teaching for dissemination and developments for enhancement in line with the specific objectives of the school or University Learning and Teaching Plan. It also comments on the student experience of work-based or placement learning. Module review is similarly evidence-based, looking at student performance and feedback on the module, with any external comments. Fuller review is required only if this evidence indicates the need for more detailed scrutiny.
65 The ULT Committee is the locus for monitoring progress on matters that impact the quality of learning opportunities. The Committee’s minutes provide evidence of ongoing dialogue, triangulation of matters emerging from multiple sources and development of policy and process relating to, for example:

- action plans relating to the National Student Survey (NSS) for Library and Learning Services; IT Services; schools
- Attendance Policy
- disruptive behaviour in classrooms
- reports from task groups, for example, Work-based Learning and Placement Learning.

66 The Learning and Teaching Academy now provides the focal point for drawing together research based activity across the University in support of the development and management of student learning opportunities and the enhancement of the student experience (see further exploration in Section 4).

67 The audit team concludes that the University effectively maintains the quality of students’ learning opportunities and, overall, the University’s arrangements for programme approval, monitoring and review are sound.

Management information - feedback from students

68 The University’s arrangements for student feedback and policy on the use of questionnaires are set out in the Review Handbook. The Handbook requires the systematic collection of feedback at both module and programme level on all levels of undergraduate and postgraduate taught provision, and selectively on aspects of user provision at university level through user surveys. These surveys obtain quantitative data and are supplemented with qualitative data through student focus groups. The audit team was informed that student feedback was recently reviewed as part of the Review of Review in 2008.

69 The Briefing Paper states that the NSS is used instead of a programme questionnaire for those final-year students who are eligible. All schools are expected to liaise with Academic Registry on programme and module questionnaires. Whereas the programme questionnaire is standard across the University, example module questionnaires are provided by the University and the school has the flexibility to choose the questions ensuring an ‘overall satisfaction’ question is used. The University caters for non-undergraduate students through PRES and the postgraduate taught experience survey and the results are fed back into the APM process.

70 The audit team examined the process of collection and analysis of student feedback across the University and the use of the findings. The audit team saw evidence that programme questionnaires were used consistently across schools and results analysed and actions formulated. Responsibility for analysis of programme feedback lies with the individual schools. The team established that module feedback concentrates on student satisfaction with teaching and assessment and includes a specific question asking if the student is ‘overall satisfied with the quality of the module’. Programme questionnaires cover wider issues on the student experience and is modelled on the NSS.

71 The audit team found evidence of careful consideration of student feedback results. Issues arising from module feedback are reported via the module review summary template. Results from programme questionnaires are reported through the Annual Programme Monitoring template which is submitted to SLTs. Issues arising from programme questionnaires should be highlighted in the template and actions reported to SLTs.
72 The SWS stated students generally took the view that in their first year of study they did not know what action had been taken as a result of their feedback. The audit team saw that the University had responded appropriately to this through its ‘Focus on Feedback’ campaign which included a ‘you said we did’ campaign which was mentioned in a positive light by members of staff. The SWS made reference to improvements seen in relation to feedback from issues raised during the current academic year.

73 The audit team met with undergraduate and postgraduate students who stated that the University had responded well to feedback given through programme meetings and used the example of improved IT facilities at the Coach Lane Campus. The students referenced the University You Said We Did campaign and confirmed that module evaluations were completed on programmes.

74 The audit team found comprehensive, systematic use of NSS findings. The Briefing Paper states that following disappointing 2007 results a detailed action plan was formulated which led to an increase in the satisfaction of students in 2008. This was not sustained in 2009 and, as such, the Briefing Paper states the need for further action. The team researched the action plans and found clear evidence of action plans and reports being discussed at both institutional and school level.

75 Overall, the audit team formed the view that student feedback was sought effectively from students across the University. The results of school, institutional and national student feedback informs evaluation and enhancement of modules and programmes. Feedback was also sought through programme, school and University committees and through the student representative system.

Role of students in quality assurance

76 The University’s arrangements for student representation are contained within committee terms of reference. Student representation can be found at all deliberative levels of the institution, with sabbatical officers sitting on institutional-level committees and student representatives sitting on school and department-level committees. Students are primarily represented through the Student-Staff Liaison Committee which focuses on day-to-day student concerns and meets bi-annually. In addition, three students per programme sit on programme committees which report to the respective SLTs.

77 The Briefing Paper and SWS make reference to previous difficulties in ensuring adequate student participation in committees at school level. The University and the Students’ Union (SU) responded to this by introducing a system of school representatives who are appointed by the SU and receive a small honorarium of £300 per year. The audit team discussed with both staff and students the impact of this change, and it was felt that the new system had had a positive effect on participation levels and engagement. School representatives attend SLTs and student Wellbeing committees and are able to liaise with course representatives.

78 The SU is responsible for training and supporting school and course representatives. In 2008-09 the SU had 965 representatives registered of whom 400 had received training. The SU operates an Advice and Representation Centre which keeps a record of all representatives and provides training sessions. Online representative training began in 2009 which ensured non campus-based course representatives could also receive training. Staff and students are issued with a Course Representative best practice guide and web-based guidance in order to support effective use of the course representative system.

79 The Briefing Paper states that the SU is aware of the University’s collaborative partnerships, however, the resources are not currently available to engage with students from partner links to any significant extent. The audit team met with student representatives from three of the partner institutions who confirmed that they have effective mechanisms to feedback to the respective partner institution and students from one of the partner links visited are included within the University’s course representative system.
The Briefing Paper states that student involvement is central to the University’s periodic review process. The audit team saw evidence of this involvement in the sampling trails conducted into recent periodic reviews. Students on the particular discipline under review are invited to write a SWS. The process for creating the SWS is contained within the Periodic Review Student Contribution document, The University and SU have agreed upon the content of a list of questions, the results of which are used to generate the SWS. The report is drafted by the chair and agreed by those present. The team heard from both student representatives and staff about the positive and valuable effect of the participation of students in periodic reviews, including the particular involvement of sabbatical officers in the two-day review process.

The audit team also discussed student involvement in task groups and also University consultation with students on changes on programmes and regulations. Students stated that they felt they were consulted on changes and that students were always represented on key University task groups, citing the example of the Peer Support and Observation task group.

The audit team reached the view that, overall, the arrangements for student involvement in quality management processes are effective, and the way in which the University engages with students makes a valuable contribution to the management of the quality of learning opportunities. The team therefore identified the effective partnership between the University and the student body in ensuring the proactive involvement in and valuable contribution made by students at all levels to the quality assurance processes, the formal deliberative structures and other aspects of University deliberations to be a feature of good practice.

Links between research or scholarly activity and learning opportunities

The Briefing Paper claims that the University’s main focus as an institution has been on learning and teaching, however, the 2008 Research Assessment Exercise also saw a substantial improvement in the research profile and the corporate strategy 2009 to 2014 which has also made the further development of research a key priority.

The Learning and Teaching Plan states that teaching should be supported by high-level research and scholarship and staff contracts ensure that all teaching staff receive an allowance for research and scholarly activity. Research and scholarly activity plans are not in place for all academics, although staff are encouraged to express an initial interest in taking forward some research and if pursued this will be built into the staff appraisal system.

The University allocated the bulk of the funding received as part of the 2006 to 2009 HEFCE initiative aimed at ‘informing and enriching teaching with research’ towards supporting a series of school-based projects, with bids judged by the Research Informed Teaching Steering Group. In total 48 projects were funded across the three years of the initiative which have engaged students with all levels of research. The projects include the following: ‘Development of CAD and Assessment for New and Renewable Energy Curriculum’; ‘Pedagogical needs of non-traditional students’; ‘Learning through practical work: can we do it better?’ and ‘Involving students as researchers across the disciplines’. The audit team read progress reports on a number of these projects and were able to ascertain some of the benefits to student learning opportunities.

