



# Cardiff University

## Annual Quality Report 2015/16

March 2017

If you require this document in an alternative format,  
please contact 02920 875667, or email:  
[quality@cardiff.ac.uk](mailto:quality@cardiff.ac.uk)

**Registry**  
**Academic and Student Support Services**  
**Cardiff University**

## Contents

### Section 1: Introduction

1.1	Overview of the University Academic Quality System.....	3
1.2	External Context for Quality and Standards.....	3
1.3	What does this mean for Cardiff University? .....	3
1.4	Summary of Risk Assessment Status in the Quality System.....	4

### Section 2: Admissions

2.1	The Admissions Framework and associated policies.....	5
-----	---	---

### Section 3: Academic Standards

3.1	Annual Review and Enhancement.....	7
3.2	External Examining.....	9
3.3	Programme Approval and Collaborative Provision Policy Framework.....	11
3.4	Collaborative Provision.....	14
3.5	Periodic Review.....	18
3.6	Accreditation by Professional Bodies.....	20

### Section 4: Student Engagement

4.1	Student Representation, Training and Support.....	20
4.2	Student Surveys.....	22

### Section 5: Assessment and Feedback

5.1	Assessment.....	25
5.2	Examination Paper Errors.....	27
5.3	Academic Appeals, Unfair Practice, Fitness to Practise and Discipline Cases.....	28
5.4	Postgraduate Research Monitoring .....	32

<b>Section 6: Academic Regulations.....</b>	<b>33</b>
---	-----------

<b>Section 7: Summary of Actions .....</b>	<b>35</b>
--	-----------

## SECTION 1: INTRODUCTION

### 1.1 Overview of the University Academic Quality System

Cardiff University's quality assurance and enhancement policies, Senate Regulations and codes of practice are the key reference points that describe the academic processes, principles, roles and responsibilities. The University adopts an effective and efficient quality management framework assuring itself, students, staff and external bodies, of the quality and standards of its provision; it is also one of the channels of communication through which good practice and enhancement are encouraged and disseminated. The systems are dynamic and live, and are continuously evolving to ensure that the University remains at the forefront of good practice.

The University's approach to quality management is described in detail on the [Quality and Standards](#) webpages and is evidenced in the [2014 QAA Institutional Review Report](#) and [updated action plan in June 2016](#).

### 1.2 External Context for Quality and Standards

The 2015/16 academic year has been characterised by reviews and consultations summarised below:

- HEFCW draft consultation W16/36HE on the external assurance of quality required by regulated institutions - approved by UEB on 6th December 2016.
- HEFCW draft consultation W16/38HE on governing body annual assurance statements related to quality - approved by UEB on 6th December 2016 and signed off by Chair of Council on 13th December 2016.
- QAA consultation on new guidance about provision of information to prospective students – submitted to QAA on 7th December 2016.
- QAA consultation on revised Transnational Education Review – submitted to QAA on 23rd December 2016.
- The introduction of a Teaching Excellence Framework (TEF) submitted on January 25<sup>th</sup> 2017.

In England and Northern Ireland, the Pilot Quality Assurance activity started in the 2016/17 academic session with full implementation in the 2017/18 academic year. Wales is also likely to be subject to further reforms as the recommendations of the Diamond and Hazelkorn reviews are yet to be fully realised. The current situation remains one of uncertainty. Change is anticipated but future approaches in a number of areas are yet to be agreed, particularly in respect of the context within which Welsh HEIs will be operating.

### 1.3 What does this mean for Cardiff University?

The University will continue to respond to whatever future approach is agreed for Wales and take advantage of opportunities to shape the operation of the new system through engaging constructively with the further consultations on the detailed operation of the new processes. Internally, we will continue to review and enhance our systems, and anticipate the need to modify our systems to meet the requirements of the new approach. This will ensure that Senate and Council are able to discharge their responsibilities in terms of assessment of risk and providing assurances to HEFCW (or the relevant external agency) regarding the satisfactory operation of processes, management of risk, fit with mission and strategic plan, and the ongoing enhancement of the student experience.

