



University of  
Chester

## Quality and Standards Manual

### Handbook D: Academic Planning, Monitoring and Review

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## 1. Introduction

The University's approach to the monitoring, evaluation and review of its academic portfolio is risk-based and comprised of several interlinked elements:

1. **Continuous Monitoring of Enhancement (CME):** Programme Leaders are responsible for maintaining a quality improvement action plan in response to a wide range of quantitative and qualitative data. Faculties, through the Board of Study, are responsible for the monitoring the effectiveness and impact of the action plans.

To support the CME process, programme teams and academic departments must engage in an on-going process of impact analysis to satisfy themselves that their students are receiving an excellent academic experience and that the outcomes they achieve are positive. Programme teams and academic departments can choose how to do this in their own context, however they must:

- a. Use the **mid-term review** process to track the progress of individual students and cohorts.
  - b. Follow the process to make available **module evaluation questionnaires** as set out in this handbook.
  - c. Support the process for electing and engaging with **Student Experience Representatives**.
  - d. Ensure that students have formal opportunities to provide regular feedback through **Student Voice Meetings**.
  - e. Raise awareness of and encourage participation in **student surveys** as directed by the Dean of Faculty.
2. **Programme Summary Data (PSD):** Linked to the strategic planning process, the programme summary data includes measures across recruitment, proxies for quality and student outcomes. The dataset is published annually for all programmes.

In order to take a balanced view of the data, initial judgments on quality and outcomes are made at subject (CAH3) level. The section below on [data aggregation](#) explains what this means in practice.

The initial judgement on quality, based on the PSD, will be one of:

- a. Q1 routine monitoring
- b. Q2 elevated monitoring
- c. Q3 enhanced monitoring

Although not subject to separate initial judgements, the key metrics at programme level will also be reviewed. This means that if a programme within a CAH3 subject area with an initial judgement of Q1 is nevertheless below an acceptable threshold

in one or more of the key metrics, that programme may individually be subject to further investigation and/or intervention.

3. **Quality Monitoring:** subject areas that perform well against the proxy measures for quality and the student outcomes measures (Q1) have only to maintain their CME quality improvement action plan which is reviewed periodically in Faculty. Subject areas that pose a slightly elevated risk of not achieving the required outcomes (Q2) are scrutinised more closely. Where a subject area appears to pose a high risk to quality and outcomes (Q3), its performance is monitored at an institutional level.
4. **Department Portfolio Reports:** Heads of Department are responsible for convening meetings of their teams to consider the programme summary data. An overall evaluation of recruitment, quality and outcomes in the department is undertaken and recommendations about the shape of the academic portfolio over the next three years are submitted to the Faculty Management Group.
5. **Faculty Portfolio Plans:** based on the outputs from the department portfolio reports, the Faculty Management group maintains a three-year plan, prioritising the development of its academic portfolio. These plans are scrutinised by the Portfolio Development and Management Committee and, where necessary, are subsequently revised before being submitted as part of the strategic planning process.

This routine monitoring activity is augmented by other monitoring and compliance activity, coordinated centrally by Academic Services. This includes:

1. **General Monitoring:** collation of indicators, by Academic Services, on the academic experience of students through, for example, the receipt of minutes from Student Voice Committees, academic appeals and complaints, external examiner reports, student engagement information, module evaluations and assessment outcomes. This approach will also be used for oversight of the effectiveness of Faculty Boards of Study and their quality-management mechanisms.
2. **Internal Quality Assessment:** bespoke reviews of academic provision either where there is a concern about the standard of the academic experience of students and the outcomes being achieved, or where periodic or regulatory review is required (e.g., provision that is inspected by Ofsted).
3. **Programme Management Committees:** programmes that require close and detailed monitoring, either because of regulatory requirements, or because outcomes are below acceptable minimums may be managed by a dedicated committee overseen by Academic Services.

### Level of monitoring, subject groupings and data aggregation

The University may choose to monitor its provision at any level (module, programme, subject, department and faculty). However, its primary monitoring activity is conducted at

programme and subject level. If the University decides to conduct monitoring at any of the other levels, the method and underpinning data will be described separately.

#### Data aggregation

The University produces data at programme and subject level. As explained above, initial judgement about the quality of provision are formed at subject level.

In some instances, it may not be possible to produce data at programme level. This usually happens when there are insufficient students to report on. In these cases, the University will assume that the programme level outcomes mirror those at subject level.

**Example:** Nationally, all HE programmes are assigned a HECoS code (Higher Education Classification of Subjects). The HECoS codes can be aggregated to give three levels of detail (Common Aggregation Hierarchy); CAH1 being the broadest and CAH3 being the most granular.

In the National Student Survey, a programme did not receive enough responses for data to be published. However, the combined responses to all programmes in its CAH3 group did meet the threshold. Therefore, the University will attribute the outcome achieved by the CAH3 group to the programme.

#### CME groups

Historically, at the request of each Faculty, a number of related programmes might have been formed into a single CME group and therefore one action plan may cover more than one programme. However, the programme summary data reports on the status of each programme individually and at subject level.

No further amendments to the CME groups are possible at this time and no new groupings will be applied in the future.

#### Quality Compliance Framework

The University maintains a framework which outlines its overarching methodology for the development, monitoring and review of its academic portfolio in alignment with the Conditions of Registration of the Office for Students and, where applicable, the requirements of the Education and Skills Funding Agency. This handbook should be read in conjunction with the Quality Compliance Framework.

#### Academic Collaborative Provision

This handbook explains how all academic provision that leads to a University of Chester award is monitored and reviewed. This includes provision that is delivered through an academic partnership. The relevant Faculty Board of Study is responsible for monitoring the quality of provision that is delivered in partnership; however, University Centre Reaseheath has responsibility for monitoring its own provision through its Board of Study. For this

reason, throughout this handbook, references to the Faculty and Faculty Board of Study also apply to University Centre Reaseheath.

Processes to monitor the overall effectiveness of each academic collaborative partnership are described in Handbook C. Where there are concerns about the effectiveness of an academic collaborative partnership or the quality of provision being delivered in a partnership arrangement, an Internal Quality Assessment Panel (Partnerships), described in part 3 of this handbook might be commissioned to investigate further.

Academic collaborative partners, including University Centre Reaseheath, do not take part in the Education Planning processes which are covered in part 4 of this handbook.

## 2. Continuous Monitoring of Enhancement

All programmes of study leading to a University of Chester award (excluding postgraduate research degrees) are required to maintain a Continuous Monitoring of Enhancement (CME) action plan. This plan explains how the quality of the programme will be improved and high-quality maintained. All CME action plans are hosted online at <https://cme.chester.ac.uk/>.

The Programme Leader is the recognised author of the CME action plan, but in practice the responsibility for maintaining the action plan rests with the whole programme team. This is done through the continuous evaluation of qualitative and quantitative data that is generated for, by and with the programme team and their students throughout the academic year. This enables programme teams to objectively consider whether their provision is academically rigorous, innovative and is meeting student and stakeholder expectations.

Help and support for using the online CME system and training on how to write a good CME action plan has been put together by Academic Services and can be found on [Portal](#).

### Responsibilities for CME

All parts of the University have a role to play in operating CME; yet the process itself is secondary to the outcome it seeks to achieve: the development and maintenance of a high-quality learning experience for our students. The process is designed to work across the year and mesh with the self-reflection and analysis that programme teams will naturally undertake as learning, teaching and assessment activity progresses. In this way, critical evaluation by the programme team is, as a starting point, already assumed and the focus is, instead, on the actions being taken and their impact.

- The **programme team** is responsible for gathering and considering data relating to the quality of the educational experience they are providing and the outcomes their students are achieving. Based on this, they devise, update and evaluate actions to enhance and maintain high-quality and positive outcomes.
- The **academic department** is responsible for having oversight of the programme action plan and for supporting the programme team to deliver a high-quality academic experience. Opportunities for sharing best practice, identifying and helping to address barriers to improvement and fostering a collegial environment are all key requirements of the department.
- The **Faculty** through its **Board of Study** is responsible for the quality of the provision. With reference to data published by the University and the lead indicators available to it, the Faculty scrutinises action plans and constructively challenges the assumptions of the programme team.
- Through the **Education Committee** and its subcommittees (primarily **Quality and Standards Subcommittee**), the University makes judgements on the overall quality



of provision and intervenes in instances where minimum thresholds are not achieved.

### Review of CME action plans

Formal review of CME action plans is conducted twice by the Faculty Board of Study (the Board); a main review takes place in the autumn (during November and December) and an interim review takes place in the spring (between March and May). This section explains the process of review.

### Programme summary data and risk profile

The programme summary data is produced by the end of October in each academic year. It gives key data for individual programmes and groups of programmes aggregated to subject level (CAH3). Within this dataset, the University has selected proxies for quality:

- **Continuation:** the proportion of students who are registered on a programme 12 months following their first registration.
- **Completion:** the proportion of students who successfully complete the qualification that they had originally registered for.
- **Progression:** the proportion of graduates who progress to highly skilled employment.
- **Student satisfaction:** (taken from NSS and PTES), the proportion of students who express overall satisfaction with their experience of the University.

The University sets minimum thresholds for each of these proxy measures which are published alongside the programme summary data.

At subject level, each of the proxy measures is first assessed and scored separately as follows:

- Performance at or below the threshold, and up to three points above it: **2**.
- Performance between four and nine points above the threshold: **1**
- Performance ten points or greater above the threshold: **0**

An overall risk profile for the subject is calculated by combining the scores for each of the four proxy measures. The calculated is based on a weighting of 1.5 for continuation and completion and 1.0 for progression and student satisfaction.

- A score of 0-2 gives a risk profile Q1 (routine monitoring)
- A score of 3-5 gives a risk profile of Q2 (elevated monitoring)
- A score of 6-8 gives a risk profile of Q3 (enhanced monitoring)

### Faculty Board of Study main review (November – December)

During the main review point, the Faculty Board of Study must review the CME action plans of all programmes, irrespective of its risk profile. If it wishes, the Board may decide to set up subgroups to undertake this work.

The Board has discretion in how it chooses to conduct the review, but it must do so with reference to the programme summary data. However, at a minimum, the outcomes of the review must align with the following, based on the subject risk profile:

- **Q1 (routine monitoring)**
  - At programme level, the CME action plan should continue to be updated as and when needed.
  - At Faculty level, the Board should assure itself that all programmes in the subject group are performing well. As long as this is the case, no further review/intervention is required.
- **Q2 (elevated monitoring)**
  - At programme level, the CME action plan should be strengthened as required with reference to the programme summary data.
  - At Faculty level, the Board should request a report on progress against the CME action plan at each meeting for the remainder of the academic year.
- **Q3 (enhanced monitoring)**
  - At programme level, the CME action plan should be strengthened as required with reference to the programme summary data.
  - At Faculty level, the Head of Department should report to the Dean on the status of the programme and the progress of students no less than once per month.
  - The Head of Department must also prepare a critical analysis of the performance of the subject group which will be considered by the Academic Leadership Group. The date by which this is required will be published alongside the programme summary data.