Other modes of study

The University has a significant number of students studying through distance learning and distance delivery. The University’s distance-learning programmes are, in most cases, delivered primarily through electronic media and the audit team saw a few examples of paper-based delivery undergoing development for electronic delivery. Distance-delivery programmes are defined as the delivery of a University programme by University staff using the premises and facilities of another organisation physically and geographically distanced from the University’s campuses. Although partner staff may deliver up to 20 per cent of the total teaching hours, overall control regarding delivery is maintained by the University.
87 The audit team saw evidence to confirm the Briefing Paper claim that for distance-delivery programmes, the quality assurance processes including review mechanisms are identical to those for students on University campuses.

88 The University has specific approval procedures for distance-learning programmes which include independent review of online materials and inclusion of a member of staff with expertise in distance learning on a programme approval panel.

89 The audit team explored the University’s mechanisms for supporting staff in the delivery, support and assessment of distance-learning and online provision. The team was informed that support is available from the LTech team which is part of the Learning and Teaching Academy (LTA), additional support from within the LTA includes academic advisers to provide support and guidance on the pedagogy of distance learning.

90 Distance-learning students have access to the University’s eLearning portal and the full range of electronic resources and the library runs a postal service for all print books for distance-learning and part time students.

91 The University’s Corporate Strategy places emphasis on regional engagement and employability of students. The University has developed a range of forms of flexible and work based provision. The work-based learning, accreditation of prior learning (APL), accreditation of prior experiential learning (APEL) and accredited work-based learning (AWBL) frameworks are examples of these provisions. The audit team noted that work based learning is subject to the same University approval processes, albeit complemented by a work-based specialist on the approval panel. The University has developed a number of frameworks to facilitate schools’ delivery to employers - the work-based learning framework (WBL) consists of a number of modules that help incorporate learning in the workplace. Similarly, the APL, APEL and AWBL frameworks developed in tandem with the WBL enable the accreditation of learning in the workplace. It was also noted that the University was successful in securing a HEFCE strategic development fund bid which has resulted in a three-year project building on its employer engagement initiatives. Support for staff involved in developing work-related learning and employer responsive curricula is provided by the Work Related Learning Services team.

92 The audit team concludes that the University's arrangements for other modes of study are effective and make a significant contribution to the quality of students' learning opportunities.

Resources for learning

93 The University’s resources for learning focus on Library and IT Services. Since the last Institutional audit, significant improvements have been made to the learning resources infrastructure in that the University provides high quality and up-to-date learning resources. The University states its significant innovations are the MyNorthumbria, NORA (the University’s library search engine) and the role the eLearning Portal (eLP) now plays in programme delivery.

94 The University has received positive feedback on library and IT provision in the most recent NSS. The allocation of resources is completed in the context of the Corporate Strategy with objectives set by the Learning and Teaching Plan. The University ensures that resource allocation is in line with academic needs through its annual Academic Development Planning (ADP) and Service Development Planning (SDP) rounds. New programme approvals include a programme costing template and the sign-off of library, IT and specialist resources aims to ensure that no programme is run without appropriate learning resources.

95 The audit team heard from staff and students that the University had recently enhanced the learning experience of its students through opening its libraries for longer hours, with the City Campus library open 24-hours, seven days a week, and the Coach Lane Campus open until midnight. The Library and Learning Services Department liaise with the academic community to develop and maintain a cooperative relationship and an understanding of the academic needs.
The University resource holdings currently include over 500,000 books, 50,000 journals and 300 databases; access to e-resources is through NORA.

The University monitors user satisfaction of the Library Learning Service through Library User satisfaction surveys and school committees which are used as part of the internal planning process. In addition a new initiative called the ‘Take 5 chair’ was trialled this year, giving students a more informal opportunity to feedback to library staff. The audit team was also further informed of the ‘you said we did’ campaign, through which it had acknowledged at peak times the library was at capacity. In response to the feedback received, the University had now opened the City Campus library 24-hours, seven days a week. The team was also informed that, following low NSS scores in some subjects, the library budget was targeting the lowest subject scores for further funding and improvement.

The University priorities for IT investment are determined through the ADP and SDP process, with major investment proposals received from the University Information Systems Management Co-ordination Group (ISMCG). The audit team saw evidence that IT development takes place in the context of a series of policies, approved by ISMCG.

The University’s Blackboard eLearning Portal (eLP) is operated by the LTech Team which is part of the LTA. Annual Student log-ins currently stand at 2 million, and over 70 per cent of modules make use of eLP for delivery.

In discussions with students, the audit team found that they were generally positive about the University’s approach to e-learning, in particular the access to lecture notes. The team heard that some students had commented on improved access to eLearning from the previous academic year. The audit team also noted that students studying abroad on articulation agreements did not have automatic access to Northumbria eLearning until they physically arrived at the University.

The audit team found that, overall, students were satisfied with resources for learning. Students were content with access to library facilities both at the City Campus and the Coach Lane Campus.

On the basis of the information provided and meetings with staff and students, the audit team found that the University’s arrangements for the provision, allocation and management of learning resources were effective in maintaining the quality of the student learning opportunities.

**Admissions policy**

The Deputy Vice-Chancellor and Finance Director is responsible for the overall admissions policy with operational responsibility falling to the Director of Marketing and Recruitment and through him/her to the Admissions Officer. The University also has an Admissions Committee whose remit is to develop the admissions policy, admissions criteria and business process for University admissions.

The current policy predates the latest QAA *Code of practice, Section 10: Admissions to higher education*, but was reviewed after the publication of the *Code* to assure alignment. Admission requirements for individual programmes are specified on the programme specification. The Policy also details admission on the basis of previous learning and admission with advanced standing and covers the admission of students with disabilities. Information on admission requirements for each programme is clear and available to students on the University’s website. The University is committed to the delivery of its ‘Passport’ scheme. The scheme, aims to increase higher education participation among widening participation cohorts through offering credit to recognise merit and potential.
105 All applications to undergraduate and taught postgraduate courses from home and EU students are dealt with by the admissions team based within the Marketing and Recruitment Department. Applications from international students are dealt with in a similar way to those from home and EU students but are handled by the international admissions team based in the International Office.

106 When asked where course admissions requirements were signed off in the institution the audit team heard that the University’s marketing team requests schools on an annual basis to review their admission criteria, as appropriate programme specifications are updated. The University’s Admissions Team maintains an overview of the admissions process but, when asked, staff were unable to articulate precisely how the Team interacted with the University’s deliberative structure and how institutional changes to admissions requirements were approved. The University might find it helpful to review its procedures for ensuring that the relevant academic staff are familiar with the ways in which the Admissions Team interacts with the University’s committee structure and how admission requirements are reviewed and updated.

107 The University has oversight of admissions across its collaborative provision programmes. Students on franchised provision awards register and enrol while those on validated provision register with the University to facilitate matters such as certificate production. It was further noted that details of modules within validated provision are not held within Northumbria World as these are not owned by the University. The responsibility for maintaining this module information rests with the individual schools.

108 The University responded to the Collaborative provision audit recommendation from 2006 regarding English language requirements by establishing an English Language Task Group which reported in July 2007 to ULT. ULT accepted the recommendation of minimum IELTS scores of 6.0 for undergraduate and 6.5 for postgraduate levels, including individual test variance of a maximum 0.5. The audit team noted that there were continuing issues with international student performance and English language through the SWS and through reports to ULT. In Dec 2009 ULT reversed its decision to implement a maximum 0.5 variance on IELTS. University senior staff stated that this change had been implemented after analysing one year of international student data and the conclusion that there was no correlation between English language requirements and student performance. The audit team concluded that the decision to reverse previous policy would benefit from analysis using available data and, as such, it is desirable for the University to continue to monitor the academic performance of international students on all University programmes in relation to their respective entry profile and subsequent progression and award outcome.