## 1.4 Summary of Risk Assessment Status in the Quality System

Table 1 provides a summary of the risk assessment status for each of the quality processes and systems in the 2015-16 Session. Green signifies that there are no substantial concerns in that area, and the policies and processes are operating effectively with reviews undertaken within the agreed schedule unless responding to immediate internal or external recommendations. Amber signifies that some issues of concern may have been identified, but that these are being addressed through current enhancements and actions. Red signifies that serious issues of concern have been identified and may require substantial or immediate action to remedy them. No areas of activity have been identified as having Red status in this report.

**Table 1: Summary of Quality Processes Risk Assessment Status**

Activity Name	Red	Amber	Green
Admissions		Amber	
Annual Review and Enhancement			Green
External Examining			Green
Programme Approval Policy Framework		Amber	
Collaborative Provision Policy Framework		Amber	
Periodic Review			Green
Accreditation by Professional Bodies			Green
Student involvement in Quality Management Systems			Green
Student Representation			Green
Student Surveys		Amber	
Assessment		Amber	
Examination Paper Errors			Green
Academic Appeals, Unfair Practice, Fitness to Practise, and Discipline Cases			Green
Postgraduate Research Monitoring		Amber	
Academic Regulations			Green

## SECTION 2: ADMISSIONS

Risk assessment status:

R	A	G
---	---	---

### 2.1 The Admissions Framework

Cardiff University is committed to promoting equality and diversity in all of its practices and activities, including those relating to student recruitment, selection and admission. Our aim to recruit and admit students who have the potential to and who are most able to benefit from our learning, teaching and research environment, regardless of background. In support of this, we operate a Contextual Admissions Model for undergraduate UK applicants to identify those who have experienced barriers to participation in higher education.

#### 2.1.1 Review of admissions related policies

In line with the cycle of review agreed by ASQC identified in section 6, the following admissions related policies were reviewed by the Admissions Sub Committee and agreed by ASQC and Senate for use:

- [The Admissions Framework](#)
- [English Language Policy and Guidance](#)
- [Complaints and Appeals Procedure for applicants](#)
- Native Language Qualifications Policy Statement
- Declaration of Criminal Convictions Policy and Procedure for Applicants

Revised versions of the approved policies have been implemented and are accessible on the Admissions pages of the Public Information webpages.

#### Enhancements for 2016/17:

Alongside the policy reviews highlighted, in 2015/16, new and existing qualifications have been under review in line with changes regarding acceptability and standards. These include:

- New GCSE grading system
- Oxford International AQA A-level Examinations
- Statement of support for Core Mathematics qualification
- Practical element of science A-Levels

Up-dated information is available on our website and appropriate external websites specific to the qualifications and/or UCAS. Student Recruitment have been informed and are up-dating future publications such as the prospectus where appropriate.

Additional policies under review by the Admissions Sub Committee during the 2016/17 academic session for implementation in 2018/19:

- EU Qualifications equivalency
- English Language policy
- Contextual Admissions policy
- Under 18 admissions policy
- Behaviour of the applicant in the admissions process

### **2.1.2 Action:**

- Admissions Sub Committee to report to ASQC on any updates or outcomes of the policy reviews identified for implementation in the 2018/19 admissions cycle.

## **2.2 Confirmation, Clearing and Adjustment (CCA) Project**

During the 2015/16 academic session, phase 2 of the CCA project was commissioned to extend the central support for Confirmation, Clearing and Adjustment to all Colleges, with an overall aim of improving student quality, achieving the agreed recruitment targets, supporting widening access, further developing the systems and processes to support CCA. The project delivered all its objectives within the agreed time scale, budget and quality parameters.

The project was well received with recommendations taken forward with regard to process improvements for CCA 2017. These are now being taken forward as part of the First Choice programme (section 2.3).

## **2.3 Competition and Markets Authority compliance – terms and conditions of offer to UCAS applicants**

In October 2015 a new Consumer Rights Act came into force, with enhanced emphasis on students' rights as consumers. The Competition and Markets Authority (CMA), which is charged with enforcing the Act and other current legislation, has issued guidance to HEIs on the application of the Act and the risks to organisations found to be non-compliant. A number of system developments have been required to allow the appropriate interface between SIMS and Course Finder to produce the Durable Medium, which includes Published Terms and Conditions, Programme Information and Complaints Procedures. To date, c5600 Durable Mediums have been disseminated to undergraduate applicants holding an unconditional firm offer.

