



INTERNAL AUDIT

University of Ulster

Internal audit report 2010/11

Overview of Quality Assurance structures and processes over Teaching and Learning

January 2011

ADVISORY

Statement of responsibility

- We take responsibility for this report which is prepared on the basis of the limitations referred to below.
 - The matters raised in this report are only those which came to our attention during the course of the review and are not necessarily a comprehensive statement of all the weaknesses that exist or all improvements that might be made. Recommendations for improvements should be assessed by you for their full commercial impact before they are implemented.
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Introduction and scope of work

Areas subject to audit

- This report details the findings of our review of Overview of Quality Assurance structures and processes over Teaching and Learning at the University of Ulster. This was carried out in accordance with the University of Ulster Internal Audit Plan for the year ended 31 July 2011 as approved by the Audit Committee in November 2010.

Scope and approach

- The overall objective of the assignment was to assess, in overview, the appropriateness and effectiveness of key processes over the assessment of quality of Teaching and Learning (including internal and external review) and the management of issues arising there from at the University of Ulster.
- The University has an extensive Quality Assurance framework over all aspects of its Teaching and Learning, and is subject to a number of independent quality review processes by a series of regulatory and professional bodies, both at an institutional and at course level. The aim of this review was not to duplicate any of these external, or internal review processes – but to understand and review the coverage of these processes, the reporting protocols which exist to ensure accountability in relation to these processes, and the extent to which remedial actions have been taken, where opportunities for improvement in the quality of teaching and learning have been identified.
- Our review focused on the key monitoring and assurance mechanisms over teaching and learning within the University of Ulster, with a particular focus on how these fit into the University's overall internal control and accountability framework. Key areas considered in this review were:
 - Internal roles and responsibilities in relation to ensuring that appropriate Quality Assurance mechanisms are in place and operating effectively (including role of Senate; Teaching and Learning Committee; Quality Management and Audit Unit; Academic Development and Enhancement Committee);
 - Overview of Course Planning and Approval processes
 - Overview of measures in place to ensure that quality teaching is delivered:
 - Staff training (and development)
 - Staff recruitment and selection
 - Staff probation
 - Staff progressions and promotions
 - Module performance monitoring
 - Interrelationship between course results and student retention

- Overview of course quality monitoring procedures:
 - Programme Management System
 - Module / Annual Subject Monitoring programme
 - Examinations Board
 - Use of External Examiners
- Overview of External quality monitoring processes
 - Quality Assurance Agency
 - Professional Statutory and Regulatory Bodies (PSRBs)
 - Course accreditation / re-accreditation by Professional Bodies
- Student Feedback mechanisms, particularly as a result of:
 - Complaints procedures
 - Module monitoring
 - Staff / Student Consultative Committees
 - National Student Survey
 - Postgraduate Taught Experience Survey
- Reporting performance in relation to quality of Teaching and Learning (including use of KPIs), particularly in relation to:
 - Faculty Boards
 - Teaching and Learning Committee
 - Audit Committee
 - Council
 - Senate
- Remedial actions taken by the University, where poor performance is identified (including follow up and performance tracking)

Documentation

- Key documentation obtained and reviewed in the course of this assignment included:
 - Charter, Statutes and Ordinance of the University Senate
 - Terms of reference and membership of Teaching and Learning Committee and Academic Development and Enhancement Committee
 - Selected minutes and papers in relation to Senate meetings

Documentation (continued)

- Selected minutes and papers in relation to Academic Development and Enhancement and Teaching and Learning Committee
 - Programme Approval, Management and Review Handbook
 - Terms of Reference, Membership and selected papers and minutes in relation to the Academic Planning Sub-Committee
 - University of Ulster CPD Policy
 - Professional Development Framework
 - Code of Practice for the Initial and Continuing Professional Development of Academic Staff
 - Development Appraisal Review Policy
 - External Examiners Handbook
 - External Examiners Overview Report 2009/10
 - QAA Institutional Audit Briefing
 - QAA Institutional Audit Report
 - Student Complaints Procedure
 - Student Complaints Annual Report 2009/10
 - Summary results of National Student Survey
 - Summary results of Post- Graduate Taught Survey
- In addition to the review of documentation, meetings were held with the following key personnel:
 - Prof Denise McAlister, PVC Teaching and Learning
 - Janet Alleyne, Head of Quality Management and Audit Unit
 - Alan Faulkner, Head of Academic Office
 - Carol Cochrane, Head of Staff Development
 - Tricia McCullough, Administrative Officer, Academic Planning Unit

Follow up work

- This area has not previously been subject to review and as such there are no issues brought forward for follow-up.