109 As a result of the discussions and reading, the audit team formed the view that there was fair, effective and consistent implementation of the admissions policy.

Student support

110 The aim of the University Student Wellbeing Plan is to support the University’s Mission through its commitment to enhance the intellectual, cultural, personal, social, physical and psychological development of students at the University.

111 The University provides clear information and guidance about its expectations for student support both to staff and to students. The significance of the induction period for new students is clearly recognised; however, the SWS makes reference to ‘information overload’ during the induction process.

112 Central to the University’s student support is its Student Services Department which offers clear guidance and support to students. The Student Services Department has a clear plan which has defined objectives.
113 All schools within the University have a wellbeing plan and submit an annual report on progress to the Student Wellbeing Committee and, in addition, complete a School Wellbeing Action Plan.

114 The Wellbeing Service provides a welfare and international student support team covering student finance, University scholarships and bursaries, access funds, international student induction, ‘meet and greet’, mentoring and advice and visa advice. University staff are provided with support and training and a guidance document.

115 The University operates a Careers and Employment service which falls under the auspices of the employability strand of the Student Wellbeing Plan.

116 In 2007 the Student Affairs Committee (now renamed the Student Wellbeing Committee) reviewed the University policy on guidance support and concluded that a personal tutor system was not necessarily the most effective way of providing students with the guidance to which they are entitled. Each school is free to set their own structures within a broad set of principles contained within the Student Guidance Principles document approved by that committee.

117 The students expressed high levels of satisfaction with the range and provision of support services and the quality of academic support. The audit team heard from both staff and students that although there was some diversity in respect of the support offered, it was appropriate and effective in each case. The team concluded that the University’s arrangements for student support were effective and maintained the quality of students’ learning opportunities.

Staff support (including staff development)

118 In its Human Resources (HR) Plan 2009-14, the University seeks explicitly ‘to recruit, employ and retain staff of the highest quality by creating a positive and stimulating working environment, offering competitive and flexible benefits and providing development opportunities to help staff to reach their potential’.

119 The Plan is designed to underpin the Corporate Strategy and articulates a clear set of objectives to support enhanced performance in five main areas: research, innovation and enterprise; learning and teaching; internationalisation; student well-being; and management and organisational culture. Measures of success reflect those used in the Staff Survey 2008 to allow for trend analysis. More than 1,800 members of staff responded to the 2008 questionnaire, giving a response rate of 62 percent. The results revealed that 92 percent of the staff who responded to the survey believe the University is a good employer and a good place to work. 74 percent of staff expressed satisfaction at work and 53 percent that they are valued by the University.
A higher proportion felt valued by their colleagues (87.5 percent) and an equivalent proportion felt valued by students (86.3 percent).

120 The University has a comprehensive set of policies for the recruitment, appointment and induction of staff that are clearly described and effectively communicated via the HR Department’s web pages. Procedures are wide-ranging and cater for different categories of staff, for example, the Part-time Staff Good Practice Guidelines. In meetings staff were clear about the nature of support and development opportunities made available centrally, related to institutional priorities and strategies, and locally by schools. Senior managers have unambiguous responsibility to assist HR in developing mechanisms for staff reward for excellence in learning and teaching and to promote the development of a culture of team working.

121 All new members of staff attend a Corporate Induction Day. There is mandatory training for academic staff appointed to teaching contracts who have no appropriate teaching qualification and less than two years full-time equivalent post-16 experience. They are enrolled onto the Postgraduate Certificate in Academic and Professional Learning which provides an option to continue to the Master’s in Academic Practice. The programme is designed to meet personal academic development needs in line with the University, higher education and national
priorities. Part-time staff may also take modules from this programme. Hourly paid part-time teaching staff contracted for more than three hours per week for more than six weeks, and Research Assistants who have teaching duties, are required by ULT to attend a one-day course, Induction to Teaching at Northumbria. This includes the principles of teaching and assessing in higher education, supporting students, diverse student needs, the University’s review process, staff development opportunities and trade union membership.

122 University procedures state that a probationary period ‘allows the University to assess the performance of a new member of staff in a planned and systematic way’ to determine whether they are able to carry out their duties. Academic staff are subject to a probationary period if they are a new entrant to teaching in higher or further education or are new to a post that has significantly different responsibilities when compared to the previous post.

123 The University’s staff development and training programme offers a comprehensive range of opportunities for all categories of staff which makes clear staff requirements for mandatory training. Academic staff development includes credit-bearing postgraduate modules, conferences, one-off events and development sessions, reward and recognition of achievements in learning and teaching and bespoke support and development opportunities. There are a range of guides that provide information to staff about their entitlements and the availability of financial support. Many staff support and development activities relate to learning and teaching enhancement and there exist a variety of mechanisms to disseminate and share practice more widely, for example, Northumbria Conference and Support Northumbria, Northumbria Teaching and Learning Exchange (N-TALE) and the Red Guides. Staff engagement in this deliberate strategy to engage staff in research-based development and cross-university networking have borne fruit in terms of tangible enhancement.

124 Staff in line management roles receive mandatory training to develop the skills required to carry out effective appraisals. Appraisal is intended to support staff in their development and career planning within the context of the University. The most recent round of Academic Development Planning required schools to report on appraisal as a consequence of poor feedback on their frequency and regularity in the 2008 Staff Survey. Part-time members of staff access the same appraisal scheme and staff development opportunities as full-time members of staff. The criteria for promotion are articulated in a University guidance document. The scheme allows for the appointment of Learning and Teaching Fellows and Professors. Staff indicated that the positions of Teacher Fellows, and indeed Enterprise Fellows, were more ‘strategic leadership roles’ than was previously the case.

125 Notwithstanding the issues raised in this section, the audit team concludes that confidence can be placed in the soundness of the University’s present and likely future management of the quality of the learning opportunities available to students.

Section 4: Institutional approach to quality enhancement

Management information - quality enhancement

126 The University has a comprehensive approach to promoting quality enhancement and the Learning and Teaching Strategy sets out the institution’s priorities. In the Review of Reviews report to the University’s Learning and Teaching Committee (ULT), it is stated that ‘the QAA definition of enhancement is in terms of deliberate steps at institutional level to improve the quality of learning opportunities. The Task Group prefers a broader definition, to include steps taken at school, subject and programme levels’. The University’s approaches to improving the student learning experience are guided by educational principles which seek to recognise the diversity of practice inherent in a large and varied University, rather than by a desire to embrace a standardised model. The audit team found the explicit decision not to force uniformity to be appropriate for the institution and enabling flexibility and progress in schools was appropriate for each discipline.
Key objectives for enhancement are provided in the University Learning and Teaching and Student Experience Plan which is a Tier 2 operational plan of the Corporate Strategy 2009-14. It is supported by the University Quality and Standards Framework that specifies the responsibilities and procedures by which the standards of the academic programme and the quality of the student learning experience are managed, assured and enhanced. The primary responsibility for the quality of the student experience lies at the point of delivery, with the staff engaged in teaching and supporting learning in the University’s nine schools (plus the Graduate School), its support services and, where appropriate, its partner institutions.

The ULT Committee along with its subcommittees is responsible for developing and monitoring progress on the University Learning and Teaching Plan and for promoting enhancement activity. This is augmented by school learning and teaching committees (SLT), school programme committees and staff-student liaison committees. The university-level plan is supported by school plans determining the local objectives that will be pursued in order to achieve the overall objectives. Service plans are also produced, where appropriate. The associate deans (learning and teaching) in each school have a key responsibility for promoting enhancement and meet regularly as a group with the Deputy Vice-Chancellor (DVC) (Learning and Teaching).