The amount of information included in the durable medium from different areas/sections has made it a challenge to bring together, the late/in-cycle setting fees being particularly problematic (and one of the key areas that CMA aims to address in terms of knowing true costs of a programme before making a decision/commitment to study). These issues continue to be addressed by the CMA Project Group with recommendations regarding deadlines for information to be received ahead of start of cycle being taken through the Admissions and Recruitment Group and fee setting committees.

**Enhancements for 2016/17:** There have been ongoing developments for issuing the durable medium for undergraduate applicants for the 2016/17 entry with further roll-out to PGT and PGR offer holders in cycle.

A major admissions process and policy review will take place as part of the First Choice project, with a view to bringing together all admissions policies in a single location to ensure accessibility and to assist in the annual review process.

### **2.3.2 Action:**

- CMA Project Group to ensure the preparation of the durable medium for 2018/19 entry is brought forward to be completed ahead of the start of next cycle with up-dates and formal sign-off of the document prior to the 1<sup>st</sup>

October 2017. This will allow the durable medium to be issued alongside offers from the start of the 2018/19 cycle.

- The Assistant Director of Finance to work with the Admissions and Recruitment Group to review fee setting to ensure sign-off of fees ahead of the admissions cycle.
- Admissions Sub-committee to submit updated admissions policies to ASQC and Senate at the end of the 2016/17 academic session

## SECTION 3: ACADEMIC STANDARDS

### 3.1 Annual Review and Enhancement

Risk assessment status:

R	A	G
---	---	---

The [key principles](#) that underpin Annual Review and Enhancement highlight the University's priority to the continuous enhancement of the quality of our programmes and the educational experience provided for all our students. In addition, School, College and University strategic priorities are considered with the expectation that [students are involved and engaged](#) in every aspect of the process to evaluate a School's provision and educational experience.

#### 3.1.1 Enhancements agreed for ARE November 2016

All enhancements identified by the ARE Executive Committee in January 2016 were considered by the PVC Advisory Group on April 15th and May 4th 2016 respectively with the aim of ensuring there was a streamlined and simplified process for Schools, avoiding repetition and reducing the burden of form-filling while ensuring relevant issues are still reported on.

In May 2016, ASQC was presented with an update of ongoing enhancements and developments for ARE 2016 (Paper 15/530) which were implemented for ARE 2016 and are summarised below:

- **Combined ARE and Performance Review meetings** – ASQC confirmed that the combined meeting approach should continue but that the agenda should ensure that all items raised by the College ARE committee are considered within the meeting without the need for additional correspondence or meetings with Schools.
- **Updated ARE Forms, Questions and Guidance** – ASQC approved updates to the information provided to Schools including the renaming of ARE submission forms with associated colour coding for ease of reference; a realignment of questions to avoid repetition with updated guidance to support the re-developed question sets; the inclusion of questions on inclusive curriculum and collaborative provision.
- **Re-designed ARE Action Plans** – ASQC approved the sign off mechanisms for completed ARE actions highlighting that there would be a clear focus on incomplete actions to ensure prioritisation with associated timescales.

- **Periodic Review** – ASQC approved the inclusion of the Periodic Review action plan as an appendix to the College ARE Committee papers to allow Schools to cross reference to the information without having to include the full Self Evaluation Report.
- **ARE Data Sets** – ASQC endorsed the report on the outcomes of the ARE Working Group to establish a reliable baseline of all data produced with the focus at Programme rather than School level data; specific definitions of what the data describes; why Schools are being asked to comment on the data; where the data is being sourced from; and how date the data was produced and by whom.