Acknowledgement, review sponsor & key contact

- We wish to thank the staff at the University of Ulster for their co-operation and assistance during our audit visit. Our project sponsor and key point of contact for this assignment was Professor Denise McAlister, Pro Vice Chancellor Teaching and Learning.

Abbreviations

- APSC – Academic Planning Sub-Committee
- ADEC – Academic Development and Enhancement Committee
- CASC – Course Approval Sub-Committee
- CPD – Continuing Professional Development
- DARS – Development Appraisal Review Scheme
- PGCHEP – Post Graduate Certificate in Higher Education Practice
- PSRB – Professional, Statutory and Regulatory Bodies
- QAA – Quality Assurance Agency
- QMAU – Quality Management and Audit Unit
- SSCC – Student / Staff Consultative Committee
- TLC – Teaching and Learning Committee

Overall conclusion and assurance rating

Overall conclusion

Based on the work performed by us, no issues were identified in relation to the sub-processes listed below.

Quality Assurance processes and structures over Teaching and Learning	<i>Substantial</i>
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Sub Process	Current year issues			
	Priority 1*	Priority 1	Priority 2	Priority 3
Roles and responsibilities	-	-	-	-
Course Planning and Approval process	-	-	-	-
Measures in place to ensure that quality Teaching and Learning is delivered	-	-	-	-
Overview of course quality monitoring procedures	-	-	-	-
Overview of External quality monitoring processes	-	-	-	-
Student Feedback mechanisms	-	-	-	-
Reporting performance in relation to quality of Teaching and Learning	-	-	-	-

Overview of key Quality Assurance processes and Structures employed by the University

We have summarised below the key quality assurance mechanisms in relation to Teaching and Learning within the University of Ulster, identified during the course of our review. In particular we have sought to identify how these key assurance mechanisms feed into the overall Internal Control and Assurance framework within the University, on which the Audit Committee places reliance.

1) Internal roles and responsibilities in relation to Quality Assurance Mechanisms – including Academic Governance

1.1 Senate

The University Senate is responsible for the oversight of academic affairs within the University, per the University Charter, Statutes and Ordinances, Statute II, the Senate shall, 'maintain oversight of the quality of education and the arrangements for its ongoing enhancement'.

The University Senate is chaired by the Vice Chancellor and the membership is made up of Pro Vice Chancellors, Deans, Provosts, the President of the Students Union as well as representatives from each of the six University Faculties. The Senate meets six times during the Academic year and is serviced by the Quality Management and Audit Unit.

We note that a number of mechanisms are in place to ensure that the Senate discharges its responsibilities effectively, including the completion of a self-effectiveness review by Senate members. Following the completion of a self-effectiveness review a number of years ago amendments were made to the operation of the Senate including the introduction of a standard list of agenda items to be considered by the Senate each year including:

- Functions of the Senate, and delegated authority framework
- Student Complaints Annual report
- Commentary on enrolment against the Academic Plan
- Graduation conferment lists
- Student Retention report
- Report on Academic Planning
- Report on Implementation of Research Strategy.

We note that a further self-effectiveness review is to be completed during 2010/11, by way of a questionnaire, a draft of which has already been presented to Senate Members.

Furthermore, at the start of each Academic year a review of the functions of the Senate is completed including consideration of the compliance with standing orders and the appropriateness of the current delegated framework in place, which include a consideration of the role of the Sub-Committees of Senate, including the Teaching and Learning Committee and the Academic Development and Enhancement Committee. We reviewed a sample of papers and minutes in relation to Senate meetings held during 2009/10 and noted that meetings were generally well attended and that minutes appear to provide a comprehensive record of discussions held during meetings.