The focus of the University’s enhancement activity can be found in the Learning and Teaching Academy (LTA) which has recently been created. The vision for the LTA is to improve quality; further development of a flexible curriculum; improve the students experience; improve the management of standards. The University seeks to ensure close integration of quality assurance and enhancement processes so that enhancement of learning and teaching is a direct output from the operation of quality assurance systems. The Academy sits within Academic Registry alongside the Quality Support team, also recently restructured and includes the CETL for Assessment for Learning and participation in the Higher Education Academy’s (HEA’s) Enhancement Academy programme.

The University does not formally define quality enhancement or good practice and there was evidence of a wish among academic staff in the schools for a definition of both. The University may wish in due course to articulate more clearly the meaning of enhancement and good practice at the University. There is much evidence that the University is, for example, taking deliberate steps to improve the quality of the student experience and the audit team considered the formation, location and objectives of the LTA to represent potential good practice.

Since 2000, the University has employed LT advisers partly to support the implementation of its enhancement objectives. Those advisers concerned with enhancement are now located in the Academy. A series of ULT Enhancement Groups was used to promote strategic objectives. Recent enhancement groups have included those for assessment, international learning, work-related learning, diversity, Foundation Degrees and further education college links and e-learning innovations. Similar Student Wellbeing Committee/Student Affairs Committee groups have focused on retention, guidance and employability. The work of the advisers and enhancement groups in sharing good practice was identified as a feature of good practice in the 2006 Collaborative provision audit. These have been closed down and work passed to the LTA and it is too early to say at this stage what impact that move will have.

The audit team considered school and departmental enhancement committee minutes and action notes, academic enhancement half day events and reporting structures in two schools, Arts and Social Sciences and Applied Sciences. There are active school enhancement groups and in some schools there are departmental academic and enhancement committees. This confirmed that enhancement objectives as articulated in the LTA and the University Learning and Teaching and Student Experience Plan are guiding enhancement activity in schools and departments.
133 National Student Survey scores have lead to the development of an action plan and cooperation with the SU in a number of areas, including the focus on feedback campaign and feedback feed forward to promote provision of better feedback by staff and its more effective use by students. Students met by the audit team indicated that feedback is now universally timely and has improved in quality.

134 Data collected on student retention, timing of withdrawal and performance lead to a significant reform to the University’s Academic Calendar, commencing in September 2009. The previous calendar model provided for an assessment period and inter-semester period following the Christmas break, meaning that many students had no formal classes for a period of up to seven weeks. Feedback suggested this had led to a loss of momentum and was demotivating for many students. Each school presented their plan for implementation to ULT in 2009. Given that school representatives and students met by the audit team indicated no significant effects of this recent change to date, the team formed the view that it was too early in the cycle to judge the impact and the effectiveness of the revised Academic Calendar.

135 The Academy is intended to focus the many activities mentioned elsewhere in this report which all contribute to enhancement. These include the broadening of peer review of teaching; the HEFCE-funded research informed teaching initiative; the University’s Blackboard eLearning Portal (eLP) enhancement of which is led by the eLearning Strategic Management Group. Emphasis is also placed on the dissemination of good practice developed in the University’s schools and services and these include the N-TALE programme; school-based events and staff development days; Red Guides; ‘EMERGE’; Research Informed Teaching project meetings; Academic Practice CPD programme; Northumbria Conference; and the Programme and Subject Leaders’ Conference.

136 A range of external links, both regional and national, is drawn on to ensure the University is aware of good practice in the sector. These include the Regional LT conference; CETL Afl and two regional CETLs, CETL4healthNE, CETL for Music and Inclusivity; HEA links alongside the institutional contact (there are 20 named subject centre key contacts across the schools, five National Teaching Fellows, and over 200 HEA Fellows); the Effective lifelong Learning Inventory (ELLI) project, Dispositions to Stay and the HEA Enhancement Academy.

137 The University’s Applauding and Promoting Teaching (APT) awards scheme rewards excellent and innovative practice. The University is aware that more could be done to ensure that APT outputs are more widely disseminated across the University and expects that the new LT Academy structure will assist in this process. Additionally, annual Northumbria eTutor Awards are run by the LT Academy to promote good e-learning engagement with students. All learning and teaching awards, the APTs, eTutors, RIT projects, NTF nominations and winners, internal LT promotions, and student prize-winners are recognised at an annual LT awards reception, hosted by the DVC (Learning and Teaching).

138 A range of enhancement activity takes place involving schools and their partners to support the University’s objectives for collaboration and internationalisation, including joint student conferences involving European partners around research/teaching links; student and staff exchanges and longer-term staff secondments to a partner; study visits in both directions by administrative staff; and provision of the Doctor of Business Administration (DBA) programme as staff development for partner staff. From all three collaborative partner trails the audit team found evidence that University quality procedures were being followed and the process of enhancement being informed by student opinion, student representatives, meetings with link tutors and external examiner comments.

139 The University has put increasing efforts into involving students in the enhancement process. Examples include the SU school representatives and their meeting with LT advisers to constitute a Student LT Consultative Group; student involvement in the periodic review process and its enhancement showcase, including the SU sabbatical officer on the panel,
student representatives working with school-based enhancement groups; the SWS and the student meeting; Student involvement in staff development events including both the Programme and Subject Leaders’ Conference and the Northumbria Conference. The EMERGE journal is open to ‘student voice’ contributions, CETL AfL has a network of students who have contributed to publications and to staff and student events relating to Assessment for Learning (AfL), and a number of the RIT projects have directly involved students; In the Learners informing Teaching (LIT) award students are invited to offer practical suggestions that could make an immediate difference to learning and teaching at the University with a £1000 first prize. The LT Advisers are working to promote adoption of the ideas put forward in the scheme, for example, the 2007 winner, a catalogue of assessment approaches from the student point of view, has been issued as a ‘Red Guide’. Students are also involved in making awards to staff, including membership of the judging panels for Applauding and Promoting Teaching (APT) and eTutor awards. Since 2008, a special category of APT awards, the Student APTs has been in place to allow for student recognition of excellent teaching.

Good practice

140 The audit team agreed that the University has put in place a comprehensive set of mechanisms to promote enhancement in support of the institutional objectives set in its Learning and Teaching Plans and that is has succeeded in engaging large numbers of staff and students throughout the University in enhancement activities. The team considers the institution’s integrated and strategic approach to quality enhancement which underpins and brings cohesion to a broad range of enhancement activities such as the involvement of students in enhancement, the links between periodic review and enhancement processes, the embedding of pedagogic research, the creative use of technology and the various conferences and workshops to represent good practice. The team considers that the approach to quality enhancement is characterised by a holistic and integrated commitment to improve the quality of students’ learning opportunities and regards the formation of the LTA as an example of potential good practice.

Section 5: Collaborative arrangements

141 The Briefing Paper indicates that the University has over 5,000 students studying through collaborative arrangements with 13 UK and 19 overseas partner institutions and a significant number of articulation agreements for advanced entry. A register of these arrangements is maintained by the Quality Support Unit.

142 Collaborative arrangements are driven by the mission to make a ‘powerful contribution to cultural and economic development regeneration, in the City and Region, nationally and globally’, and strategic objectives of collaboration are defined the Learning and Teaching, Regional, Widening Participation and International Plans which the audit team had the opportunity to read.

143 Management responsibilities are as for university-based provision, with additional requirements recognising additional levels of risk. New partnerships are approved by Academic Board, advised by ULT and the International Committee. Programme review and operation is overseen by ULT, supported by LTPAS which scrutinises new programme proposals and determines approval processes. Responsibility for standards and quality is largely devolved to the DVC (Learning and Teaching). Responsibility for standards and quality of specific programmes rests with the dean of the school that leads on its delivery and its SLT Chair. Operational responsibility for collaborative procedures rests with the Academic Registrar, supported by the collaborative team in Quality Support. The audit team saw evidence of the operation of the approval process described and is satisfied that procedures are adhered to.
The approach to management, approval, review and operation is set out in the Collaborative Procedures (CP) Handbook which is aligned with Section 2 of QAA’s Code of practice and defines a risk-based approach and classifies provision into eight categories from general cooperation, not involving contractual obligations through Franchise and Validation to the Corporate and Community Collaborative Framework. The CP Handbook also defines hybrid arrangements that can span categories.