### Faculty Board of Study interim review (March - May)

For the interim review point, the Board of Study must be assured that CME action plans continue to be evaluated and updated. At this point, the focus should be on the impact of the action plan with reference to lead indicators (see below).

### Lead indicators

The programme summary data provides an annual snapshot of the health and performance of each programme and subject group across a range of key measures. However, the primary purpose of the CME is to capture incremental and impactful actions that each programme team takes *throughout the year* to respond to the changing needs of their students. As such, whilst the programme summary data is crucial to enabling faculties to

evaluate the overall effectiveness of the actions taken by programme teams, there are a range of other, more frequently updated, data which must be used to measure the impact of actions in-year.

Some examples of the lead indicators that may be used are:

- Engagement data: attendance, interactions with online activities, assessment submission. Actions that address barriers to continuation and completion might be evaluated with reference to data on how students are engaging over a defined period.
- Career readiness survey: the extent to which students express confidence in planning for their future careers might give an insight into the effectiveness of actions to address progression to high-skilled employment.
- PAT intelligence and mid-term reviews: as a collective group, themes, issues and trends being identified by PATs and the wider programme team in their interactions with students. Getting PATs to ask specific questions on a particular topic might identify whether an action is having a positive impact.
- Student Voice Meetings and pulse surveys: the feedback gathered at SVMs and through data generated from very short, targeted surveys can indicate whether actions are having an impact.
- Module evaluations: both mid and end-point evaluations might be used to assess whether specific actions at module level are having the desired impact.

This list is not intended to be exhaustive and there will be other sources of data and information that can be obtained locally or through professional support services departments. The key is to identify the evidence that will be used to measure the success of an action at the outset and not to be too heavily reliant on the programme summary dataset. **It is important to remember that at the point the programme summary dataset is published it is too late to impact the experience and outcomes of the students counted within it.**

### 3. Institutional quality monitoring

The routine monitoring of academic quality rests with each Faculty as described in section 2. The University maintains broad oversight of all provision to ensure that acceptable levels of quality and student outcomes are achieved. It does this by adopting a risk-based approach and with reference to its Quality Compliance Framework.

#### Subject risk profiles

The risk-profile of each subject group is updated annually through the publication of the programme summary data. Subject groups with an outcome of Q1 (routine monitoring) and Q2 (elevated monitoring) are monitored and reviewed within the relevant Faculty. Specific institutional level monitoring in these cases is likely to be no more than as described in the section on the [general approach to monitoring](#). However, subject groups with an outcome of Q3 (enhanced monitoring) are given additional scrutiny at institutional level.

The risk profile can be amended, at any point in the academic year, in response to information gathered through the University's general approach to monitoring and following a report from an Internal Quality Assessment Panel.

**Example 1:** A subject group has an outcome of Q1 upon publication of the programme summary data. As part of the general monitoring activity, lead indicators for engagement indicate that a high proportion of students appear to be disengaged through non-attendance. This suggests a change in the risk profile which is considered by an Internal Quality Assessment Panel.

**Example 2:** A subject group has an outcome of Q3, but with a particularly heightened risk in relation to the progression metric. An Internal Quality Assessment Panel considers the approach being taken by the programme team(s) concerned, determines that outcomes are acceptable leading to a lower risk-profile being agreed.

#### Enhanced monitoring process

A special Internal Quality Assessment Panel (IQAP) meets during November and January. At the November meeting, the programme summary data is received, themes and trends identified and the subject groups with an outcome of Q3 are noted. At this stage, an initial view is taken about the possible investigations and interventions that may be required.

At the January meeting, for each subject group with a Q3 outcome, the IQAP will receive:

- The relevant extract of the programme summary data;
- A summary, prepared by Academic Services, which interprets the data;
- The relevant programme CME action plan(s); and
- A critical analysis from the Head of Department.

Following a review of this information, the IQAP will confirm what, if any, further investigations and or interventions will be put in place:

- **Investigations** are carried out by an IQAP and can be either desk-based or involve a review event. The purpose of an investigation is to either confirm or amend a subject (or programme) risk profile. The IQAP may make recommendations for interventions.
- **Interventions** are put in place on the basis of recommendations to support a programme team to improve the quality of its provision and/or student outcomes. The interventions will be tailored to address the areas of weakness identified through an investigation.

### Internal Quality Assessment

An internal quality assessment can be commissioned at any point in response to concerns about academic quality and standards and/or student outcomes being delivered in a programme, subject group or, where relevant, service department. An internal quality assessment can be commissioned by one of the following:

- Deputy Vice-Chancellor and Provost
- Head of Academic Quality and Standards
- Deputy Head of Academic Services
- Strategic Executive Team
- Senate
- Education Committee

Where an internal quality assessment is commissioned by one of the named post-holders, rather than by a committee, they will provide reasons for having done so to the Education Committee. The exception to this is the commissioning of an internal quality assessment for provision that is regulated by a PSRB and/or funded by ESFA and which is subject to external cyclical review. Such internal quality assessments will be commissioned routinely and no reasons for doing so are required.

### Internal Quality Assessment Panel

Internal quality assessments will be conducted by an academic panel (IQAP). Each IQAP will have one chair and at least one member. The Head of Academic Quality and Standards is a member of all IQAPs *ex-officio* although they may nominate a representative. The size and scope of the IQAP will be determined by Academic Services in liaison with the chair of the panel, based on the reason for it being commissioned. The IQAP may also include external members.

The IQAP may conduct its work through meetings and visits to the programme team or department being assessed or may be conducted as a desk-based exercise. It can request

evidence and documentation, but programme teams or departments should not normally have to create new documentation specifically for the purpose of the internal quality assessment. All internal quality assessments are conducted with reference to the University's Quality Compliance Framework.

At the end of its investigation, the IQAP will submit a report of its findings. The report may also make recommendations for interventions where appropriate. Reports are submitted to the Quality and Standards Subcommittee which will vote on whether to accept the findings and authorise the interventions recommended or whether to refer the report to Education Committee for further consideration.

#### Internal Quality Assessment Panel (partnerships)

Where there is a concern about an academic partner organisation, an IQAP (Partnerships) might be commissioned to investigate. The IQAP (Partnerships) operates in substantially the same way as described above. However, there is an expectation that the relevant Faculty will make reasonable efforts to resolve any issues outside of this process.

An IQAP (Partnerships) can be commissioned by the Head of Academic Quality and Standards without needing to report reasons for having done so. Academic Services will write to the partner organisation to outline the nature of the concern and to explain how the investigation will be conducted.

The IQAP (Partnerships) submits a report of its findings to the Head of Academic Quality and Standards who will decide what action to take. The report and details of any actions required will be submitted to the Collaborative Provision Subcommittee.

#### Programme Management Committees

In some instances, an Internal Quality Assessment Panel might recommend that a Programme Management Committee (PMC) is formed to support the programme team to enhance and maintain the quality of their provision. Programme Management Committees can also be formed even when the risk profile of a programme is low; this will be especially the case if programmes are undergoing a process of registration or accreditation with a professional body for the first time.

Programme Management Committees are chaired by a senior member of academic staff appointed by the Head of Academic Quality and Standards. The membership of the PMC and its terms of reference are decided based on the reason for forming the PMC and are bespoke in each case. In some instances, external experts are invited to support the work of the PMC.

#### Periodic Evaluation (programmes)

Each programme that leads to an award of the University is subject to periodic evaluation. The purpose of this is to check that the programme meets the requirements set out in the

University's Quality Compliance Framework; especially in relation to those requirements that are not easily checked by a proxy measure (e.g. currency, academic support etc.). The periodic evaluation is usually a desk-based exercise, although the programme team might be asked to produce a brief self-evaluation of the performance and health of the programme.

The period of time that can elapse before a periodic evaluation takes place will be determined when a programme is first approved.

If concerns are identified during the periodic evaluation process, Academic Services will attempt to resolve these with department and faculty managers as appropriate. However, if concerns persist, an internal quality assessment might be commissioned.

### General monitoring approach

The University, through Academic Services, may conduct general, low-level monitoring in relation to the quality of provision and student outcomes. The aim of this approach is to ensure that the requirements set out in the Quality Compliance Framework are being met without increasing the administrative burden on academic staff. Examples of how this monitoring activity might be conducted include:

- Representation on each Faculty Board of Study;
- Random sampling of documentation that University policies and procedures require the production of in the normal course of delivering high-quality teaching and learning;
- Informal conversations with Faculty and programme managers; and
- Reviewing University data and lead indicators.

Occasionally, as part of the general monitoring activity, External Examiners or External Quality Advisors might be asked to report on a specific area of activity within a subject group or department.

The purpose of the general monitoring approach is to support Faculty managers with the early identification of emerging threats to quality and student outcomes, as well as to provide University managers with an assurance that the policies and processes designed to ensure a high-quality learning experience are being adhered to.

There is an expectation that any issues or concerns identified through the general monitoring process will be resolved through collegial dialogue. However, if problems persist, it may become necessary to commission an internal quality assessment to investigate formally.

## 4. Quality of Academic Experience Indicators

Academic departments and Faculties are responsible for conducting defined evaluation processes to generate indicators of the academic experience of students. These may be used to create some of the [lead indicators](#) referred to in section 2.

### Module evaluation

All modules delivered as part of a programme leading to a University award must include an opportunity for students to evaluate them. The process in this handbook sets out the minimum expectation in this regard. Programme teams, departments and faculties may adapt this process, but should take advice from Academic Services, by contacting [enhancement@chester.ac.uk](mailto:enhancement@chester.ac.uk) to discuss their plans first.

A Module Evaluation Questionnaire (MEQ) should be made available to students normally between halfway and two thirds of the way through the module delivery. The MEQ must be available electronically via Moodle (there is a generic template available for use) and be open for around a week. Consideration should be given to making time within a timetabled lecture or seminar session for students to complete the MEQ.

The MEQ template sets out six questions as follows:

1. Do you understand what you are supposed to be learning on the module? (Yes/No)
2. Do you understand how you will be assessed? (Yes/No)
3. Do you know how to access learning resources? (Yes/No)
4. Do you know who to contact for help? (Yes/No)
5. Please highlight any good practice that you particularly liked. (Free text)
6. Is there anything that you would want to change? (Free text)

The Module Leader is responsible for collating and analysing the responses to the MEQ in conjunction with the module delivery team. A brief report summarising the main feedback points, any actions that will be taken as a result or reasons why action cannot be taken must be produced and made available via the Moodle site for the module within two weeks of the closure of the MEQ. The report should also be discussed at a Student Voice Meeting.