1.2 Academic Development and Enhancement Committee

The focus of the ADEC is on the quality of the overall student experience and we note that per the terms of reference for ADEC the role of the Committee is, 'to keep under review, and as appropriate advise and make recommendations to Senate on matters relating to academic development and enhancement of the University's taught programme and research degree provision', as well as 'to receive monitoring reports and to consider institutional level enhancements to student experience'. To this end a number of key reports are presented to ADEC for consideration including:

- Results of the National Student Survey
- Annual report on subject monitoring and the pilot programme management system
- Reports from QMAU on themed audits
- QAA Institutional audit reports

We note that ADEC also plays an initial role in the course approval process (see section 2.1 for further details).

The Academic Development and Enhancement Committee is chaired by the Pro Vice Chancellor for Teaching and Learning with membership comprising, Pro Vice Chancellors, Deans or Associate Deans of Faculties and one member appointed by each Faculty. The minutes of each ADEC meeting are reviewed by the Senate, with recommendations made by ADEC being approved by Senate in line with the delegated authority framework.

We note that the work of the Academic Development and Enhancement sub-group was identified by QAA has an example of good practice following their most recent institutional audit.

Overview of key Quality Assurance processes and Structures employed by the University

1.3 Teaching and Learning Committee

Where the focus of ADEC is on the quality of student experience TLC has more of a standards and regulatory focus, and we note that per the terms of reference for TLC the role of the Committee is to advise and make recommendations in relation to, 'the standards and regulatory framework for awards, the procedures for approval, monitoring and re-approval of, and revision to programmes and ordinances, regulations, guidelines and protocols relating to taught programmes'

Again this Committee is chaired by the Pro Vice Chancellor for Teaching and Learning with a similar membership structure to ADEC including, Pro-Vice-Chancellors, Deans or Associate Deans and members appointed from each University Faculty. In order to fulfil its remit TLC receives reports in relation to a number of key areas including:

- Professional, Statutory and Regulatory Body Accreditation
- External Examiners
- Course Approval / Re-Approval
- QAA Institutional Audit.

The minutes of each TLC meeting are formally reviewed by Senate at its subsequent meeting, with decisions taken as a result of recommendations made by the Teaching and Learning Committee, clearly identified within Senate minutes.

1.4 Role of Quality Management and Audit Unit

As previously noted in this report the University's focus on quality is largely split between the management of standards and regulatory compliance and the consideration and enhancement of the overall student learning experience. This split is recognised in the complementary roles of the QMAU and the Academic Office with the focus of QMAU being on the quality of the student learning experience. As such the Unit is responsible for the following areas:

- Internal subject and collaborative provision annual monitoring
- Internal themed audit
- Module monitoring
- Institutional Audit
- Academic Governance
- Student Feedback surveys

- Staff / Student Consultative Committees
- Student Complaints

(note that each of these key quality assurance mechanisms is considered in subsequent sections of this report)

1.5 Role of the Academic Office

By comparison the role of Academic Office is more focused on standards in place to ensure that an appropriate standard of Teaching and Learning is provided. The key responsibilities of the Academic Office include:

- Maintenance and review of the University's Assessment Handbook which provides generic assessment criteria to be applied to work at each level
- Course Evaluation and Revalidation (see section 2 of this report), ensuring that courses provided are 'of a quality consistent with the University's objectives and aims'
- Maintenance and Review of the University's Ordinances and Regulations in relation to taught programmes of study
- Review of appointments of External Examiners in line with the University Code of Practice on External Examining.

The Academic Office also has responsibility for servicing the Teaching and Learning Committee, which receives regular reports in relation to the course approval process and revalidation activity.

2) Course Planning and Approval

2.1 Course Approval Process

As mentioned in the previous section of this report, the Academic Office has overall responsibility for the course approval process. The process is detailed within the Programme Approval, Management and Review Handbook (PAMR) which states that the purpose of evaluation is to ensure that each course:

- Accords with the University's purpose and core strategic aims;
- The academic structure and content are appropriate;
- The proposed award is in accordance with the University's scheme of qualifications, and the programme conforms to the modular structure and credit framework of the University, and the University's general regulations for the award in question;
- The standard and student workload are comparable with those of other programmes leading to the same award nationally;
- The available resources are sufficient to enable it's aims and objectives to be met; and
- There is evidence of reasonable employment and progression opportunities.