A legal contract is required for all collaborative programmes and the programme specification and an operations manual are included as schedules to the contract. The audit team saw evidence of a number of different legal agreements and schedules to them for different types of collaboration that confirm the expectations of the handbook and concluded that clear responsibilities were defined for the management of collaborative procedures and that these responsibilities were generally understood.

The Briefing Paper indicated that the CP Handbook defines the general rules that apply to all collaborative provision. Delivery in English, the exclusion of serial arrangements, the general application of the University’s general academic framework and assessment regulations and the University’s competence in the subject base are seen as central to the management of standards.

The University has sought to align its collaborative procedures with the Section 2 of the Code of practice, and the CP Handbook was reviewed following the last revision of Section 2. A ULT ‘mini-review’ in 2009 updated the handbook in light of more recent developments including the QAA statement on employer engagement. The University also seeks to ensure that all local quality assurance requirements are met for international programmes before they run. The audit team saw evidence of the commissioning and consideration of this review.

Proposals for new collaborative programmes originate in the schools. The CP Handbook places emphasis on the development phase to ensure shared understanding of both the aims of the collaboration and its proposed operation. Most schools have staff with experience in the development process and support and advice is available from an LT adviser and the collaborative team in Quality Support. Developers are expected to seek advice from the University’s Legal Office, Finance Department and the International Office and are required to complete an initial risk assessment, using a standard template.

As for new University-based programmes, proposals undergo a dual process of school approval, through the School Management Group in respect of business aspects and alignment with the school’s Academic Development Planning (ADP) and through SLT for quality aspects. For franchise, the programme itself is already validated and only the rationale and delivery arrangements require scrutiny. Small variations to customise the programme are permitted and noted on a standard document. For validated programmes, programme content, including relation to any relevant subject benchmark statements, are scrutinised.

Once approved by the school, the programme proposal is considered by LTPAS and costings are reviewed directly by the DVC and Finance Director. LTPAS receives a more detailed risk assessment, with a commentary from the LT adviser, and decide whether the proposal can go ahead and on the approval process to be applied.

For new partners, LTPAS requires a partnership review to consider whether a potential new partner shares similar values and has compatible procedures to those of the University. The review examines the partner’s infrastructure for delivery of a high quality learning experience to ensure that this is robust, valid and reliable and also considers the academic, financial and legal aspects of the potential partnership, and the partner’s strategies, policies and practices. The review is undertaken collaboratively and allows both organisations to satisfy themselves that collaboration will be harmonious and beneficial to future students and the organisations themselves. A standard pro forma is used for provision of the basic information and partners are also required to provide information on legal and financial standing to support the University’s due diligence checks. Potential partners can conduct their own review of the University.
The review documentation is considered by two independent reviewers from ULT’s register and advice is provided by the LT adviser. Financial information is considered by the University’s Finance Department and legal standing by the Legal Officer. In most cases the reviewers will undertake a visit to the partner institution although, in low-risk cases, review can be by documentation. Reviewers report to ULT and following ULT approval, Academic Board will decide on the partnership. Academic Board may also be advised by the International Office on overseas partnerships. Programme-level approval may not be considered until institutional-level issues have been resolved.

Institutional-level partnership approval allows any school to develop programmes with the partner. The period of such approval is normally six years and the University does not use a legal agreement for a partnership; individual legal contracts are provided for each programme or suite of programmes. The audit team saw evidence of this process in operation and heard about its operation in meetings with University staff and collaborative partners.

LTPAS determines the form of approval for the programmes; recognising the higher level of risk of collaborative programmes, this is by a ULT approval panel, led by an approved chair from the ULT register and including an experienced independent external member. The approval event normally takes place at the partner and involves meetings with senior staff, delivery and support staff, and students. Joint approval panels can be arranged and the audit team saw evidence of this in operation.

Guidelines are provided for approval panels (Supporting Documents, Guidelines for Collaborative Approval Panels) on appropriate issues to be covered which include learning resources (physical resources, library and IT including access to Northumbria eLP), staffing resources and staff development plan, programme management arrangements, identification of University link tutor, arrangements for student involvement in quality assurance, operation of programme committees and use and follow-up of questionnaires and other forms of student feedback, student support arrangements and information including the handbook and information on assessment, academic misconduct and student appeals and complaints. Panels make recommendations to ULT on programme approval which is time-limited, normally for three years. Where the approval carries conditions, ULT monitors the satisfaction of these conditions. The detailed report from the panel is received by LTPAS which maintains an overview of the operation of the collaborative approval process.

The audit team was able to see a wide range of material relating to the Programme Approval process and discuss it with University staff and staff of partner organisations, and formed the view that a clearly defined process was in place and was effectively used by staff in conducting programme approvals.

Articulation agreements are used to accept students with approved qualifications or sets of credits on a standard and regular basis onto a programme leading to a University award; they do not guarantee automatic entry to the programme. The school proposing the arrangement undertakes appropriate scrutiny of the feeder programme to assure the equivalence of standards and coverage of learning outcomes using guidance notes and a template. Once SLT is satisfied with equivalence, and fit with the school’s ADP, it submits a proposal and draft agreement to LTPAS. If LTPAS approves the arrangement, it will be submitted to the DVC (Learning and Teaching) for signature on behalf of the University. If the school is substantially involved in developing the content of the feeder programme, or where the programme articulated to has PSRB requirements, the arrangement is considered as an ‘augmented’ articulation and LTPAS may impose additional approval conditions. Articulation agreements are normally approved for a period of three years.

Distance-learning and distance-delivery programmes fall under collaborative procedures if significant input from a partner is involved. LTPAS decides on the approval mechanism for such programmes, including whether a partnership review is required, using the CP Handbook criteria.
The Corporate and Community Collaborative Framework (CCCF) provides a ‘menu’ of possible forms of collaboration, designed to provide flexibility and the CCCF details the appropriate approval mechanism for each type of provision and, for new awards. LTPAS determines the form of approval, and whether a partnership review is required. The audit team saw evidence of these processes in operation and formed the view that a clearly articulated process was in place and operating effectively.

There is an initial review at the end of the first semester of programme delivery at each site of a partner using a standard template designed to provide early feedback to the delivery team and identify any teething issues in advance of annual programme monitoring. Initial reviews are considered by the SLT and copied to the Quality Support office. The audit team saw an example of the initial review for one of the partners visited that confirmed that the process was used and provided useful information in a range of areas. However, an issue that emerged relating to the assessment schedule was not picked up locally, or forwarded for institutional consideration, and the team had concerns over the rigorous application of the process on this occasion.

Collaborative programmes are subject to the same Annual Programme Monitoring process as University-based programmes; for franchises, the collaborative provision is normally considered alongside the home provision; a template supports partner feedback on operation and consideration of any variations in student performance. For validated programmes, APM will be led by the partner and may use their process; SLT ensures that all information required by the University is collected. In all cases, student feedback must be collected for the APM process.

All completed APM templates for collaborative programmes are submitted to the Quality Support office and the LT advisers produce annual summary reports for ULT which provide action lists with particular programme issues dealt with at school level, and generic issues referred to ULT. The audit team saw evidence of reports and their consideration and formed the view that this process was normally operated effectively. However, one partnership reviewed by the team did not effectively consider emerging assessment related issues or report them formally to the institution, raising concerns about the rigour of the operation of the process in this instance. The institution indicated to the team that the divergence from normal process in this case did not mean that there had been an absence of due diligence in the school concerned or that standards had been affected, but did acknowledge that the exception reporting used in this case had not been conducive to providing the necessary institutional oversight of issues in this case and it has directed the Review group to re-consider its approach.