### Student Voice Meetings

Regular Student Voice Meetings must be convened at programme or department level to enable academic staff and students to engage in meaningful discussion about the quality of the provision. Full details of the requirements in relation to Student Voice Meetings is available in Handbook J.

### Peer observation of teaching

The University requires that all academic staff have their teaching practice observed annually. The University operates two procedures for this purpose. The Peer Observation of Teaching Guidelines should be used by staff who do not deliver teaching, learning and



assessment activities on ESFA funded provision. For staff who do deliver these activities on ESFA funded programmes (primarily higher and degree apprenticeships) the Observation of Teaching Policy (apprenticeships) must be followed. Both of these are available in Handbook J.

### Student Surveys

The University makes available annually for all students an institutional level survey, inviting them to provide feedback on their experience. This includes the statutory National Student Survey which is offered to all final year undergraduate students. The University's approach to delivering these surveys is adapted and updated annually and it is important that all staff follow the requirements for communication and presentation of the survey options to students as communicated by University and Faculty managers.

## 5. Education Planning

Education planning is closely linked to the University quality monitoring and review activity and is intended to align with strategic planning. Through this process, academic departments and faculties analyse their strengths and weaknesses, in relation to recruitment and quality, and make proposals for future developments. For this reason, it is very important that the outputs from the Faculty reviews of provision are used to shape proposals for new and changed provision.

### Department portfolio review and reporting

In the period between January and February each year, following the conclusion of the Faculty review of CME action plans, Heads of Department are responsible for compiling a report for the Dean.

The overall purpose of the department portfolio review is to make a critical appraisal of the department's academic offering by scrutinising the current performance of its programmes and conducting an evaluation of the quality and outcomes being secured. The output from this process should be a reflection on the need for substantial amendments or retirements of existing provision, as well as the development of new provision. In respect of this latter point, the management of the department portfolio with a review to maximising student recruitment, continuation and outcomes is key.

The department portfolio review will feed into the strategic planning process at the Faculty portfolio planning stage through recommendations to the Faculty Management Group in a templated report.

The template for the department portfolio review report will be circulated by Academic Services each year.

### Information to support Department Portfolio Reviews

The Department Portfolio Review must be conducted with reference to the programme summary data. Although a holistic review is required, the risk profile of each subject can be used to focus and guide the discussion. At this stage, the Department should also refer to the outcomes from the review of programme-level CME action plans (conducted by the Faculty in the autumn term), as well as the action plans themselves.

Additionally, Marketing Recruitment and Admissions (MRA) will provide 'State of Play' reports to support reflections on recruitment trends. Departments will also want to refer to other available data, such as contribution rates and SSRs to inform the review.

### Development of Department Portfolio Reviews

A departmental meeting should be convened to discuss the development of the Department Portfolio Review with reference to the available information. The way that this is conducted

is at the discretion of the Head of Department, who may choose to hold multiple meetings if needed.

The Department Portfolio Review template guides the required output from this process, but broadly, the purpose of the meeting is to:

- Scrutinise the programme summary data and make recommendations on programmes;
- Evaluate all programmes for quality and outcomes with decisions to be made on how to strengthen CME action plans subjects with a Q2 and Q3 risk profile;
- Consider the department's need to develop and deliver proposed new provision, and/or modify or merge existing provision, which may be created by proposals to withdraw provision;
- Ensure the Department Portfolio Review outcomes report covers all areas of concern highlighted in the available data; and
- Align appraisals with institutional strategic objective (e.g. the Citizen Student Strategy).

The Head of Department, in discussion with departmental colleagues, will need to consider the most appropriate course of action for each programme to propose to the Faculty Management Group. Each current programme must be logged in the Department Portfolio Review template as either requiring no change, modification or withdrawal. The Department Portfolio Review should consider the portfolio of programmes prospectively for a 3-year period. The outcomes of these discussions must be captured within the Department Portfolio Review template provided. Guidance on completing the template can be found embedded within the template itself.

#### [Access and Participation Plan](#)

The Department Portfolio Review template includes a section to report on activity that has been undertaken in the last 12 months, what impact this activity had and what future activity will be undertaken in relation to access and participation. The information requested in this section will support the University's reporting against its APP targets.

#### [Submission of Department Portfolio Reviews](#)

Completed Department Portfolio Reviews must be submitted to the Dean no later than the end of February in each year.

#### [Faculty portfolio planning](#)

Following the submission of the Department Portfolio Reviews, during April and May the Faculty Management Group is responsible for updating the Faculty Portfolio Plan.

The overall purpose of the Faculty Portfolio Plan is to take a strategic overview of the Faculty's curriculum portfolio and its current performance, and to develop ongoing plans for

its development and management with a view to maximising student recruitment, continuation and outcomes. This will then feed into the strategic planning process where the wider issues of resource allocation are considered.

The suggested template for the Faculty Portfolio Plan is available from Academic Services. However, the Faculty Management Group should update and amend its plan annually, rather than starting afresh each year.

#### Information to support Faculty Portfolio Plans

The development of Faculty Portfolio Plans should be informed by the programme summary data, 'State of Play' reports provided by Marketing, Recruitment and Admissions, and the outcomes of academic Department Portfolio Reviews. In particular, contribution rates and SSRs should be considered.

#### Development of Faculty Portfolio Plans

A meeting of the Faculty Management Group should be convened to discuss the development of the Faculty Portfolio Plan with reference to the available information.

Consideration should be given to:

- Capacity available within departments to develop and deliver proposed new provision, and/or created by proposals to withdraw provision;
- Resource implications for the development of new provision, major modification of existing provision and withdrawal of provision;
- Areas of duplication between Department Portfolio Review proposals and/or opportunities for inter-departmental collaboration which might enhance or make proposals more cost-effective;
- Gaps in the outcomes of Academic Department Portfolio Reviews suggested by the available data; and
- Alignment with strategic objectives (e.g. the Citizen Student Strategy).

The Dean, in discussion with the Faculty Management Group, will need to consider how proposals might be prioritised, resourced and sequenced over a period of 3 years in the Faculty Portfolio Plan. The outcomes of these discussions should be captured within the Faculty Portfolio Plan using the template provided. Guidance on completing the template can be found embedded within the template itself.

#### Higher and Degree Apprenticeships (Faculty level)

The Faculty Portfolio Plan template includes a section to report on the Faculty's strategic direction in relation to higher and degree apprenticeships. This should give a brief evaluation of the effectiveness of employer engagement in the development of the Faculty's provision and in relation to the overall experience of apprenticeship learners in the Faculty. The information requested in this section will be used to support the University's preparations for inspection by Ofsted.

### Quality and outcomes measures

The Faculty Portfolio Plan should include reference to the actions taken to maintain a high-quality academic experience for students and to secure excellent outcomes. The section on programme-level CME explains the process to be followed based on the risk profile of each subject. Subjects that have a risk profile of Q3 will be subject to institutional review in January. The Dean should ensure that they are fully briefed on the issues affecting these programmes and the steps being taken to address them in advance of this meeting. Even where a decision is taken to withdraw a programme, a clear plan to maintain (or improve) quality will be required.

### Portfolio Development and Management Committee

Completed Faculty Portfolio Plans should be submitted by the end of April for scrutiny by the Portfolio Development and Management Committee during May.

Following consideration of Faculty Portfolio Plans, detailed proposals for new programme developments, major modifications with resource implications, and programme withdrawals will be required to progress initiatives. These should be submitted to PDMC at an appropriate time in accordance with procedures set out in Quality & Standards Manual, Handbook B.



University of  
Chester

# Quality Compliance Framework

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Approved by:	Senate, 14 September 2022
Owner:	Academic Services
Contact:	<a href="mailto:aqs@chester.ac.uk">aqs@chester.ac.uk</a>
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## Introduction

The University has an obligation to ensure that its academic provision complies with the requirements of various external regulatory bodies. The purpose of this framework is to set out what these requirements are, the policies and processes in place to meet them and how compliance is checked. It is important that the framework is read with reference to Handbook D of the Quality and Standards Manual (Monitoring, Evaluation and Review).

All University provision must comply with the on-going conditions of registration relating to quality and standards as set out by the Office for Students. Additionally, Higher and Degree Apprenticeships provision is further regulated by the Education and Skills Funding Agency, required to meet the expectations of the Institute for Apprenticeships and Technical Education and is subject to inspection by Ofsted and the Designated Quality Body for England (on behalf of the OfS). The framework is aligned to the requirements of these bodies.

A number of University programmes are also accredited or approved by Professional Statutory and Regulatory Bodies (PSRBs). It is expected that, in broad terms, compliance with this framework will ensure that regulated/accredited provision meets PSRB requirements. However, there will be other, subject specific, requirements that need to be taken into account and these should be set out in the relevant programme documentation.

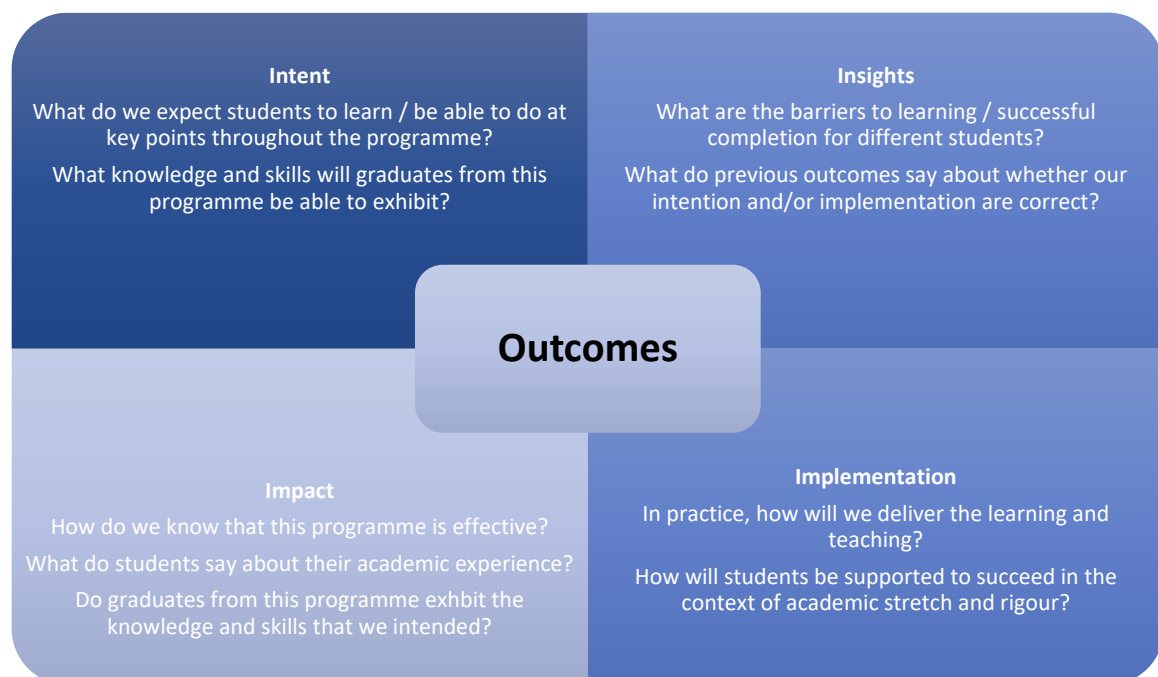


## Part A: General Approach

This part sets out the University's general approach to the development, monitoring and review of its academic provision to ensure that it complies with external regulatory requirements.