### 3.1.2 Confirmation of conduct and outcome of ARE 2016

The ARE Executive Sub Committee confirmed, at its meeting on 10 January 2017, the conduct and outcomes of ARE 2016 and discussed the proposed enhancements for ARE 2017, which will be reported on fully to ASQC in 2017. The Committee endorsed the following key positive aspects of the process that were developed in addition to those stated in 3.1.1:

- **Inclusion of PGR Deans** – The inclusion of each PGR Dean at the ARE committee meetings allowed for detailed scrutiny of a range of PGR related strengths and issues. This was a positive addition to the meeting and was further reflected in the discussions at each individual School meeting. All Schools commented on the benefit of the focussed discussion, which will help support Schools throughout the 2016/17 academic session with support from the Doctoral Academy for any issues raised.
- **Support for ARE Committee Members** – Committee Members were provided with electronic and hard copies of all information needed to support them in their role. Each section of information was presented in a consistent manner that clearly signposted all data to ensure that each member could cross reference the information with the School ARE report Form. In addition, each member was provided with a briefing note highlighting key points within the data sets with space for each committee member to add notes. The committee members noted that this was a positive addition to the process and should continue in future years.
- **Student Briefings** - Each College Quality Officer provided briefing sessions for student panel members before each committee meeting to support them through the process and to explain their roles and any information that was not clear. Feedback from the student body and members of the Student Voice Team in the Students' Union highlighted that this addition to ARE 2016 was very successful in supporting students to get the most of their experience as a committee member and feel that the student experience remained at the heart of the process.

### 3.1.3 Proposed Enhancements for ARE November 2017:

The full extent of impact of changes to Higher Education policy in Wales are still yet unknown including a review of the Quality Assurance Framework for Wales alongside the information required for the Governing Body annual assurance statements related to quality. In addition, the requirements of TEF should be a key consideration in the holistic development of all quality assurance and enhancement processes to ensure that the re-developed approach to quality assurance works closely with, but



does not overlap other strategic activities or initiatives taking place within the University. As a consequence, further consideration should be given to the following:

### 3.1.4 Actions:

- a full review of the scope and purpose of ARE and its relationship to other quality related processes, including Periodic Review, will be undertaken, commencing in the 2016/17 Session and to be concluded by March 2018;
- that the review should consider the outcomes of HEFCW consultation on the external assurance of quality required by regulated institutions and the consultation on governing body annual assurance statements related to quality;
- College Quality Officers and College Education Managers to facilitate regular updates on College and University level issues to inform School developments and action plans.

## 3.2 External Examining

Risk assessment status:

R	A	G
---	---	---

[External examining](#) provides a key role in maintaining academic standards within the University. Those appointed as external examiners are experts in their field drawn from higher education, industry, or professional bodies and provide valuable independent oversight and advice on the programmes they have been appointed to. They are also able to offer an informed view of how standards at Cardiff compare with the same or similar awards at other universities.

The primary way in which external examiners provide assurance of the quality and standards of our taught and research provision is via the submission of an annual written report to the University. For taught programmes, the report includes advice and guidance on the future development of modules and programmes with PGR reports including comments on the format of the viva; evidence of the nature of supervision received by the candidate; level of research training received by the candidate; progress monitoring and, any other issues or concerns surrounding quality and standards.

### 3.2.1 External Examiner induction and training

As agreed by ASQC at its meeting in January 2015, online resources have been developed for all new External Examiners with each new appointment provided with a username and login details to enable access to the intranet which facilitate access to information at both School and University level. This replaces the central University induction and supplemented instead by programme level induction activities that are arranged locally with relevant personnel within each School. This ensures that External Examiners are provided with appropriate information relevant to the standards expected at Cardiff as outlined in the [External Examiner Handbook](#) with an opportunity to ask subject specific questions within the School.

Whilst the full details of how a revised operating model for Quality Assessment will operate in Wales are still unknown, HEFCE have commissioned the HEA to develop and pilot training for external examiners across the UK, to ensure that they are clear

about their role and have the requisite technical assessment skills and understanding of academic standards. In addition, further work will be carried out to explore different approaches to the calibration of standards with professional bodies in particular disciplines. UUK have also been asked to review the range of classification algorithms currently in use with the aim of ensuring more reliable and comparable judgements about the standards set by institutions.