Collaborative programmes may be included in the University’s periodic review process if that provision is closely linked with University delivery. The main vehicle for periodic review is the programme re-approval process involving a critical appraisal of the operation of the programme to date. The re-approval report template, seen by the audit team combines headings from approval and periodic review and a partner evaluation of the operation of the programme is also obtained using a standard template. LTPAS determines the form of re-approval, based on criteria from the CP Handbook and a risk assessment. Independent externals are involved in re-approval. The audit team saw evidence of the effective operation of this process.

Partnership renewal is required at the end of the six-year period and discussion with the partner commences in advance of the termination date to determine whether both parties wish to continue. If so, LTPAS determines the form of the partnership renewal process, based on the renewal guidance note and a risk assessment; financial and legal due diligence checks are undertaken.

Problems revealed with the delivery or management of the programme through monitoring, review, or routine oversight, are addressed by the school to the partner, with a written notification of the issues. Issues not resolved are notified to ULT and ongoing problems with quality may lead to the non-renewal or termination of the arrangement. In all such cases the school ensures that continuing students are able to complete their award and that the quality of their learning opportunities and standards of their awards are safeguarded and an action plan is
provided to ULT to specify how this is to be achieved. The audit team saw evidence of this process working effectively but also found that, in the case of one of the partners, irregularities in the assessment schedule were not effectively dealt with in a timely fashion, and were not reported formally to the institution despite identification in an annual report and in SLT minutes.

166 In a note provided to the audit team after these issues were discussed in a meeting, the University had explained the complexities of the situation and that it had considered that it had dealt with a local difficulty ‘carefully and effectively’. The team appreciated these clarifications but was concerned that the issues raised had not been formally commented on through the normal reporting mechanisms, and advised that the University should review its approach at school and institutional levels to the management and monitoring of validated collaborative provision to ensure that all processes for its management adhere to the institution’s own quality assurance and regulatory frameworks. Furthermore, the University should clarify and articulate where responsibility and oversight for the management of collaborative provision lies at both school and institutional level.

167 The form of APM for distance delivery and distance-learning support and for arrangements through the CCCF depends on the precise nature of the arrangement; these and articulation agreements will be subject to periodic review via the three-yearly re-approval process. Work is being done to enable monitoring of performance of students who entered the University via articulation agreements and a field has been added to SITS to facilitate the tracking of these students.

168 The University’s general academic framework and assessment regulations, defined in the Modular Framework for Northumbria Awards (MFNA) and Assessment regulations for Northumbria Awards (ARNA), apply to all undergraduate and taught postgraduate collaborative programmes except where variations have been approved by ULT. Research degree regulations apply to any collaborations involving postgraduate research programmes.

169 Franchise assessments are closely related to those for University-based students although some local contextualisation may be approved. For validations, assessments are moderated by University staff. Internal first marking is followed by Northumbria moderation before external moderation and this may have impact or feedback times for assessed work.

170 External examining arrangements for collaborative provision are the same as for University-based programmes and, where appropriate, the same examiner will cover both. Report templates require comment on variations in performance of students on collaborative programmes. In some instances, external examiners are required to visit the partner for assessment and examination boards. The award is be made by a Northumbria Progressions and Awards Board (PAB) including the external examiner and schools make the most appropriate arrangements for PABs including for separate Boards and the school ensures that means are in place to ensure comparability of performance and standards.

171 Transcripts and Diploma Supplements are provided for students whose module details are stored on SITS (all franchise programmes). Transcripts show the partner organisation and location of study for the student. Where a SITS transcript cannot be produced (validations) the partner organisation is indicated on the award certificate. The audit team saw examples of certificates and transcripts and confirmed that the arrangements described operate effectively.

Role of students in quality assurance processes

172 The role of students in quality assurance and providing feedback is specified at approval; and guidelines for approval panels cover consideration of arrangements for student involvement including operation of programme committees, and attendance of University staff at those committees. Agreed arrangements are detailed in the operations manual which is a schedule of the formal agreement. The team saw an example of a section on Student Feedback and the use of programme committee, informal feedback and role of Tutor, Programme Leader and Academic
Cohort Leader. The audit team also had the opportunity to consider examples of the Operations Manual and talk to students and staff in partner institutions, and formed the view that students were able to contribute their views effectively, and that the University and its partners responded to student views. An example was given of the Programme Board in one partner being amended to respond to demands for greater student participation.

173 Learning resources are considered at programme approval and guidelines for approval panels include a requirement to cover the learning resources for the programme, including physical resources, library and IT resources (including access to Northumbria eLP and other remote resources).

Staff development and support

174 Staffing resources are also considered at approval and curricula vitae of partner staff involved in delivery are provided as part of the approval documentation. Staff appointed after approval are subject to CV review by University programme staff, for example, the Link Tutor. Approval panels must also consider the staff development plan. The audit team heard evidence of this process in operation and took the view that an effective overview of staff delivering collaborative programmes is maintained.

175 Staff development takes place before the start of academic delivery, and continues for the duration of the partnership. Activities include visits by developers and coordinators to partners to establish the nature of the partnerships and prepare documentation; visits by administrators to establish links and confirm administrative procedures; visits from library personnel or programme staff to share library resource information; visits from LTech staff to provide IT and eLP support information; visits from the SLT chair or other Quality Office staff to provide information about ARNA, award classifications, feedback and other procedures; one-to-one meetings and video conferences between the University and partner teaching staff to support academic development, assignment and project supervision and evaluation and assessment methodologies; and visits from partner staff to the University.

176 The Briefing Paper indicated that ongoing staff development involves team visits by University staff and the use of video links to provide the opportunity for staff development on a regular or on-demand basis.

177 Staff development support for staff involved in developing and operating collaborative venture partnerships is less formal and operates through professional networking and peer support, and a range of enhancement activity takes place involving schools and their partners to support the University’s objectives for collaboration and internationalisation, including joint student conferences involving European partners around research/teaching links; student and staff exchanges and longer-term staff secondments to a partner; study visits in both directions by administrative staff; provision of DBA programme as staff development for partner staff. The audit team heard evidence from partner staff of the value of these development activities and were able to see material relating to staff development for those involved in international activity. The team formed the view that effective planned and on-demand staff development support was provided for both University and partner staff at all stages of the collaborative programme development and delivery.

178 The Briefing Paper indicated that the operation of student support arrangements and complaints and appeals processes are covered in the guidance for approval panels and specified at approval. These arrangements are detailed in operations manuals which are schedules of the formal agreement and may be in programme handbooks. Collaborative partner students who had transferred to the University indicated that they were able to access effective language and study skills support.
Published information

179 The Briefing Paper indicated that an overview of marketing activity is maintained by the University’s Director of Marketing and Recruitment although schools may pursue their own marketing plans, with responsibility for ensuring accuracy of published material resting with the Dean. The audit team heard confirmation of this process at meetings in both the University and with partners and took the view that while effective oversight of published materials might be maintained by Deans, senior staff could not precisely articulate to the team the means by which institutional overview was maintained.

Section 6: Institutional arrangements for postgraduate research students

Institutional arrangements and the research environment

180 The University’s framework for the management of quality and standards of postgraduate research degree programmes is expressed in terms of the responsibility of individual post holders, the committee structure, the regulatory framework and the role of the Graduate School. Key individuals are the DVC (Research and Innovation), the Director of the Graduate School and the Associate Dean for Research (or equivalent Postgraduate research Director) in each school. At university level, the Director of the Graduate School reports to the DVC (Research and Innovation) and, at school level, the associate deans for research to the dean of their respective schools.