### 1. Intent, Insights, Implementation, Impact

The University's academic provision is developed, monitored and reviewed with the twin aims of providing an excellent academic experience and maximising student achievement. This means that its approach is **outcomes focussed**. This is achieved by concentrating on four key elements when developing new academic provision and monitoring the provision already in place.



### 2. Data-led quality assurance

The University's approach to judging the quality of outcomes is data-led. This is set out in Handbook D of the Quality and Standards Manual. Four key metrics are used to make initial judgments on quality.

- a. **Continuation:** the proportion of students who are registered on a programme 12 months following their first registration.
- b. **Completion:** the proportion of students who successfully complete the qualification that they had originally registered for.
- c. **Progression:** the proportion of graduates who progress to highly skilled employment.
- d. **Student satisfaction:** the proportion of students who express overall satisfaction with their experience of the University.

For each programme, the extent to which these measures are above or below thresholds set periodically by the University determine the initial judgement on quality and consequently the level and detail of monitoring that is undertaken as a result.

In addition, in some instances it will be appropriate to use other data points to determine whether further monitoring and/or review might be required. Normally, these additional data points will be used to augment information from the four key metrics. These additional data points may include (for example):

1. **Career readiness survey:** to gain an understanding of the extent to which students believe that they are prepared for their career outside of University.
2. **HESA data:** to benchmark outcomes achieved by students at the University with the rest of the sector.
3. **Student satisfaction surveys (NSS, PTES, PRES, in-house etc.):** questions may relate to specific elements of the student experience which may support an initial judgement on quality.
4. **Complaints and academic appeals:** data relating to complaints and appeals may be used to support initial judgements on quality once fully investigated and an outcome determined. However, isolated complaints or appeals are unlikely to be regarded as sufficiently representative.
5. **Breaches of academic integrity:** data relating to breaches of academic integrity will be benchmarked across the University. This data may support initial judgements on quality either in relation to the level of support for students to maintain academic integrity or the ability of a department to safeguard academic standards.

### 3. Proportionality and risk-based quality management

The University's operates a proportionate and risk-based approach to managing the quality of its academic provision. This approach is outcomes led; where the data and general monitoring activity indicates that provision is of high quality and student outcomes meet the University's expectations, the burden of the monitoring and compliance tests will be less. Conversely, where the indicators suggest that there is provision that does not meet the University's expectations for quality, there will be a greater level of intervention; firstly to contextualise the information available through the general monitoring approach and, if warranted, to support the programme team to raise the level of quality overall.

Some provision is subject to dual regulation by the Office for Students and a secondary body (for example, in the case of apprenticeship provision, ESFA/Ofsted). Where provision is subject to cyclical external review, rather than within a risk-based architecture, the University's internal monitoring and compliance checks will be greater

irrespective of the outcomes being achieved. However, where it can be quickly demonstrated that outcomes are being met consistently across the provision, the amount of time dedicated to conducting monitoring and compliance checks will be lessened.

## Part B: Quality requirements

This part explains the external requirements that University provision must meet. Through the following tables, each requirement is defined and the method(s) used to measure the extent to which the requirement is complied with are stated.

Tables 1 – 5 set out the Office for Students Conditions of Registration and the requirements for compliance. These requirements apply to all University provision. The tables should be read as follows:

- **Requirement:** this is derived from the OfS regulatory framework and explains what is expected from the condition of registration.
- **Definition:** this is derived from the OfS regulatory framework and defines the requirement.
- **Initial tests:** this sets out how the University will satisfy itself that (1) at the proposal stage, a programme is more likely than not to meet the requirement and (2) at the point of approval, the programme does meet the requirement. The initial tests relate to the **intent** of the programme.
- **Monitoring:** this sets out how on-going compliance with the requirement will be checked and evidenced. Part C sets out how and when this is done in practice. The monitoring activities relate to the **insights** and **implementation** of the programme. They are intended to support a forecast of overall student outcomes on the existing trajectory.
- **Compliance tests:** this sets out how the University will periodically judge that each programme and, where appropriate, the overall regulatory framework, is compliant with the requirement. Part C sets out how and when this is done in practice. The compliance tests relate to the **insights** and **impact** of the programme. They are intended to be the actual measure of student outcomes.

Table 6 sets out the factors covered in the Ofsted Further Education and Skills Inspection Framework in relation to the quality of education. These have been mapped against the requirements set out in the Conditions of Registration (tables 1 – 5) in relation to University provision funded by the ESFA.

Tables 7 – 9 set out the remaining factors covered in the Ofsted Further Education and Skills Inspection Framework (behaviour and attitudes, personal development and leadership and management). These are accompanied by a statement of how the University expects these will be evidenced which may be tested as part of a monitoring exercise. Table 9 (Leadership and management) is also mapped against the Conditions of Registration.

**Table 1: Condition of Registration B1 (Academic Experience)**

The provider must ensure that the students registered on each higher education course receive a high-quality academic experience. A high-quality academic experience includes but is not limited to ensuring that each course:				
Requirement	Definition	Initial tests	Monitoring	Compliance tests
<b>[R1] Is up to date</b>	<p>The programme is representative of current thinking and practices in the subject, including being appropriately informed by recent:</p> <ul style="list-style-type: none"> <li>i. Subject matter developments;</li> <li>ii. Research, industrial and professional developments; and</li> <li>iii. Developments in teaching and learning, including learning resources.</li> </ul>	<ul style="list-style-type: none"> <li>(a) Business case demonstrates that the necessary skills, knowledge and resource to deliver an up-to-date programme exist or will be funded.</li> <li>(b) Evidence that programme has been developed with external reference points and/or expertise.</li> <li>(c) Proposed programme content is credible and independently verified.</li> </ul>	<ul style="list-style-type: none"> <li>(a) CME action plan regularly highlights plans to update programme content.</li> <li>(b) External Examiner / Quality Advisor reports confirm that programme content aligns to the definition.</li> <li>(c) Evidence of regular module updating.</li> </ul>	<p>Evidence from monitoring activity demonstrates regular updating of the programme.</p> <p>Self-assessment of alignment with relevant external reference points.</p> <p>Proxy measure: progression.</p>
<b>[R2] Provides educational challenge</b>	<p>The programme achieves no less than the minimum level of rigour and difficulty reasonably expected in the context of the subject matter and level of the course.</p>	<ul style="list-style-type: none"> <li>(a) Evidence that programme has been developed with external reference points and/or expertise.</li> <li>(b) Programme and module learning outcomes have been clearly articulated with reference to the FHEQ.</li> </ul>	<ul style="list-style-type: none"> <li>(a) Student achievement rates show a reasonable distribution of grades.</li> <li>(b) External Examiner / Quality Advisor reports confirm that programme content aligns to the definition.</li> </ul>	<p>Student outcomes for the subject (e.g. degree classifications) are broadly in line with those nationally.</p> <p>Proxy measure: HESA qualifications data.</p>

The provider must ensure that the students registered on each higher education course receive a high-quality academic experience. A high-quality academic experience includes but is not limited to ensuring that each course:				
Requirement	Definition	Initial tests	Monitoring	Compliance tests
		(c) Assessment criteria for specimen assessment tasks align appropriately to the University generic marking criteria.		
<b>[R3] Is coherent</b>	The programme team ensures that: <ul style="list-style-type: none"> <li>i. There is an appropriate balance between breadth and depth of content;</li> <li>ii. Subjects and skills are taught in an appropriate order and, where necessary, build on each other throughout the course; and</li> <li>iii. Key concepts are introduced at the appropriate point in the course content.</li> </ul>	<ul style="list-style-type: none"> <li>(a) The curriculum intent is clearly articulated.</li> <li>(b) The proposed module diets at each level demonstrate appropriate curriculum sequencing.</li> </ul>	<ul style="list-style-type: none"> <li>(a) CME action plan evidences consideration of sequencing updates in response to student feedback and/or outcomes.</li> <li>(b) External Examiner / Quality Advisor reports confirm that programme content aligns to the definition.</li> <li>(c) Evidence from Board of Study that updates to module content have been considered in the context of the whole programme.</li> </ul>	<p>Evidence from monitoring activity demonstrates that the programme remains coherent.</p> <p>Proxy measures: continuation and completion.</p>
<b>[R4] Is effectively delivered</b>	The manner in which the programme is taught, supervised and assessed ensures:	(a) Business case demonstrates that sufficient staffing exists or will be funded to ensure appropriate	(a) CME action plan evidences consideration of delivery methods and the balance of those in response to student	Evidence from monitoring activity demonstrates that the programme is being effectively delivered.

The provider must ensure that the students registered on each higher education course receive a high-quality academic experience. A high-quality academic experience includes but is not limited to ensuring that each course:				
Requirement	Definition	Initial tests	Monitoring	Compliance tests
	<ul style="list-style-type: none"> <li>i. An appropriate balance between delivery methods, for example lectures, seminars, group work or practical study, as relevant to the content of the programme; and</li> <li>ii. An appropriate balance between direct and independent study or research, as relevant to the level of the programme.</li> </ul>	<ul style="list-style-type: none"> <li>(a) delivery of the programme.</li> <li>(b) Methods of delivery and their proportions at each level have been clearly articulated and justified.</li> <li>(c) Evidence that the programme development team have referenced appropriate pedagogical thinking and or research to design the delivery of the programme.</li> </ul>	<ul style="list-style-type: none"> <li>(a) feedback and/or outcomes.</li> <li>(b) Student engagement data demonstrates that attendance/interaction with learning and teaching activities is positive.</li> <li>(c) Evidence from Student Voice Meetings / MEQs indicates high level of student satisfaction with how the programme is organised and delivered.</li> </ul>	<p>Proxy measures: continuation and completion.</p>
<b>[R5] As appropriate to the subject matter of the course, requires students to develop relevant skills</b>	<p>The programme team ensures that students develop:</p> <ul style="list-style-type: none"> <li>i. Knowledge and understanding relevant to the subject matter and level; and</li> <li>ii. Other skills relevant to the subject matter and level including cognitive skills, practical skills, transferable skills and</li> </ul>	<ul style="list-style-type: none"> <li>(a) Business case demonstrates employer demand for the graduate attributes that the programme is intended to develop.</li> <li>(b) Evidence of engagement with employers (or similar) in the design of the programme.</li> <li>(c) Evidence that programme has been developed with external</li> </ul>	<ul style="list-style-type: none"> <li>(a) CME action plan evidences consideration of knowledge and skills development within the context of the subject and more broadly.</li> <li>(b) External Examiner / Quality Advisor reports confirm that programme content aligns to the definition.</li> </ul>	<p>Evidence from monitoring activity demonstrates that the programme continues to require students to develop relevant knowledge and skills.</p> <p>Proxy measures: career readiness survey, continuation and completion.</p>

The provider must ensure that the students registered on each higher education course receive a high-quality academic experience. A high-quality academic experience includes but is not limited to ensuring that each course:

Requirement	Definition	Initial tests	Monitoring	Compliance tests
	professional competences.	reference points and/or expertise.		