There are four key stages within the course approval process: approval for planning, development, evaluation and approval of the proposal. A proposal is prepared and completed at faculty level using standard documentation included within the PAMR and is forwarded to the Academic Planning Sub-Committee (APSC) - a sub-committee of ADEC - for initial consideration. APSC review the proposal to ensure that it is line with the University's strategic objectives, the Teaching and Learning Strategy, and Academic Plan as well as considering whether there is likely to be sufficient demand from students and whether there will be sufficient employment opportunities for graduates completing the course.

Following consideration of the proposal APSC makes a recommendation to ADEC which in turn advises Senate as to whether the proposal should proceed to an evaluation panel. The proposal is then subject to an evaluation event which involves a dialogue between the course providers and an expert panel comprising University representatives and external subject specialists.

A report is produced following the evaluation event which is forwarded to the Course Approval Sub-Committee. This report will detail conclusions in relation to the currency, validity, quality and standards of the course and may also include recommendations for enhancing quality and standards. The evaluation process is complete when the Chair of the Evaluation panel signs the report to indicate that the document is satisfactory. CASC will review the report and ultimately make a recommendation to the Teaching and Learning Committee as to whether the proposal should be approved. TLC will then make a recommendation to Senate which will formally approve the course proposal.

During our fieldwork we completed a walkthrough test in relation to the evaluation process and noted files maintained for each course approved included documentation in relation to all key stages of the approval process. We also noted that files indicated a significant level of scrutiny for each course proposed, with consideration being given to both the likely demand for the course and potential employment opportunities for graduates as well as the likely resource implications of the course – with detailed reports being produced from the Information Services Directorate as well as the University's Library Services.

2.2 Revalidation Process

Each course or subject strand is also subject to revalidation and the Academic Office operates a rolling five-year cycle, again the process of which is detailed within the PAMR Handbook. The process is broadly similar to the evaluation process with a revalidation event being held and a revalidation panel being convened, including representatives from other University Faculties and external subject specialists. At the revalidation event external examiners reports will also be used to inform decisions made by the panel, as an important tool in determining whether the proposed learning outcomes of course are being achieved.

A report is produced following the revalidation event detailing the conclusions of the currency, validity, quality and standards of the course and will also include any relevant recommendations for enhancing quality and standards. The revalidation process is concluded when the Chair of the evaluation panel signs the revalidation report indicating that the document is satisfactory.

We note that the Academic Office have been pro-active in attempting to increase student participation in the quality assurance process by including student representative within the revalidation process. We further note that QAA concluded that there was 'a robust process with detailed scrutiny of the documentation and a forensic approach to the setting of conditions'.

Overview of key Quality Assurance processes and Structures employed by the University

2.3 Reporting

Per the Senate delegated authority framework the Senate retains responsibility for the approval of new course planning proposals. However it is the Course Approval Sub-Committee (a sub-committee of the Teaching and Learning Committee which will receive individual reports in relation to each evaluation event held. These reports will be reviewed by CASC with the result communicated to Teaching and Learning Committee who will ultimately make a recommendation to Senate as to whether the course should be approved. Teaching and Learning Committee will also receive an annual report in relation to evaluation and revalidation events which will include details of any measures which have been identified to improve the process during the year. We note that per the 'Annual Report on Evaluation and Revalidation Activity' presented to the Teaching and Learning Committee in June 2010, a total of 45 evaluation events were completed during the Academic year as a result of which a number of developments were identified to improve the efficiency of the current process. We also note that the current system was reviewed by QAA during their most recent institutional audit visit with the audit team concluding that, 'the course approval system is robust and rigorous, while allowing innovation and creativity'.

3) Overview of measures in place to ensure that quality teaching is delivered

3.1 Continuing Professional Development

The continuing professional development of academic staff is an area of key focus for the University. This is demonstrated by the key supporting objectives included within the University Corporate Plan, including 'to encourage all academic staff to undertake scholarly activity to support learning teaching and enhancement in their subject' and 'to ensure that staff engage on an ongoing basis in appropriate career development and Continuing Professional Development activities'.

The University has a formal CPD Policy and Framework in place to demonstrate the University's commitment to ensuring staff engagement with appropriate career and professional development activities. The Framework for Professional development sets out the minimum CPD requirements for each grade of staff – all staff are advised that they are expected to meet the minimum requirements of the Framework upon appointment.