### **3.2.2 Action:**

- ASQC to monitor the outcomes of the consultation on the revised operating model for Quality Assessment will in Wales and the implications of any revised requirements on the training and induction of External Examiners at Cardiff.

### **3.2.3 Undergraduate and Postgraduate Taught External Examiners' Reports**

For the 2015/16 academic year, Schools have analysed 327 out of 375 expected reports for both Undergraduate and Postgraduate Taught programmes allowing for a comprehensive Institutional Response to be created and sent to the appropriate External Examiner. The Head of School is asked to confirm actions taken in response to specific comments at a programme level with the expectation that any good practice is shared throughout the School via the appropriate Board of Studies.

Two reports were identified (ARCHI) as requiring intervention from the Academic Registrar, College Dean (Education and Students) and the Head of School during the 2015/16 academic session. All issues have been addressed quickly with support and guidance provided by the College Dean of Education and Students.

Cardiff continues to maintain its academic standards, evidenced through the high number of positive reports received and as such can be confident that it continues to operate robust monitoring processes to ensure the standards of the awards it issues, which have been confirmed by objective peers within the Higher Education sector. All reports contribute to a holistic review of comments in Annual Review and Enhancement (Section 3.2.4). Full details of all External Examiner comments, along with the appropriate [Institutional Response](#), are available online in line with the the [QAA Quality Code, Chapter B7: External Examining](#) and the [Higher Education Academy](#).

### **3.2.4 Holistic analysis of Taught External Examiner comments through the Annual Review and Enhancement Process**

A holistic review of common themes highlighted by External Examiners was undertaken for the first time during Annual Review and Enhancement in 2016 (section 3.1) allowing Schools to identify and share areas of good practice and reflect on common themes generated throughout the School. In general, External Examiners were supportive of the efforts made by Schools when responding to concerns or issues raised by External Examiners with Schools highlighting the short and medium term interventions at individual programme level. Specific themes that need wider institutional discussion are highlighted below.

### **3.2.5 Assessment criteria and use of the full range of marks**

The ARE Committee meetings and subsequent discussions with Schools highlighted a consistent theme within some subject specific disciplines regarding the need for consistency of practice when using specific marking schemes and the criteria used when awarding marks, particularly the use of the full range of marks. In May 2015, ASQC approved guidance for Schools regarding the use of generic assessment criteria as a reference point to support Schools and students to develop a shared

understanding of assessment requirements and academic standards ([paper 14/555](#)). Further generic guidance is provided in the Academic Regulations regarding the marking and moderation process to ensure the reliability and consistency of marking and feedback.

**Enhancements for 2016/17:**

As outlined in section 5.1, specific assessment and feedback activities have been identified through the Education Portfolio and the Centre for Education Innovation to ensure the policy and guidance on assessment and feedback is easily accessible and there is bespoke support for staff in discipline specific contexts on assessment and feedback issues.

**3.2.6 Action:**

- ASQC to consider the issues identified in 3.2.5 and determine if they are considered a priority within the current work stream undertaken by the Education Portfolio and the Centre for Innovation and Education.

**3.2.7 Postgraduate Research External Examiner Reports (PGR)**

All reports from examiners of research degrees are reviewed by the PGR Quality and Operations team after the final version of the thesis has been approved and uploaded to the University’s digital repository, but before the award is formally conferred by the Awards and Progress Committee. This includes the examiners’ independent pre-viva reports, the joint report produced by the examiners following the *viva voce*, and the external examiner(s) report on the University’s quality and standards processes. Common, generic themes are recorded (summarised below), and in 2015/16 academic session, were presented for review to the Assuring and Enhancing a Quality Experience Programme Team (AEQEPT), which reported to the Academic Standards and Quality Committee (ASQC) with pertinent issues reported to the relevant School for action as appropriate.

**Enhancements for 2016/17:**

In response to concerns raised by examiners regarding the lack of clear distinction between some decision categories, from 1 August 2016, the Regulations governing the decisions available to examiners have been revised and simplified. In the case of examinations for PhD/MD, this has resulted in the removal of the ‘Pass, subject to minor corrections’ and ‘Not approved for PhD/MD, approved for MPhil with minor corrections’ decisions and the addition of a ‘Not approved for PhD/MD, approved for MPhil subject to corrections and amendments’ decision.