**Table 2: Condition of Registration B2 (Resources, support and student engagement)**

The provider must take all reasonable steps to ensure that:				
<p>a. each cohort of students received resources and support which are sufficient for the purposes of ensuring (i) a high quality academic experience for those students and (ii) those students succeed in and beyond higher education); and</p> <p>b. effective engagement with each cohort of students which is sufficient for the purposes of ensuring (i) a high quality academic experience for those students and (ii) those students succeed in and beyond higher education.</p>				
Requirement	Definitions	Initial tests	Monitoring	Compliance tests
<b>[R6] There are sufficient staff resources</b>	The programme team responsible for designing and delivering a programme are sufficient in number, appropriately qualified and deployed effectively.	<p>(a) Business case demonstrates the availability of an adequate number of appropriately qualified staff or will be funded.</p> <p>(b) CVs for programme team members evidence appropriate teaching qualifications/training and/or teaching experience.</p> <p>(c) Department plans for workload allocation.</p> <p>(d) Department plans for continuous professional development of programme team.</p>	(a) Evidence from Student Voice Meetings / MEQs indicates high level of student satisfaction with how the programme is organised, delivered and the availability/ suitability of resources.	<p>Evidence from monitoring activity demonstrates that the programme continues to be adequately staffed</p> <p>The department has completed valid workload returns.</p> <p>HR / department evidence of recorded CPD activity in relation to members of the programme team.</p> <p>Proxy measures: timetable data, complaints/appeals (related to cancellation of sessions), continuation and completion.</p>
<b>[R7] There are sufficient physical and digital learning resources</b>	The physical and digital resources available to support delivery of the programme are adequate	(a) Business case demonstrates that adequate physical and digital resources to	(a) CME action plan evidences consideration of the adequacy of resources to support	Evidence from monitoring activity demonstrates that the there continues to be appropriate physical and

The provider must take all reasonable steps to ensure that:				
<p>a. each cohort of students received resources and support which are sufficient for the purposes of ensuring (i) a high quality academic experience for those students and (ii) those students succeed in and beyond higher education); and</p> <p>b. effective engagement with each cohort of students which is sufficient for the purposes of ensuring (i) a high quality academic experience for those students and (ii) those students succeed in and beyond higher education.</p>				
Requirement	Definitions	Initial tests	Monitoring	Compliance tests
	and deployed effectively to meet the needs of each cohort of students.	support the delivery of the programme exist or will be funded.	<p>delivery of the programme.</p> <p>(b) Evidence from Student Voice Meetings / MEQs indicates high level of student satisfaction with how the programme is organised, delivered and the availability/suitability of resources.</p>	<p>digital learning resources in place.</p> <p>Proxy measures: complaints/appeals (related to resources), continuation and completion.</p>
<b>[R8] There is sufficient academic support relating to the content of the programme</b>	The level and type of academic support required is determined with reference to the particular academic needs of each cohort of students based on prior academic attainment and capability.	<p>(a) The programme development team have a robust plan for evaluating the academic needs of each cohort and adapting the availability and type of support available in response.</p> <p>(b) The programme development team have a robust plan for monitoring levels of</p>	<p>(a) CME action plans evidence adaptations, amendments or additions in academic support to meet the needs of each cohort of students.</p> <p>(b) Boards of Study receive regular assurances that levels of student engagement and attainment are being monitored.</p>	<p>Evidence from monitoring activity demonstrates that the there continues to be appropriate academic support in place.</p> <p>Proxy measures: complaints/appeals (related to academic support), continuation and completion.</p>

The provider must take all reasonable steps to ensure that:				
<ul style="list-style-type: none"> <li>a. each cohort of students received resources and support which are sufficient for the purposes of ensuring (i) a high quality academic experience for those students and (ii) those students succeed in and beyond higher education); and</li> <li>b. effective engagement with each cohort of students which is sufficient for the purposes of ensuring (i) a high quality academic experience for those students and (ii) those students succeed in and beyond higher education.</li> </ul>				
Requirement	Definitions	Initial tests	Monitoring	Compliance tests
		student engagement and attainment to ensure that academic support is sufficient.	(c) Evidence from Student Voice Meetings, MEQs and student surveys that students feel adequately supported.	
<b>[R9] There is sufficient support to underpin successful physical and digital learning and teaching</b>	The infrastructure to support physical and digital teaching is appropriate to the needs of each cohort.	(a) The programme development team have identified underpinning support that may be required and have liaised with relevant central services to determine capacity and availability.	(a) CME action plans evidence adaptations, amendments or additions required to support the needs of each cohort of students. (b) Evidence from Student Voice Meetings, MEQs and student surveys that students feel adequately supported.	Evidence from monitoring activity demonstrates that the there continues to be appropriate academic support in place.  Proxy measures: complaints/appeals (related to academic support), continuation and completion.
<b>[R10] There is sufficient support relating to understanding, avoiding and reporting academic misconduct</b>	The level of training given to students in relation to academic integrity is based on the prior academic attainment and capability of each cohort	(a) The programme team have a robust plan for training students to understand and avoid breaches of the Academic Integrity Policy.	(a) CME action plans evidence consideration of support students to maintain academic integrity. (b) The number and type of allegations of breaches of academic integrity are	Evidence from monitoring activity demonstrates that the there continues to be appropriate academic support in place.

The provider must take all reasonable steps to ensure that:				
<ul style="list-style-type: none"> <li>a. each cohort of students received resources and support which are sufficient for the purposes of ensuring (i) a high quality academic experience for those students and (ii) those students succeed in and beyond higher education); and</li> <li>b. effective engagement with each cohort of students which is sufficient for the purposes of ensuring (i) a high quality academic experience for those students and (ii) those students succeed in and beyond higher education.</li> </ul>				
Requirement	Definitions	Initial tests	Monitoring	Compliance tests
		<ul style="list-style-type: none"> <li>(b) The programme development team have articulated an assessment design that minimises the opportunities for academic misconduct.</li> <li>(c) There is a track-record in the relevant subject area of identifying and appropriately dealing with instances of breaches of Academic Integrity.</li> </ul>	<p>considered and strategies are put in place to mitigate these.</p>	<p>Proxy measures: academic integrity data, continuation and completion.</p>
<b>[R11] There is sufficient careers support</b>	<p>Students have access to careers information, advice and guidance that is relevant and appropriately located in the context of the programme.</p>	<ul style="list-style-type: none"> <li>(a) The programme development team have identified the types of career and further study that graduates from the programme are likely to pursue.</li> <li>(b) Modules clearly articulate the knowledge, practical and</li> </ul>	<ul style="list-style-type: none"> <li>(a) CME action plans evidence consideration of the support that students need to develop their career readiness and employability.</li> <li>(b) Evidence from Student Voice Meetings, MEQs and student surveys that</li> </ul>	<p>Evidence from monitoring activity demonstrates that there continues to be adequate careers support in place.</p> <p>Proxy measures: careers readiness survey and progression.</p>

The provider must take all reasonable steps to ensure that:				
<ul style="list-style-type: none"> <li>a. each cohort of students received resources and support which are sufficient for the purposes of ensuring (i) a high quality academic experience for those students and (ii) those students succeed in and beyond higher education); and</li> <li>b. effective engagement with each cohort of students which is sufficient for the purposes of ensuring (i) a high quality academic experience for those students and (ii) those students succeed in and beyond higher education.</li> </ul>				
Requirement	Definitions	Initial tests	Monitoring	Compliance tests
		<p>transferable skills that students will develop.</p> <p>(c) The programme team has a robust plan for early identification of new knowledge and skills that might be beneficial for graduates to develop.</p>	<p>students feel adequately supported.</p>	
<p><b>[R12] There are sufficient opportunities for students to contribute to the development of their academic experience</b></p>	<p>Students are able to contribute to the development of their academic experience and their programme in a way that maintains academic rigour.</p>	<p>(a) There is evidence that the development of the programme has involved student input.</p> <p>(b) The programme team has a robust plan for articulating how students may contribute to the development of the programme over time.</p> <p>(c) The programme team has a robust plan for encouraging student</p>	<p>(a) CME action plans evidence how student feedback has been gathered and acted upon.</p> <p>(b) The Board of Study regularly receives reports of how students have been engaged and their feedback acted upon.</p> <p>(c) Evidence from Student Voice Meetings, MEQs and student surveys that students feel listened to.</p>	<p>Evidence from monitoring activity demonstrates that there continue to be opportunities for students to participate in the development of the programme.</p> <p>Self-assessment of the effectiveness of student engagement mechanisms.</p> <p>Proxy measures: NSS data and completion.</p>

The provider must take all reasonable steps to ensure that:

- a. each cohort of students received resources and support which are sufficient for the purposes of ensuring (i) a high quality academic experience for those students and (ii) those students succeed in and beyond higher education); and
- b. effective engagement with each cohort of students which is sufficient for the purposes of ensuring (i) a high quality academic experience for those students and (ii) those students succeed in and beyond higher education.

Requirement	Definitions	Initial tests	Monitoring	Compliance tests
		feedback and closing the feedback loop.	(d) External Examiner / Quality Advisor reports confirms that the student voice is adequately listened to and appropriately addressed.	