One of the core development activities which all academic staff are expected to undertake is the completion of a Post Graduate Certificate in Higher Education Practice (PGCHEP). Whilst it is not a mandatory requirement for staff to undertake the qualification academic staff are required to provide an explanation for not completing the certificate. The PGCHEP helps to ensure that all staff involved in a teaching role meet the University's threshold standard for teaching and learning.

3.2 Appraisal

Another key mechanism for monitoring the quality of teaching delivered (as well as engagement with the Professional Development Framework) is the University's appraisal system. The Development Appraisal Review Scheme (DARS) was introduced in 2007 and all employees are now required to complete a formal appraisal at least once every 2 years. DAR provides a mechanism by which the strengths, contributions, future training needs

and personal development of each member of staff can be formally discussed with their line manager. The Pro Vice Chancellor reviews engagement with the DAR programme on an annual basis and we note that consideration is currently being given to devising an appropriate mechanism for monitoring the effectiveness of the scheme.

3.3 Peer Review

We note that in 2008 the University undertook a review of its Peer Observation Scheme, and as a result of which introduced 'Peer Supported Reviews'. This new model extended the scope of the review from a traditional focus on teaching, to cover a wide range of teaching and learning activities. Staff are now able to select a specific aspect of their activities with the reviewer acting as a 'critical friend' providing feedback and offering suggestions for improvements to current practices.

Staff members are required to complete a summary report detailing the main outcomes of the process which is then used as the basis for an annual report to ADEC on the effectiveness of the Peer Supported Review Process.

3.4 Reporting Mechanisms

The Academic Development and Enhancement Committee has responsibility for 'maintaining oversight of the CPD Policy including monitoring its implementation and compliance with DARS'. As such any proposed changes to the CPD policy are presented to ADEC for formal approval.

Overview of key Quality Assurance processes and Structures employed by the University

4) Overview of course quality monitoring procedures

4.1 Programme Management System

We note that in 2008 the University piloted a new programme management system to replace the annual subject monitoring system which was historically been used. TLC identified a need to reduce the bureaucracy of the annual subject monitoring system and to ensure that the responsibility for ongoing review of programmes and enhancement of learning experience is placed on academic staff. The programme management system was initially piloted in three of the University's six faculties – and under the new system Course Committees were required to consider all quality indicators as and when they became available. In order to assist in this process the QMAU produced draft checklist of items to be reviewed during the year as well as draft meeting agendas.

The progress of the new Programme Management system has been closely monitored by the Academic Development and Enhancement Committee who have received a number of reports on the development of the scheme since its initial pilot in 2008. We note that ADEC took the decision to formally extend the pilot across all University faculties for a further period of two years with a subsequent evaluation of the project to be completed at the commencement of the second year.

We note that the most recent evaluation report (dated 20th April 2010) identified a number of issues regarding the operation of the system – specifically concerns were raised regarding the adequacy of Course Committee minutes as sufficient evidence of oversight and monitoring, with differing standards identified across faculties in relation to the quality of minutes produced. We also note that QAA recommended that the University 'continue to evaluate the extent to which arrangements for the annual monitoring pilot allows the University and faculties to maintain oversight of the quality of standards of educational provision'.

To this end a formally constituted Sub-Committee of ADEC has been convened, the Annual Monitoring Sub-Committee, which has a more extensive remit for reviewing quality indicators and conducting reviews of courses in order to provide more central oversight in relation to the operation of the Programme Management System.

4.2 Module Monitoring

The module monitoring system is used to focus on those modules which are outliers in relation to student performance – i.e. those modules with significantly higher or lower than expected student performance.

The module monitoring process is formally detailed within the PAMR - with a detailed module review will be completed for those modules identified, involving discussions with Module Co-Ordinators and review of relevant documentation including student survey results and minutes of staff student consultative committees. If necessary an action plan will be drawn up to address any issues identified as a result of the review. The Course Committee has responsibility for monitoring progress against the action plan.

4.3 External Examiners

External Examiners are required to be appointed for every course which leads to an award with nominations coming from individual faculties. The Academic Office is responsible for reviewing all nominations and ensuring that appointments are made in line with the University's External Examiners Handbook and Code of Practice on External Examiners. The Teaching and Learning Committee have oversight in relation to External Examiner appointments and receive a report on an annual basis in relation to External Examiner nominations and appointments.