181 There is a broad separation between the role of the Graduate School and the academic schools. Responsibility for administrative aspects, compliance with the Code of Practice and University Regulations, generic research training for postgraduate research students and supervisors, and monitoring procedures lies with the Graduate School. Academic schools are responsible for supervision of postgraduate research students and subject-specific training.

182 At school level, matters relating to postgraduate research students are the responsibility of the school research committees which report in this context to the Graduate School Committee (GSC). In turn, the GSC reports to the University Research and Innovation Committee (RIC).

183 Research studies are governed by the Postgraduate Research Code of Practice and the Research Degree Regulations. The Research Degrees Handbook includes summary information from these documents in its guidance to students and cross-references them as necessary. The university Code of Practice is aligned with the precepts of QAA’s Code of practice, Section 1. Postgraduate Research Regulations are reviewed annually and responsibility for this lies with the Graduate School.

184 The University’s Corporate Strategy 2009-2014 has as one of its priorities an increase in the ‘range, quality and impact’ of its research. As part of this, one of the objectives is to expand the number of registered postgraduate research students by 2012 to 50 percent above the 2007 level. The University regards its performance in the 2008 Research Assessment Exercise as providing a strong support base for its current postgraduate research students and considers that the priority to be given to research in the implementation of its Corporate Strategy will ensure support for the planned expansion of postgraduate research student numbers. As part of its Research Plan the University offers a number of postgraduate research studentships which are used to develop the postgraduate research community strategically.

185 According to the University, schools provide ‘high quality designated areas’ together with a ‘supportive environment’ and specialist facilities for postgraduate research students. The students met by the audit team confirmed that this is the case. The library has a team to support research activities.
The Graduate School was subjected to its first periodic review in 2008 using a customised template and review method. The review panel reported favourably on the standard of provision and the supporting quality processes. The report highlighted a number of aspects of innovations and good practice and made recommendations for follow-up action. The GSC developed an action plan and progress on this has been reported regularly to both the ULT Committee and the RIC. The audit team considered that the use of a customised review method and template, the integrated nature of the review across all schools and the regular reporting on the follow-up actions had been particularly effective in developing a secure basis for current and future postgraduate research activity in the institution.

The audit team found that the students were clear about the different roles of the Graduate School and their academic schools. There is an effective balance between the overall responsibility of the Graduate School for regulation, monitoring and support and the discipline-based responsibilities and obligations of the School. These combine to provide a supportive research environment and engender a strong sense of community.

The audit team, therefore, identified the role of the Graduate School in developing, monitoring and reviewing the standards for postgraduate research degree provision and its effective and complementary working with the academic schools in providing a common support framework and sense of community for postgraduate research students across the University to be a feature of good practice.

**Selection, admission and induction of research students**

The University states that its general Admissions Policy embraces postgraduate research students although there are no special references to them in the policy statement. The processes for application and admission are set out in the Research Degrees Handbook and in the institution’s Postgraduate Research Code of Practice. The alignment of these with QAA's Code of Practice, Section 1, is demonstrated in the Postgraduate Research Code of Practice. The procedures aim to ensure that the applicant is adequately qualified, that the proposed work fits with the University’s research areas and that the capacity and capability exists to supervise the research.

Candidates are normally interviewed by two members of academic staff and ultimate responsibility for admission lies with the Dean. In the case of an international student met by the audit team, it was confirmed that an effective dialogue was conducted electronically before admission. The Dean or his/her nominee appoints a principal supervisor at admission and the full supervisory team is confirmed within three months. Students confirmed that these preliminary processes gave them confidence that their research projects were appropriate in level and scope and that suitable supervision would be available. At admission, the entitlement to the resources required to undertake the research programme is confirmed.

**Supervision of research students**

All postgraduate research students are supervised by a team of supervisors appointed by the Dean on advice from the School Research Committee. The principal supervisor is responsible for the direction of the research programme, overseeing the provision of training and monitoring and providing feedback on progress. Additional supervisors in the supervising team provide advice specific to the project. Together, they provide advice on the subject area and research methodology. The periodic review reported that the standard of supervision was excellent and the students subsequently expressed high satisfaction with the quality of the supervision provided.

Records of formal supervision meetings, which should take place at least every six months, and a record of the student’s progress, agreed jointly with the student, are maintained by the supervisors. The audit team found that, in practice, students meet their principal supervisors each month and the full supervision team every two months. Industry-sponsored students meet their sponsors every three months.
Criteria for the appointment of supervisors are set out in the Postgraduate Research Code of Practice and are confirmed by the completion of a Supervisor Competency Check List. The GSC receives annual reports from schools on the names of approved supervisors and their supervision load. There is obligatory updating for supervisors on a three-year basis. A Continuing Professional Development (CPD) programme has been introduced for supervisors and there is a specific group of workshops for them within the Research Training Programme. A one-day conference for supervisors was held in June 2009 as part of the CPD programme. There is a supervisor bursary scheme for conference attendance and staff are encouraged to make use of the resources of curricula vitae. GSC has recently agreed the requirements for CPD provision for supervisors and is currently carrying out a review of the implementation of this policy in the light of initial experiences of schools and variations in approach adopted.

The school research committee (SRC) appoints Postgraduate Research Counsellors external to their school from whom research students may seek independent advice should difficulties arise which cannot be addressed within the normal supervision arrangements.

Progress and review arrangements

There are two formal stages – Initial Project Approval (IPA) and Mid-Point Progression (MPP) – which, together with annual monitoring, constitute the framework for progress and review.

At the Initial Project Approval stage, the proposed research programme, supervision arrangements and the training requirements are approved by adjudicators (members of staff appointed by the Dean) who are independent of the supervision team. This takes place within three months of registration (five months for part-time candidates). The adjudicators make a recommendation to the SRC within one month against published criteria.

The Mid-Point Progression review takes place within 18 months of the start date (30 months for part-time candidates). The purpose of this review is that the candidate should demonstrate satisfactory progress to date, that the programme can be completed on time, that it meets the level for the award and that training requirements have been met. The review process is carried out by an expert group appointed by the SRC and includes interviews with the candidate and the principal supervisor. The group is required to report to the SRC within one month. There is a mandatory workshop to support the thesis submission and viva voce examination stage.

Progress is monitored annually through reports from the supervisors and the candidate which should form a jointly agreed report. However, separate, confidential reports may be made to the chair of the SRC. As recommended by the periodic review, further consideration is currently being given to the structure of the milestones to reinforce the link with progression.

The panel ascertained from meetings with research students that IPA and MPP provided effective feedback at critical stages and that the MPP was particularly helpful in identifying the requirements for successful completion of the PhD degree programme.

The GSC reviews the schools’ discharge of their responsibilities towards postgraduate research students through receipt of annual reports and periodic visits.

Development of research and other skills

Training for research students consists of generic training provided by the Graduate School and subject specific training provided by each academic school. It is one of the defined responsibilities of postgraduate research students to undertake a programme of training and support studies. The Training Needs Plan is initially produced at the time of the IPA and continues through the MPP and Final Stage. A check is made at this point by the supervisor that the training requirements and supporting studies are being undertaken. Training records form
part of the Personal Development Plan (PDP) which students are required to maintain throughout their studies. The students met by the audit team did not appear to recognise the PDP process clearly beyond a record of training. However, it was evident that the training elements of the scheme are in place and recorded.

202 The Graduate School provides an induction programme and generic training for research students. All postgraduate research students attend the Induction Programme, which is held three times per year. The generic programme has been designed to meet the seven areas of skills training requirements identified by the Research Councils. Students have an agreed Training Needs Plan and are responsible for booking training from the opportunities provided by the Graduate School and the Research Training Programme offered centrally by the University for staff, which includes a section for early career and postgraduate researchers.

203 For postgraduate research students who are involved in teaching, the Graduate School provides a mandatory one day training session. Further support is then provided by schools through mentoring or other appropriate support.