**Table 3: Condition of Registration B3 (Student outcomes)**

The provider must deliver positive outcomes for students.				
Requirement	Definitions	Initial tests	Monitoring	Compliance tests
<b>[R13] The proportion of students continuing on a programme is above the numerical threshold</b>	A student will be recorded as having positively continued if they remain registered on a programme 12 months and 15 days after they first commenced study.	The historical continuation performance of a subject area will be taken into account during scrutiny of the business case and to determine the level of scrutiny of the proposed programme.	<ul style="list-style-type: none"> <li>(a) Student engagement data demonstrates that attendance/interaction with learning and teaching activities is positive.</li> <li>(b) Evidence of routine consideration of student progress periodically through the year.</li> <li>(c) Rates of assessment submission are tracked and followed-up.</li> </ul>	<p>Annual programme summary data at programme and subject (CAH3) level demonstrates performance above the University's threshold.</p> <p>The aggregate performance of the programme (including split indicators) over a time series is assessed at the periodic evaluation point.</p> <p>Proxy measure: continuation</p>
<b>[R14] The proportion of students completing a programme is above the numerical threshold</b>	A student will be recorded as having positively completed if they have achieved their intended qualification four years and 15 days (FT) or six years and 15 days (PT) after they first commenced study.	The historical completion performance of a subject area will be taken into account during scrutiny of the business case and to determine the level of scrutiny of the proposed programme.	<ul style="list-style-type: none"> <li>(a) Proportion of students passing assessment at the first attempt meets or exceeds a benchmark set by the University.</li> <li>(b) Student engagement data demonstrates that attendance/interaction with learning and teaching activity is positive.</li> <li>(c) Evidence of routine consideration of student</li> </ul>	<p>Annual programme summary data at programme and subject (CAH3) level demonstrates performance above the University's threshold.</p> <p>The aggregate performance of the programme (including split indicators) over a time series is assessed at the periodic evaluation point.</p>

The provider must deliver positive outcomes for students.				
Requirement	Definitions	Initial tests	Monitoring	Compliance tests
			<p>progress periodically through the year.</p> <p>(d) Rates of assessment submission are tracked and followed-up.</p>	
<p><b>[R15] The proportion of students progressing to managerial or professional employment or further study is above the numerical threshold</b></p>	<p>A student will be recorded as having positively progressed if they report being in a qualifying employment or further study category in the Graduate Outcomes survey approximately 15 months after graduation.</p>	<p>(a) The historical completion performance of a subject area will be taken into account during scrutiny of the business case and to determine the level of scrutiny of the proposed programme.</p> <p>(b) Business case demonstrates employer demand for the graduate attributes that the programme is intended to develop.</p> <p>(c) Evidence of engagement with employers (or similar) in the design of the programme.</p>	<p>(a) Proportion of students reporting an appropriate level of preparedness in the careers readiness survey meets or exceeds a benchmark set by the University.</p> <p>(b) CME action plans evidence consideration of the support that students need to develop their career readiness and employability.</p> <p>(c) Evidence from Student Voice Meetings, MEQs and student surveys that students feel adequately supported.</p>	<p>Annual programme summary data at programme and subject (CAH3) level demonstrates performance above the University's threshold.</p> <p>The aggregate performance of the programme (including split indicators) over a time series is assessed at the periodic evaluation point.</p>



**Table 4: Condition of Registration B4 (Assessment and awards)**

The provider must ensure that:				
Requirement	Definitions	Initial tests	Monitoring	Compliance tests
<b>[R16] Students are assessed effectively</b>	<p>Assessment is challenging and appropriately comprehensive by reference to the subject matter of the programme and includes but is not limited to:</p> <ul style="list-style-type: none"> <li>i. Providing stretch and rigour consistent with the level of the course;</li> <li>ii. Testing relevant skills; and</li> <li>iii. Assessments being designed in a way that minimises the opportunities for academic misconduct and facilitates the detection of such misconduct where it does occur.</li> </ul>	<ul style="list-style-type: none"> <li>(a) Evidence that programme has been developed with external reference points and/or expertise.</li> <li>(b) Programme and module learning outcomes have been clearly articulated with reference to the FHEQ.</li> <li>(c) The programme development team have articulated an assessment design strategy that minimises the opportunities for academic misconduct.</li> <li>(d) There is a track-record in the relevant subject area of identifying and appropriately dealing with instances of breaches of Academic Integrity.</li> </ul>	<ul style="list-style-type: none"> <li>(a) Student achievement rates show a reasonable distribution of grades.</li> <li>(b) CME action plans evidence consideration of the overall assessment strategy for the programme.</li> <li>(c) The number and type of allegations of breaches of academic integrity are considered and strategies are put in place to mitigate these.</li> <li>(d) Evidence that Boards of Study have considered proposals to modify assessments with reference to their potential impact on the validity, reliability and credibility of the assessment and the overall award.</li> <li>(e) External Examiner / Quality Advisor reports confirm that programme</li> </ul>	<p>Evidence from monitoring activity demonstrates that assessment continues to be effective.</p> <p>Updated assessment design strategy.</p> <p>Proxy measures: distribution of grades over a time series at the periodic evaluation point and HESA qualifications data.</p>

The provider must ensure that:				
Requirement	Definitions	Initial tests	Monitoring	Compliance tests
			assessments align to the definition.	
<b>[R17] Each assessment is valid and reliable</b>	In practice, the assessment takes place in a way that: <ul style="list-style-type: none"> <li>i. results in students demonstrating knowledge and skills in the way intended by design of the assessment; and</li> <li>ii. requires students to demonstrate knowledge and skills in a manner which is consistent between the students registered on the programme and over time, as appropriate in the context of developments in content and delivery of the programme.</li> </ul>	(a) Assessment criteria for specimen assessment tasks align appropriately to the University generic marking criteria.	<ul style="list-style-type: none"> <li>(a) Evidence of appropriate marking calibration/standardisation and/or marking moderation having taken place.</li> <li>(b) Assignment briefs and marking criteria clearly articulate what is required of students and demonstrate that each assessment is sufficiently robust.</li> <li>(c) CME action plans evidence consideration of updating of assessments over time.</li> <li>(d) Evidence that Boards of Study have considered proposals to modify assessments with reference to their potential impact on the validity, reliability and credibility of the assessment and the overall award.</li> </ul>	<p>Evidence from monitoring activity demonstrates that assessment continues to be valid and reliable.</p> <p>Proxy measures: distribution of grades over a time series at the periodic evaluation point and HESA qualifications data.</p>

The provider must ensure that:				
Requirement	Definitions	Initial tests	Monitoring	Compliance tests
			(e) External Examiner / Quality Advisor reports confirm that assessment outcomes demonstrate adherence to the definition.	
<b>[R18] Academic regulations are designed to ensure that relevant awards are credible</b>	<p>All research, taught and credit bearing awards (including modules that form part of a programme) reflect students' knowledge and skills taking into account:</p> <ul style="list-style-type: none"> <li>i. The number of awards granted and the classifications attached to them and the way in which this number and/or the classifications change over time and compare with other providers;</li> <li>ii. Whether students are assessed effectively and whether assessments are valid and reliable;</li> <li>iii. Any actions the provider has taken that would</li> </ul>	<ul style="list-style-type: none"> <li>(a) Programme and department assessment strategies are judged to be credible at the point of approval.</li> <li>(b) Periodic verification that the University's generic marking criteria aligns with the sector recognised qualification and degree classification descriptors.</li> <li>(c) Periodic verification of the University's degree classification algorithms.</li> <li>(d) Proposed changes to assessment regulations are accompanied by an appropriate impact assessment.</li> </ul>	(a) Annual programme summary data is aggregated to show overall student outcomes at institutional level.	<p>The Degree Outcomes Statement is updated periodically and approved by University Council.</p> <p>Proxy measures: distribution of grades over a time series at the periodic evaluation point and HESA qualifications data.</p>

The provider must ensure that:				
Requirement	Definitions	Initial tests	Monitoring	Compliance tests
	<p>result in an increased number of relevant wards, and/or changes in the classifications attached to them, whether or not the achievement of students has increased, for example, changes to assessment practices or academic regulations; and</p> <p>iv. The provider's explanation and evidence in support of the reasons for any changes in the classifications over time or differences with other providers.</p>			
<b>[R19] Academic regulations are designed to ensure the effective assessment of technical proficiency in the English language in a manner which appropriately reflects the</b>	Where written assessments are conducted in English, there is effective assessment of technical proficiency in the language.	(a) Assessment criteria for specimen assessment tasks align appropriately to the University generic marking criteria, including those testing technical proficiency in the English language.	(a) Evidence of appropriate marking calibration/standardisation and/or marking moderation having taken place. (b) Assignment briefs and marking criteria clearly	Evidence from monitoring activity demonstrates that assessment continues to be aligned to the University generic marking criteria including those testing technical proficiency in the English language.

The provider must ensure that:				
Requirement	Definitions	Initial tests	Monitoring	Compliance tests
<b>level and content of the applicable programme</b>			<p>articulate what is required of students in relation to English language proficiency.</p> <p>(c) External Examiner / Quality Advisor reports confirm that assessment outcomes demonstrate adherence to the definition.</p>	<p>Proxy measures: distribution of grades over a time series at the periodic evaluation point and HESA qualifications data.</p>
<b>[R20] Relevant awards granted to students are credible at the point of being granted and when compared to those granted previously</b>	<p>All research, taught and credit bearing awards (including modules that form part of a programme) reflect students' knowledge and skills</p>	<p>(a) Evidence that programme has been developed with external reference points and/or expertise.</p> <p>(b) Programme and module learning outcomes have been clearly articulated with reference to the FHEQ.</p> <p>(c) Assessment criteria for specimen assessment tasks align appropriately to the University generic marking criteria.</p>	<p>(a) Evidence of appropriate marking calibration/standardisation and/or marking moderation having taken place.</p> <p>(b) Assignment briefs and marking criteria clearly articulate what is required of students and demonstrate that each assessment is sufficiently robust.</p> <p>(c) Evidence that Boards of Study have considered proposals to modify assessments with reference to their</p>	<p>Evidence from monitoring activity demonstrates that assessment continues to be valid and reliable.</p> <p>Proxy measures: distribution of grades over a time series at the periodic evaluation point and HESA qualifications data.</p>

The provider must ensure that:				
Requirement	Definitions	Initial tests	Monitoring	Compliance tests
			<p>potential impact on the validity, reliability and credibility of the assessment and the overall award.</p> <p>(d) External Examiner / Quality Advisor reports confirm that assessment outcomes demonstrate adherence to the definition.</p>	

**Table 5: Condition of Registration B5 (Sector recognised standards)**

The provider must ensure that, in respect of any relevant awards granted to students who complete a higher education course provided by, or on behalf of, the provider:				
Requirement	Definitions	Initial tests	Monitoring	Compliance tests
<b>[R21] Any standards set appropriately reflect any applicable sector-recognised standards</b>	The University's regulations recognise and adhere to the requirements of the sector-recognised standards, as published by the OfS. These are derived from: <ol style="list-style-type: none"> <li>i. The Regulated Qualifications Framework</li> <li>ii. The Framework for Higher Education Qualifications</li> <li>iii. The Qualification Descriptors</li> <li>iv. The Classification Descriptors</li> </ol>	(a) At the point of approval, programmes are judged to comply with the sector-recognised standards.  (b) The University's generical marking criteria appropriately aligns with the relevant classification descriptors.	(a) Evidence for Boards of Study indicates that proposals for programme and module updates have been approved only where continued adherence to sector-recognised standards has been assured.	Review at the periodic evaluation point demonstrates that programmes continue to adhere to sector-recognised standards.  The University's generic marking criteria is reviewed periodically to ensure it continued alignment to sector-recognised standards.
<b>[R22] Awards are only granted to students whose knowledge and skills appropriately reflect any applicable sector-recognised standards</b>				