External Examiners are required to provide an annual report to the University including consideration of assessment methods, student performance and comparability with similar programmes elsewhere. These reports are sent to the Pro Vice Chancellor for Teaching and Learning with reports being considered by course / subject committees as part of the annual monitoring process (whether this be annual subject management or the programme management system). The Pro Vice Chancellor also prepares an annual report to TLC, providing an overview of the key themes emerging from the reports. This report will highlight positive comments as well as areas requiring further attention.

5) Overview of external quality monitoring processes

5.1 Quality Assurance Agency

The University is subject to Institutional audit by QAA on a cyclical basis. QAA's most recent institutional audit was completed during March 2010. Institutional audits are carried out by a team of academics who review the institution's quality and standards in line with its Academic Infrastructure. We note that the final audit report received from QAA concluded that 'confidence can reasonably be placed' in the soundness of the institution's management of academic standards and the awards offered and the management of the quality of learning opportunities available to students.

Overview of key Quality Assurance processes and Structures employed by the University

The report also highlighted a number of actions which the audit team would consider desirable including:

- Extending participation of students in the quality assurance process
- Continuing to evaluate the pilot programme management system
- Reviewing the requirements of external examiner participation in the consideration of assessment
- Reviewing the arrangements for management of UU Health programmes overseas
- Clarify the requirement for research supervisor training.

Given the significance of the QAA Institutional Audit process, all relevant matters pertaining to the audit are generally discussed at ADEC, TLC and Senate meetings.

We note that when initial findings were provided by QAA, a draft action plan was developed with individual issues being allocated to those responsible for ensuring that appropriate remedial actions are taken to address the issues raised. The summary plan was presented to both ADEC and TLC with ADEC being charged with overall responsibility for ensuring that on-going actions in relation to recommendations continue to be taken as appropriate. We note that work is ongoing in relation to the implementation of actions identified within the QAA Institutional audit report.

5.2 Professional Statutory and Regulatory Bodies

The University has links with a wide range of Professional, Statutory and Regulatory Bodies (PSRBs) and a formal protocol is in place for the management of relationships with PSRBs, which is managed by QMAU. Whenever possible the University will attempt to arrange a joint validation visit to coincide with the accreditation process completed. Where it is not possible to organise joint events a separate validation visit will be arranged with central support being provided by the Quality Management and Audit Unit as required, including the review of pre-visit documentation and identification of areas where additional information may be required

The Teaching and Learning Committee receive a report in relation to each accreditation visit completed as well as receiving an annual report in relation to the total accreditation activity undertaken during the year. This report will provide detail of the courses which sought accreditation during the year and the outcome of the visit. TLC will also be presented with a proposed schedule of visits to be undertaken in the following year.

6) Student Feedback Mechanisms

6.1 Complaints Procedures

We note the University's formal complaints procedure is made widely available and accessible to students by a variety of mediums including the Students Union, University Libraries, Registry and the University Internet. The focus of this procedure is ensure that as many complaints as possible are satisfactorily dealt with at a local level, however the procedure does detail the process to be followed when escalating complaints.

The Quality Management and Audit Unit are responsible for administering the complaints procedure and a member of the QMAU team acts as the Student Complaints Liaison Officer who will receive complaints directly from students and offer support to faculties in relation to the resolution of complaints. The Quality Management and Audit Unit will also prepare an annual report to Senate on Student Complaints received during the year. We note that during 2009/10 a total of 41 enquiries were received by the Student Complaints Liaison Officer and in each case the student was advised of the appropriate way to pursue their concerns. Only one complaint was received at 'Stage 3' of the process (the complaint will be referred to the Complaints Review Panel if a satisfactory response has not been received from the relevant Dean or Head of Faculty), and we note that at the time of our fieldwork this complaint was still ongoing. The Annual Student Complaints report will also provide a breakdown in relation to the nature of complaints received, which will be used to identify any underlying issues which will require remedial actions to be taken.