**3.2.8 Action:**

- The PGR Quality and Operations team to monitor the Result and Report Form and associated guidance provided to examiners in interpreting the decisions available to them following the amendment to the Regulations and advise the College Deans (PGR) to report to ASQC with reflection in the 2016/17 AQR.

**3.3 Programme Approval and Collaborative Provision Policy Framework**

**Risk assessment status:**

R	A	G
---	---	---

The revised Programme Approval and Collaborative Provision Policy Frameworks were implemented fully during the 2015/16 academic year in line with Chapter B1 and B10 of the QAA's Quality Code on Programme Design, Development and Approval. In addition, a single source of information was established to ensure that when new programmes are developed, they are sufficiently robust to the scrutiny of the Competition and Markets Authority and satisfy Part C of the UK Quality Code (Information about Higher Education Provision).

In January 2016, College Quality Officers were appointed to proactively advise and signpost academic staff to ensure consistency of operation of policy and process throughout each College. The ASQC agreed timeframes for the development of new programmes and the review of existing programmes were published in the Programme Approval Policy Framework and the Collaborative Provision Policy Framework to support Schools with College Quality Officers acting as a single point of contact for Schools.

There has been proactive and positive interaction with College Deans (Education and Students), College Education Managers and other professional service staff to embed the three stages of the approval process into the University's annual cycle of activity. In addition, the development of all new programmes and changes to existing programmes is being supported through the Annual Review and Enhancement process, with College Education Managers and College Quality Officers proactively advising and signposting academic staff to ensure consistency of operation of policy and process.

In the 2014/15 Annual Quality Report, the Programme Approval Framework risk assessment was 'amber', as the Framework had not been implemented until the 2015/16 Session. As the College Quality Officers were not in place for the full 2015/16 academic cycle, Schools did not receive the full support available and the impact of the role. In addition, all programme information collected as part of the programme approval process was reviewed to ensure that CMA requirements are fully integrated and less burdensome for Schools. As a consequence, the risk has been assessed to remain at 'amber' to reflect this and will be fully evaluated in the 2016/17 Annual Quality Report as outlined in section 3.3.1.

### **3.3.1 Operation of the revised Policy Frameworks and Supporting Documentation in 2015/16.**

The updated Programme Approval and Collaborative Provision Policy Frameworks introduced a new 'intermediate level' category of change in response to School feedback highlighting that there was no category in the previous system between 'minor' and 'significant' changes. This level of change is managed at College level to respond in an agile manner to changes that are not considered to need a full University Level Academic Approval Event. Further details of the total number of academic approval events and the category of change are highlighted in Table 2 and 3.

Feedback from Schools indicated that whilst the process and administration for developing new and major changes to programmes was less overwhelming and burdensome than the previous system, the ASQC agreed timescales for approval were a perceived barrier to development. Enhancements and actions identified below will identify proposals early with support through all stages of the approval process.

#### **Enhancements for 2016/17:**

- College Education Managers, College Quality Officers and College Education Officers to promote the ASQC agreed programme approval timeline explicitly

stating timescales through all stages of approval to final sign-off by ASQC, incorporating all programme information.

- College Education Managers, College Quality Officers and College Education Officers to follow up all discussions with Schools where they have identified establishing new programme proposals of changes to existing programmes to ensure all developments are within the stated timeframes dealing with exceptions on a case by case basis.
- College Communications Officers to support Schools with preparing the programme approval documentation that will be used as the single source of information before it goes to an academic approval event to encourage consistency of style and content.

### 3.3.2 Action:

- College Deans (Education and Students), College Education Managers and College Registrars to ensure Stage 1 Strategic Approval is considered in line with the agreed annual cycle timetable to ensure a full cycle of recruitment with any exceptions identified at the earliest point in the academic session;
- College Quality Officers to ensure agreed timelines of activity are agreed with Schools after Stage 1 Strategic Approval that aligns with the agreed annual cycle of activity timetable and identifies responsibility for each action agreed.
- College Education Officers to support College Education Managers and College Quality Officer to promote the established programme approval timelines and support the process of ensuring the swift transition between Stage 3 University Approval onto SIMS and able to be visible on Coursefinder for marketing activity within 4 weeks.