**Table 6: Education and Skills (Quality of Education)**

This aspect relates to:		
<ol style="list-style-type: none"> <li>1. The knowledge, skills and behaviours that learners need to acquire to fulfil their aspirations for learning, employment and independence.</li> <li>2. The way teachers teach and assess to support learners to build their knowledge and to apply that knowledge as skills.</li> <li>3. The outcomes that learners achieve as a result of the education they have received.</li> </ol>		
Factor	Link to tables 1 – 5	Additional monitoring and compliance
The curriculum develops the knowledge, skills and behaviours that learners need in order to take advantage of the opportunities, responsibilities and experiences that prepare them for their next stage in education, training or employment.	[R1], [R2], [R3], [R4], [R5]	The knowledge, skills and behaviours derived from the relevant occupational standard have been mapped onto the programme. Any amendments to programme content have been re-mapped to the occupational standard. Module documentation clearly articulates which of the knowledge, skills and behaviours content relates to and places this in the context of the programme as a whole.
It is clear what the curriculum is preparing learners for. It is also clear what learners need to be able to know and do at the end of their learning or training programmes.	[R3], [R5]	Programme learning outcomes show a clear link to the knowledge, skills and behaviours derived from the relevant occupational standard. Module documentation clearly articulates which of the knowledge, skills and behaviours content relates to and the extent to which these are transferable beyond the subject matter of the programme.
The curriculum is planned and sequenced so that learners can build on previous teaching and learning and develop the new knowledge and skills they need.	[R3], [R8], [R9], [R16]	The programme team has a robust strategy for assessing what learners already know and can do to ensure appropriate rigour and stretch throughout the curriculum. Module documentation clearly articulates linkages to previous assessments and explains how the knowledge, skills and behaviours developed and assessed in previous modules can be used effectively.
The curriculum offers learners the knowledge and skills that reflect the needs of the local and regional context.	[R1], [R5], [R12]	The programme team regularly engages with employers and learners as the programme is being developed and updated.
The curriculum takes into account the needs of learners, employers and	[R1], [R5], [R12], [R15]	The programme team regularly engages with employers and learners as the programme is being developed and updated.



This aspect relates to:		
<ol style="list-style-type: none"> <li>1. The knowledge, skills and behaviours that learners need to acquire to fulfil their aspirations for learning, employment and independence.</li> <li>2. The way teachers teach and assess to support learners to build their knowledge and to apply that knowledge as skills.</li> <li>3. The outcomes that learners achieve as a result of the education they have received.</li> </ol>		
Factor	Link to tables 1 – 5	Additional monitoring and compliance
the local, regional and national economy as necessary.		
The curriculum ensures that all learners benefit from high academic, technical and vocational ambitions. This means that the curriculum should be ambitious for disadvantaged learners or those with SEND, including those who have high needs and should meet those needs.	[R2], [R4], [R5]	No additional monitoring and compliance required.
Teachers have expert knowledge of the subjects that they teach. If they do not, they are supported to address gaps so that learners are not disadvantaged by ineffective teaching.	[R6]	There is evidence of the programme team having undertaken relevant CPD activities to ensure that their subject knowledge is current.
Teachers enable learners to understand key concepts, presenting information clearly and promoting discussion.	[R8]	There is evidence that the programme team having undertaken peer observations in accordance with the published policy.
Teachers check learners' understanding effectively, and identify and correct misunderstandings.	[R8]	There is evidence that the programme team have discussed and effectively implement approaches to feedback that are designed to support the understanding of learners. Learner work is effectively archived and maintained as part of an e-portfolio.

This aspect relates to:		
<ol style="list-style-type: none"> <li>1. The knowledge, skills and behaviours that learners need to acquire to fulfil their aspirations for learning, employment and independence.</li> <li>2. The way teachers teach and assess to support learners to build their knowledge and to apply that knowledge as skills.</li> <li>3. The outcomes that learners achieve as a result of the education they have received.</li> </ol>		
Factor	Link to tables 1 – 5	Additional monitoring and compliance
Teachers ensure that learners embed key concepts in their long-term memory and apply them fluently and consistently.	[R8], [R9], [R10], [R16], [R17]	<p>There is evidence that the programme team having undertaken peer observations in accordance with the published policy.</p> <p>The assessment strategy for the programme demonstrates how knowledge, skills and behaviours are reinforced at appropriate points throughout the programme.</p> <p>There is a clear articulation, in each module, about how the content and assessment supports learners to successfully complete EPA.</p>
Teachers have designed and they deliver the subject curriculum in a way that allows learners to transfer key knowledge to long-term memory. The curriculum is sequenced so that new knowledge and skills build on what learners know and can do and learners can work towards defined end point.	[R3], [R5], [R8], [R9], [R16]	<p>The programme team takes account of what learners already know and can do (through analysis of assessment outcomes) and use this information to ensure appropriate rigour and stretch throughout the curriculum.</p> <p>Module documentation clearly articulates linkages to previous assessments and explains how the knowledge, skills and behaviours developed and assessed in previous modules can be used effectively.</p>
Teachers use assessment to check learners' understanding in order to inform teaching.	[R16], [R17]	There is evidence that the programme team has reviewed assessment outcomes to inform their approach to delivery of the following aspects of the curriculum; usually seen through the CME action plan, but may also be apparent from proposals to modify module content.
Teachers use assessment to help learners to embed and use knowledge fluently, to develop their understanding, and to gain, extend and improve their skills and not simply memorise disconnected facts.	[R16], [R17]	There is evidence that the programme team has reviewed assessment outcomes to inform their approach to delivery of the following aspects of the curriculum; usually seen through the CME action plan, but may also be apparent from proposals to modify module content. Module documentation clearly articulates linkages to previous assessments and explains how the knowledge, skills and behaviours developed and assessed in previous modules can be used effectively.

<p>This aspect relates to:</p> <ol style="list-style-type: none"> <li>1. The knowledge, skills and behaviours that learners need to acquire to fulfil their aspirations for learning, employment and independence.</li> <li>2. The way teachers teach and assess to support learners to build their knowledge and to apply that knowledge as skills.</li> <li>3. The outcomes that learners achieve as a result of the education they have received.</li> </ol>		
Factor	Link to tables 1 – 5	Additional monitoring and compliance
		<p>The assessment strategy for the programme demonstrates how knowledge, skills and behaviours are reinforced at appropriate points throughout the programme.</p> <p>There is a clear articulation, in each module, about how the content and assessment supports learners to successfully complete EPA.</p>
A well-constructed, well-taught curriculum will lead to learners learning more and so achieving good results.	[R1], [R2], [R3], [R4], [R5], [R8], [R9], [R10], [R16], [R17]	No additional monitoring and compliance required.
Disadvantaged learners and learners with SEND acquire the knowledge and skills they need to succeed in life.	[R7], [R8], [R9]	The programme team recognises learners who require an inclusion plan and proactively take steps to ensure that they are supported to succeed.
End-point assessments and examinations are useful indicators of learners' outcomes, but they only represent a sample of what learners have learned. Inspectors will balance this with their first-hand assessment of learners' work.	[R2], [R4], [R5], [R17]	There is evidence that module content information and feedback on assessed work supports students to prepare for end-point assessment.
All learning builds towards an end point. Learners are being prepared for their next stage of education, training or employment at each stage of their learning. Inspectors	[R4], [R11], [R13], [R14]	No additional monitoring and compliance required.

<p>This aspect relates to:</p> <ol style="list-style-type: none"> <li>1. The knowledge, skills and behaviours that learners need to acquire to fulfil their aspirations for learning, employment and independence.</li> <li>2. The way teachers teach and assess to support learners to build their knowledge and to apply that knowledge as skills.</li> <li>3. The outcomes that learners achieve as a result of the education they have received.</li> </ol>		
Factor	Link to tables 1 – 5	Additional monitoring and compliance
will consider whether learners are ready for their next steps.		
Inspectors will also consider whether learners are ready for the next stage and are going to appropriate, high-quality destinations.	[R13], [R14], [R15]	No additional monitoring and compliance required.

**Table 7: Education and Skills (Behaviours and attitudes)**

This aspect relates to how the University, leaders and staff, create a safe, disciplined and positive environment within the provider and the impact this has on the behaviour and attitudes of leaders.		
Factor	Statement of expectation	Indicators and monitoring
There is a calm and orderly environment in the provider, classroom, workshop and workplace, as this is essential for learners to be able to learn.	Learning and teaching activities are conducted in an appropriately professional environment where there is clearly mutual respect between learners and staff members.	Feedback from learners in Student Voice meetings, MEQs, student surveys etc. Observations of teaching sessions. Existence or lack of complaints, appeals and/or reports to the Proctor in relation to student discipline.
There are clear expectations for behaviour across all aspects of provider life, including at work.	Learners conduct themselves appropriately and in accordance with the policies, codes of conduct and expectations of the University.	Observations of teaching sessions. Existence or lack of complaints, appeals and/or reports to the Proctor in relation to student discipline.
There is a strong focus on attendance at and punctuality to learning and work settings to minimise disruption, and so that learners gain valuable employability skills.	The programme team regularly review learner engagement, both within the context of tripartite reviews and the general expectations for monitoring [cf. R13 and R14].	There is evidence that the programme team monitor the engagement of learners and follow up concerns.
Learner motivation and positive attitudes to learning are important predictors of attainment.		
There is a positive and respectful provider culture in which staff know and care about learners.		
There is an environment in which learners feel safe because staff and learners do not accept bullying, harassment or discrimination or peer-on-peer abuse – online or offline. Staff deal with any issues quickly, consistently and effectively.	The programme team ensures that learners are aware of the expectations to maintain a safe learning environment. They ensure that learners are aware of the policies and procedures, in particular in relation to safeguarding, and know how to report concerns.	There is evidence that information about safeguarding and reporting concerns is made available and regularly updated.