Feedback arrangements

204 Each school has a staff/student liaison group for postgraduate research and, with the exception of Law owing to its low numbers of postgraduate research students, a representative on the Postgraduate Research Representatives Forum. Feedback is also provided by individual postgraduate research students through their annual monitoring reports. Other feedback may be obtained from staff, examiners and employers. The schools draw together the main themes from these sources of feedback in their annual report to the GSC. Overall student views are collected through the bi-annual HEA Postgraduate Research Experience Survey (PRES). The Graduate School compiles an effective action plan arising from PRES which it reports to RIC.

Assessment

205 The assessment of students on research programmes of study is governed by the Regulations for the Degrees of Master of Philosophy and Doctor of Philosophy and the Framework for Professional Doctorates. These regulations are the responsibility of the Graduate School through its Examinations Panel. Two examiners are nominated, at least one of whom must be external, and these are approved by the Examinations Panel. A member of University academic staff acts as Independent ‘non-examining’ Chair for the oral examination. The principal supervisor may attend the oral examination as an observer at the request of the candidate, but is required to be present for the examiners’ feedback to the candidate. Recommendations from the examiners are received and the outcome determined by the Graduate School Examinations Panel. The audit team formed the view that all reasonable steps are taken to ensure the fairness of the assessment process.

Representation, complaints and appeals

206 The focus of formal representation for postgraduate research students is the individual school postgraduate research representatives (each school except Law) and the Postgraduate Research School Representatives Forum organised by the SU. The responsibilities of the postgraduate research representatives are set out in a role description. Each postgraduate research representative is a member of the SRC and the Postgraduate Research School Representatives Forum appoints a delegate to the GSC. Postgraduate research students are also represented on RIC and on Student Council.

207 The team noted the effective use of an SWS facilitated by Learning and Teaching Support (it is noted that this unit has recently been renamed ‘Quality Support’) independently of the Graduate School as part of the documentation for the periodic review of postgraduate research provision.
The audit team concluded that the institution has the regulatory framework and student support processes in place to ensure and enhance the standards of its postgraduate research degree provision. Further, the team considers that the central role of the Graduate School in supporting both students and supervisors while also monitoring and reporting to the institution’s senior management on provision in schools, provides a firm basis for the planned expansion in this area of activity.

Section 7: Published information

The audit team examined a range of published information, including university-wide policy and procedural documentation, school and collaborative partner documentation, programme handbooks and specifications, module specifications and assessment criteria, regulations, the University’s website and intranet, the undergraduate prospectus and committee minutes. The team established that the University provides an extensive and accessible range of published information for prospective and current students and staff, both electronically and in hard copy. The University is making the information detailed and, as suggested in Annex F of HEFCE 06/45 publicly available.

In the Briefing Paper, the University stated that the institution’s overall approach to internal and external communication is detailed in its Public Relations and Communications Plan, within the Corporate Strategy. The audit team was provided with a service review and plan for Public Relations and Communications, written following the appointment of a new Director of Communications, and was advised that the Public Relations and Communications Plan would be written in time for the May 2010 Academic Board.

An overview of marketing activity is maintained by the University’s Director of Marketing and Recruitment. Schools pursue their own marketing plans, responsibility for assuring alignment with Academic Development Plans and the Corporate Strategy resting with the Dean or Service Director and such plans are coordinated through the Marketing Forum. This group was chaired by the Director of Marketing and Recruitment and reported to the Admissions Committee. At the time of audit it was unclear what would replace the Forum in the reconfiguration of the University’s committee structure.

Publicity and programme materials for collaborative partnerships are submitted via the University-based Programme Coordinator to the dean of school for approval. School mechanisms are specified in the operations manual and the CP Handbook reinforces this process. In the case of collaborative provision induction information is generally provided by the host institution and all students met by the audit team said it was clear from the outset that the award was a University of Northumbria award. Certificates and transcripts are issued by the University. Partners are clear that all materials require University approval prior to publication.

Service Directors or Deans of school have responsibility for public information and ‘own’ the specific sections of the newly revamped website and are supported in this function by the Web Content Team. The objectives for web use are provided in the Web Strategy approved by ISMCG. The Vice-Chancellor’s Executive Group formally signs off the prospectus and web site entry. The audit team noted that the Deans’ role description does not specifically spell out responsibilities with regard to the management and oversight of information. While the team found no evidence of inaccurate publicity material and acknowledged that the Dean or Service Director can seek advice, it formed the view that the University should articulate more explicitly where institutional oversight for published information in all its forms is located.

The University’s electronic information provision and communication with students is through a University website and a managed learning environment, MyNorthumbria, where a student finds personalised information, fed from the SITS and other systems, such as their timetable, library books on loan, marks and enrolment and fees status. Students also access the Blackboard eLP system through MyNorthumbria primarily to access module-level information.
including module handbooks, assessment requirements and teaching materials. Following student feedback, including that obtained by a research project on student use of the system, school templates ensure that information is provided to students in a consistent manner. The eLP Strategic Management Group maintains an overview of the system and its development and a User Group including a student forum provides regular user feedback on it. At the time of audit, MyNorthumbria had recently been rolled out to all staff and includes staff development records and information sources. The audit team received a demonstration of the system. The audit team also had a demonstration of Northumbria World during audit week. This management information system combines comprehensive data from SITS, SAP (Finance) and ORACLE (HR) and provides many useful management reports informing APM with key performance indicators and review, for example. It is the responsibility of the University’s Finance Department to provide the institutional returns to HESA which provide the basis of the Unistats quantitative data. The Destination of Leavers from Higher Education survey is the responsibility of the Careers and Employment Service in Student Services.

215 The website contains a broad range of information on University policies, procedures and regulations. It is used to communicate key information for students including ARNA, the Handbook of Student Regulations and Student Services Information, including an A-Z Survival Guide. Students were informed of changes to the University’s assessment regulations for the current academic year via individual email. There is also an online courses database on the University’s web-site and regular website surveys are carried out to assess the experience of using these resources. The audit team heard from students that information on appeals, complaints and academic infringements is clearly documented in the relevant handbooks for taught awards and postgraduate research students, and that these are easily accessible to students either in hard copy or for fuller details through links to the University’s intranet.

216 The audit team met students, who confirmed their general satisfaction with the usefulness of the information provided by the prospectus and the website during the application and admissions stages. There is evidence that the programme handbook guidelines are effective and are adhered to. Programme handbooks and module specifications are routinely available in hard copy and electronically and provide complete and accurate information to undergraduate and taught postgraduate students. They are scrutinised for completeness and accuracy of information by the approval panel as part of the programme approval process.

217 Although students met during the audit generally did not recognise the term ‘programme specification’ these are published on the University’s website and the information contained in a programme specification is generally available in a more accessible form in the programme handbook. The University website is comprehensive for programmes offered at the University, including joint programmes, franchise programmes and validated provision which aligns with the QAA Code of practice, Section 2: Collaborative provision and flexible and distributed learning (including e-learning). The audit team suggests that a more proactive approach should be taken by the University to ensure all students recognise where to locate and the significance of programme specifications.

218 The SWS suggested that there was ‘information overload’ at induction and this was recognised by the students met by the audit team during the course of the audit. However, students and staff met by the team also reported that this issue has been effectively addressed by methods including an extended induction period, early programme engagement, early social engagement and peer mentoring practices.

219 The University publishes the ‘Insight’ staff newsletter, both in hard copy and on the web to provide staff with information about developments at the University. This includes a diary of events, including staff development opportunities.
220 Published material and the evidence in documents of the protocols and procedures employed by the University to maintain the quality of published information in terms of accuracy demonstrate that the mechanisms to ensure its accuracy, usefulness and currency are effective. Further, the University and its partners are generally proactive in bringing information to the attention of students.

221 The audit team found that reliance can reasonably be placed on the accuracy and completeness of the information the University publishes about the quality of its educational provision and the standards of its awards.