### 3.3.3 Programme Approvals during 2015/16 (including those with Collaborative Provision)

Table 2 highlights that 31 programme approvals took place during the 2015/16 academic session (new programmes / major changes and intermediate changes). With the addition of the roles of College Education Managers and College Quality Officers and the introduction of an 'intermediate' level change into the Policy Framework, the volume of approval events has increased compared to previous years. Work on a further 11 proposals are ongoing into 2016/17 due to revised strategic priorities.

**Table 2. Summary of Approvals between 2011 - 2016**

Completed Programme Approvals	2011-12	2012-13	2013-14	2014-15	2015-16
	34	27	23	19	31

It is important to note, that within the 31 stated approvals, multiple proposals/programmes were considered at the same event where there was significant overlap in content or where the proposal considered the same issues of student experience and support, e.g. when introducing a placement year into all undergraduate programmes within a School.

**Table 3 Category of changes and number of programmes approved in 2015/16**

<b>Category of Change</b>	<b>Intermediate changes</b>	<b>Major Changes</b>	<b>New programmes</b>
<b>Number of Programmes approved</b>	97	38	12

The introduction of the 'intermediate' level change highlighted in Table 3 has been used to approve 'placement years' or a 'year of study abroad' in a range of programmes into one Academic Approval Event with a consistent Chair providing the rigour and consistency of practice needed. This has allowed a consistent approach to ensuring the student experience and allowing all staff within the School to be included in the discussion.

**3.3.4** The increase in the volume for requests to introduce new programmes and make changes to existing programmes is expected to continue to increase in the 2016/17 academic session with each College taking a strategic view of each proposal being submitted. Careful consideration will need to be given to the approval timescales agreed by ASQC to ensure that Schools are planning portfolio development early in line with sector development whilst being able to respond to exceptional requests in an agile way.

**3.3.5** During the 2015/16 academic year, there were no new programmes proposed with formal collaborative partners under the revised procedures therefore it is difficult to ascertain if the revised process continues to act as a disincentive to innovation in programme provision, particularly against the University's International strategy.

**3.3.6 Action:**

- ASQC to monitor the nature and volume of approvals during the 2016/17 academic session and the impact of the introduction of the published programme approval timeline has on development activity.

**3.4 Collaborative Provision**

**Risk assessment status:**

R	A	G
---	---	---

Collaborative Provision forms an integral of the Programme Approval Process with its primary objective to ensure that the appropriate level of scrutiny and review is given to all collaborative proposals. A key consideration when approving collaborative activity is whether collaboration with a partner poses a threat to the University's academic standards and student experience, and by implication the reputation of the University.

In February 2016, HEFCW issued Guidance on partnership arrangements for provision delivered by external providers on behalf of regulated institutions in Wales which outlined regarding partnership arrangements between external providers and

regulated institutions in Wales, taking account of the Higher Education (Wales) Act 2015 (the 2015 Act). In addition, specific requirements for liaison with the Home Office were identified to ensure HEIs have appropriate educational oversight requirements for Tier 4 purposes. The assurance should cover all provision delivered by or on behalf of the institution, including any branch campuses.

The guidance referred to specific provision delivered through validation or franchise partnerships, with the primary focus on franchise arrangements. Currently, the University does not have formal collaborative arrangements categorised as 'franchised' or 'validated' however further requirements of the 2015 Act are to ensure that all partnership agreements are updated accordingly, so that they can be considered in applications for 2017/18 Fee and Access Plans.

The risk status remains as amber until the requirements of the 2015 Act have been fully implemented and each partnership has been reviewed in line with the schedule outlined in section 3.4.2. It is likely that further updates will be needed to the Policy Framework to take account of changes to quality assessment arrangements and the review of PGR developments outlined in 3.4.4.

#### 3.4.1 Action:

- The Collaborative Provision Sub-Committee to monitor any further updates issued by HEFCW and the potential impact on the current Policy Framework and any implications this has on agreements with collaborative partners.