**Table 8: Education and Skills (Personal development)**

This aspect relates to how the curriculum supports learners to develop their knowledge and skills beyond the purely academic, technical or vocational. In this regard, the quality and intent of personal development opportunities are the key focus. As such, learners have the opportunity to:		
Factor	Statement of expectation	Indicators and monitoring
Develop as responsible, respectful and active citizens who are able to play their part and know how to become involved in public life.	The programme team positions the content and delivery of the programme to complement with the University's Citizen Student Strategy.	<p>The effectiveness of personal development support will be monitored in various ways and at various stages of the Lifecycle of each programme.</p> <ul style="list-style-type: none"> <li>i. The intent of personal development planning in the curriculum will form a part of the programme approval process.</li> <li>ii. Feedback from learners through MEQs, Student Voice Meetings, surveys etc. will be used to gain insights into how personal development opportunities are experienced in practice.</li> <li>iii. Evidence of appropriate consideration/reflection by support service areas, especially in relation to how support for personal development is promoted.</li> </ul>
Develop and deepen their understanding of the fundamental British values of democracy, individual liberty, the rule of law and mutual respect and tolerance.	<p>The programme team has considered how the foundational values of the University are reflected in the programme and are articulated either through the delivery of subject content or by making participatory opportunities available to all students. These values incorporate consideration and the practical application of:</p> <ul style="list-style-type: none"> <li>i. The dignity and worth of every individual;</li> <li>ii. The role of education in the service of society; and</li> <li>iii. The pursuit of truth and freedom of enquiry.</li> </ul>	
Benefit from the promotion of equality of opportunity so that all learners can thrive together, understanding that difference is a positive, not a negative, and that individual characteristics make people unique.		
Benefit from an inclusive environment that meets the needs of all learners, irrespective of age, disability, gender reassignment, race, religion, sex or sexual orientation, relationship status or pregnancy.	<p>The topics, themes and concepts related to each of the three values are routinely outlined to learners.</p>	
Develop their positive personal traits, dispositions and virtues that informs their motivation and guides their conduct so that they reflect wisely, learn eagerly, behave with integrity and cooperate consistently well with others.		
Develop their confidence, resilience and knowledge so that they can keep themselves mentally healthy.	Learners are educationally stretched and challenged in a supportive environment and are appropriately signposted to support available to them to maintain positive mental health [cf. R2 and R8].	

This aspect relates to how the curriculum supports learners to develop their knowledge and skills beyond the purely academic, technical or vocational. In this regard, the quality and intent of personal development opportunities are the key focus. As such, learners have the opportunity to:		
Factor	Statement of expectation	Indicators and monitoring
Develop their understanding of how to keep physically healthy and maintain an active lifestyle.	The importance of physical health is either implicitly or explicitly considered where relevant to the subject matter. The University and the CSU appropriately promote opportunities for learners to remain physically active.	
Benefit from an effective careers programme that offers advice, experience and contact with employers to encourage learners to aspire, make good choices and understand what they need to do in order to reach and succeed in their chosen career.	The knowledge, skills and behaviours that learners develop are appropriate situated in the context of further employment. The development of transferable skills is clear and highlighted. The programme team works with the Careers & Employability service to support learners to achieve their career goals [cf. R11 and R15].	
Develop their readiness for the next phase of education, training or employment so that they can make the transition to the next stage successfully.		

**Table 9: Education and Skills (Leadership and management)**

This aspect relates to the ways in which leaders, managers and those responsible for governance ensure that the education and training delivered by the University has a positive impact on all learners.		
Factor	Link to tables 1 – 5	Additional monitoring and compliance
There are high expectations of all learners and these are embodied in day-to-day interactions with an support for learners.	[R2], [R4], [R8], [R12], [R13], [R14], [R15]	There is evidence that Faculty and department managers set clear expectations for how programmes are to be delivered and the outcomes they expect to be achieved.
There is key focus on the education and training being provided, leading to better outcomes for learners and continued and sustainable improvement.	[R1], [R2], [R3], [R4], [R5], [R6], [R7], [R8], [R9], [R11], [R12], [R13], [R14], [R15]	The University's expectations for the quality of the academic experience and student outcomes are understood and acted upon. This is demonstrated in practice by engaging learners as partners in the development of their academic experience and evidenced through strong engagement with the CME process.
CPD for staff is appropriately aligned with the curriculum with subject expertise and pedagogical knowledge developed over time to support the delivery of high-quality education and training.	[R6], [R8]	The Faculty and Department has a clear strategy for engaging staff in relevant and appropriate CPD and engagement with this is monitored through the PDP process. The University makes available appropriate pedagogical focussed training and development for staff and monitors the extent to which there is strong engagement.
Learners benefit from effective teaching and high expectations in classrooms, online, in workshops, at work or with subcontractors.	[R2], [R4], [R5]	There is evidence of effective scrutiny of proposals for programmes and modules, including from the Board of Study when considering modifications and reviewing CME action plans. Where the University subcontracts element of provision, there is evidence that the appropriate quality assurance policies have been implemented and outcomes documented.
There is engagement with learners, employers and other stakeholders to plan and support the education and training.	[R1], [R2], [R3], [R5]	There is evidence that learner progress reviews with employers are analysed to identify themes or trends which might support the further development of the programme.
There is consideration of the workload and well-being of staff, and a commitment to developing and	[R6]	There is evidence of compliance with the University's workload management policies and that staffing issues have been appropriately addressed.



This aspect relates to the ways in which leaders, managers and those responsible for governance ensure that the education and training delivered by the University has a positive impact on all learners.		
Factor	Link to tables 1 – 5	Additional monitoring and compliance
strengthening the quality of the workforce.		The University makes available appropriate support for staff to ensure their well-being as well as maintaining appropriate policies on recruitment and selection to promote high-quality in the workforce.
There are high ambitions for all learners, including those who are difficult to engage.	[R2], [R4], [R5], [R13], [R14], [R15]	No additional monitoring/compliance.
Leaders and those responsible for governance understand their respective roles and carry these out to enhance the effectiveness of the University.	[R13], [R14], [R15]	There is evidence of appropriate engagement in overseeing and ensuring the quality of the education and training provided and securing compliance with the relevant quality framework.
The University understands its strengths and weaknesses.	[R13], [R14], [R15]	There is evidence of regular engagement with data and other sources of information which shows the academic experience of learners and the outcomes that they achieve. Through reflections at programme and institutional level, action plans are developed to address weaknesses and perpetuate strengths.
Governors support and strengthen the University's leadership and contribute to shaping its strategic direction.	[R13], [R14], [R15]	Governors are provided with reports and data which shows the academic experience of learners, the outcomes they achieve and the University's plans to address weaknesses and perpetuate strengths. There is evidence of critical review of this data and information which supports the development of strategy. There are reviews of the effectiveness of governance at appropriate points and a robust internal auditing process ensures that Governors are assured of statutory compliance.
Governors ensure that the University meets its statutory responsibilities.		
Governors provide challenge and hold senior leaders and managers to account for improving the quality of learning and the effectiveness of performance management systems.		

This aspect relates to the ways in which leaders, managers and those responsible for governance ensure that the education and training delivered by the University has a positive impact on all learners.		
Factor	Link to tables 1 – 5	Additional monitoring and compliance
The University always acts in the best interests of learners to protect them online and offline.	N/A	The University's Safeguarding Policy and Protocols document outlines how learners and those they come into contact with are kept safe. This document is regularly reviewed and updated. The University has a general expectation that all staff have a reasonable understanding of how to raise concerns. This may be tested as part of a wider review of effectiveness of a given programme area or leadership and management.
Learners who may need early help, and who are at risk of harm or have been harmed are identified.	N/A	
The University secures the help that learners need and, if required, refers concerns in a timely way to those who have the expertise to help.	N/A	
The University ensures safe recruitment and manages ongoing compliance and allegations about adults who may be a risk to children and vulnerable adults.	N/A	

## Part C: Monitoring and compliance

This part outlines the process through which the University expects continuing adherence to the quality requirements will be monitored and how judgements on compliance will be reached. This document is not intended to be a detailed guide to these procedures; to maintain a proportionate and risk-based approach, monitoring and compliance activity is tailored according to the provision and the area of interest. Nevertheless, more information about the practical operation of these procedures can be found in Handbook D of the Quality and Standards Manual.

### 1. Initial compliance tests

#### a. Academic provision

All academic provision of the University must be correctly proposed and, if commissioned by the Portfolio Development and Management Committee, undergo a process of approval. At each of these points, assessments will be made about the **intent** of the proposed provision and the likelihood that it will achieve the threshold requirements for quality. This will be based on (a) the track-record of the department proposing the provision and (b) the quality of the proposal and approval documents. If a proposal does not satisfy a balance of probabilities judgement about the likelihood of the quality thresholds being met, it will not be permitted to continue.

#### b. Academic policy

Some academic policy decisions can have a bearing on compliance with external requirements. In particular, policies which affect the way in which students are assessed, how academic integrity is maintained and how awards are calculated and classified must be considered with reference to their regulatory impact. The Education Committee is responsible to Senate for ensuring that academic policy is designed to uphold quality and standards.

### 2. Monitoring

#### a. Academic monitoring

The primary method of monitoring how academic provision complies with the requirements for quality is through the Continuous Monitoring of Enhancement (CME) process. The CME action plan is maintained by the programme team, overseen by the department and reviewed by the Faculty Board of Study.

Academic monitoring is generally concerned with the **impact** of the provision. This is in relation to the perceptions of students about the quality of the provision and the outcomes that they achieve. Where both of these elements are positive, the assumption will be that the **implementation** of the programme is sound.

In addition to the department and Faculty-based monitoring, Academic Services will also conduct desk-based, general monitoring over the course of each academic year. The scope of this activity will depend on the level of the perceived risk that an area of provision may not achieve positive outcomes. General monitoring will usually be confined to requesting information and/or documentation that should routinely be in existence to support delivery of a high-quality programme.

b. [Policy and service monitoring](#)

Some of the requirements for quality relate to University policy and/or the work of professional support services. The effectiveness of these will be reviewed periodically in accordance with the requirements of, variously, Education Committee, Student Voice and Experience Committee and Senate. Where joint working between academic departments and a professional support area is required to achieve a particular outcome, the work of the latter might be in scope for a compliance review (see point 3).

The impact of assessment policies will be reviewed regularly by the Education Committee. Usually this will be at least annually with reports submitted on student outcomes and academic integrity. In addition, the University's degree outcomes statement reflects on the impact of all academic policy, and awards classification policy in particular, over a period of time, usually not less than every three years.

### 3. [Compliance](#)

a. [Academic quality](#)

The annual programme summary data reflects the performance of each programme in relation to the four key metrics (continuation, completion, progression and student satisfaction). Where these indicate that quality is good and student outcomes are positive the compliance test usually ends at that point. However, the general monitoring process (2a) might highlight areas of concern that require further investigation.

Where either performance against the four key metrics or the general monitoring process indicates that quality and student outcomes may not be reaching the University's thresholds, an **Internal Quality Assessment Panel (IQAP)** will normally be formed to undertake more detailed investigation. The IQAP is an academic panel and its role will be to either support an initial judgement that there is a risk to quality (in which case it will make recommendations intended to address that risk) or to confirm that quality is good. The IQAP may also undertake a general monitoring and review function of provision which is subject to cyclical review in order to support programme teams and the University prepare for external scrutiny.