6.2 Staff / Student Consultative Committees

The University requires that a Staff / Student Consultative Committee (SSCC) be established in in relation to each course or subject offered by the University. Alternatively a student representative must be included on the course or subject committee, although we note that University encourages the use of both practices. SSCC provide an appropriate forum for students to provide feedback in relation to their course and provides students with a sense of involvement in the management of their programme.

The University takes a number of steps to encourage the implementation of SSCC including the provision of sample agendas and minute templates by the Quality Management and Audit Unit. We also noted that the QMAU publish good practice guidelines in relation to the operation of Staff Student Consultative Committees as well as examples of best practice identified at other institutions.

Overview of key Quality Assurance processes and Structures employed by the University

6.3 National Student Survey

The University's Quality Management and Audit Unit are charged with the responsibility of analysing the results of the National Student Survey which is completed on an annual basis by participating higher education institutions across the UK. The initial findings from the survey will be presented to ADEC, where the key findings will be highlighted, specifically any areas where the University has exceeded the national average, or where the University has underperformed against the national benchmark. Following the initial review of the results each Faculty will then be required to provide responses detailing specifically:

- How they plan to address the issues of quality and timeliness of student feedback; and
- Key actions which are to be taken to improve the performance in subject areas that fall below the national average.

These reports are reviewed in their entirety by ADEC, who will continue to subsequently monitor the actions taken by Faculties to address issues raised within the survey.

We also note one of the key objectives identified within the University's Integrated Corporate Plan is to 'move towards the national benchmark in current year and to achieve the benchmark within the life of the Corporate Plan for Student Satisfaction Survey'. However, based upon the results of the National Student survey there are a number of survey areas where the University results have failed to converge with the national benchmark, including:

- Teaching on my course, where the University received a score of 80% and the National benchmark was 84%
- Assessment and feedback where the University received a score of 61% and the national benchmark was 66%
- Organisation and management, where the University received a score of 73% and the national benchmark was 74%.

We acknowledge that the results of the NSS are closely monitored at various levels throughout the University with summary results being presented to the Senior Management Group as well as the Academic Development and Enhancement Group and the Audit Committee. Furthermore, the outcomes of the survey will also be monitored through the ongoing review of the Integrated Corporate Programme which includes specific objectives in relation to the NSS as noted above. It will be imperative that this level of oversight continues going forward to ensure

that the University meets the objectives as detailed within the ICP and converges with the National benchmark in relation to all survey areas.

6.4 Post-Graduate Taught Experience Survey

The Post-Graduate Taught Experience survey is managed by the Higher Education Academy and is voluntary survey, which the University participated in for the first time in 2010. The survey asks students to comment upon to which their course met their expectations in relation to six key areas, including the quality of teaching and learning and Assessment and Feedback. Again the results of this survey are presented to both the Academic Development and Enhancement Committee as well as the Audit Committee.

We note that the overall response rate to the survey was relatively low and a number of concerns were raised in relation to the format and operation of the survey. As such the University does not intend to participate in the survey in 2011, but may consider introducing a 3 year cycle of the survey, should the NSS not be extended to include Post-Graduate Students.

Definitions of prioritisation & grading

Prioritisation of observations and recommendations

- Our observations and recommendations are graded as follows:

Priority 1*	Significant weaknesses at a department/faculty or University level which have or could have a significant impact across the University as a whole and which should be addressed immediately
Priority 1	Significant weaknesses at a department/faculty level which do not have a significant impact for the University overall but do have a significant impact at operational/department/faculty level and therefore should be addressed immediately by department/faculty management
Priority 2	Operational weaknesses which are not fundamental but should be addressed as soon as possible
Priority 3	Operational improvements that represent best practice

Grading of assurance

- Our assurance conclusions are graded as follows:
 - **Substantial:** There is a robust system of risk management, control and governance which should ensure that objectives are fully achieved.
 - **Satisfactory:** There is some risk that objectives may not be fully achieved. Some improvements are required to enhance the adequacy and/or effectiveness of risk management, control and governance.
 - **Limited:** There is considerable risk that the system will fail to meet its objectives. Prompt action is required to improve the adequacy and effectiveness of risk management, control and governance.
 - **Unacceptable:** The system has failed or there is a real and substantial risk that the system will fail to meet its objectives. Urgent action is required to improve the adequacy and effectiveness of risk management, control and governance.