#### 3.4.2 Collaborative Provision Register and Review of Agreements

There are currently 12 taught collaborative arrangements that are published on the [Collaborative Provision Register](#). Each arrangement identifies the status of the agreement, the type of collaborative provision and the risk associated with that provision. In 2015/16, 5 programmes were due to undertake a formal Collaborative Provision Review before the expiration of the agreement. These included:

- **MSc European Spatial Planning and Environmental Policy** with Radbound University, Nijmegen Blekinge Institute;
  - Status: extended for one academic year to allow the full details of Erasmus funding to be fully known
- **BScEcon Politics (Cardiff) Diplome from Institute d'Etudes Politique (IEP)**, Bordeaux;
  - Status: in progress having completed Stage 1 Strategic Approval by the College of AHSS
- **MSc/PgDip Palliative Care** with Bangalore Hospice Trust
  - Status – completed. As a result of the review, the mode of delivery for this programme was changed from a 'Flying Faculty' provision to 'Distance Learning' Given the changing status of the provision, a moderator was no longer required as all students study in Cardiff with no provision taking place in India and as a consequence this will be removed from the register.
- **MTh/BTh Chaplaincy Studies** with St Padarn's; and
- **Bachelor of Theology / BA Religious and Theological Studies** with South Wales Baptist College
  - Status: complex contract negotiation with St Padarn's and the South Wales Baptist College were extended due to the requirements of the Higher Education (Wales) Act 2015 (the 2015 Act). Given the long-standing nature of this collaboration, the details of the relationships presented difficulties; however, re-negotiations are near completion.

The MTh Chaplaincy Studies with Sheng Kung Hui Ming Hua Theological College and the MA Journalism with the Asian College of Journalism were rejected as part of Stage 1 Strategic Approval Stage and have moved into a 'teach out' status due to a change in strategic and financial priorities.

#### **3.4.3 Action:**

- The Collaborative Provision Sub-Committee to monitor any changes in agreement status to ensure they are accurate to be declared to HEFCW and submitted with the Fee and Access Plan each year.
- The Collaborative Provision Sub-Committee to monitor the delivery of any collaborative provision activity to ensure there is appropriate educational oversight requirements for Tier 4 purposes.
- Head of Schools to monitor their Partnership Management Plan annually to ensure that the arrangements remain in line with the signed agreements and renewal of agreements take place at least 18 months before expiry.

#### **3.4.4 Management of Risk and Placement Learning**

The Collaborative Provision Policy Framework provides detailed definitions of all types of collaborative provision including PGR along with the levels of risk associated with the type of arrangement. From this, Schools can understand the types of activities that constitute 'collaborative provision' and the specific areas of focus that would need to be considered when embarking on new developments.

The 2014/15 Annual Quality Report, identified that further work was needed to adequately reflect the area of Placement Learning within the taxonomy with the Collaborative Provision Sub-Committee being asked to consider any changes made to the Code of Practice for Placement Learning and its potential impact in relation to the Collaborative Provision Policy Framework. This work is currently ongoing with updates to the Code of Practice for Placement Learning anticipated in 2017 including revised advice and guidance on insurance requirements and risk assessment.

In addition, whilst the 'Taxonomy' attempts to capture all types of collaborative activity undertaken throughout the University, it has primarily focused on taught provision. It has been identified that further work is required within the area of PGR development to ensure there is clarity on setting up and supporting Schools with these elements of collaborative provision.

#### **3.4.5 Action:**

- The Collaborative Provision Sub-Committee to consider any proposals brought forward from the Placement Project which impact on the Code of Practice for Placement Learning and the Taxonomy of Collaborative Provision presented in the Framework.
- The Collaborative Provision Sub-Committee to consider how a suitable PGR Framework could be developed to ensure that processes and procedures support the strategic development of PGR provision within the University.
- Once established, the PGR Quality Team to provide advice and guidance on strategic developments, including associated risks and management of risk, timescales, levels of approval needed.



### 3.4.6 Moderators

In the 2014/15 Annual Quality Report, the operation and oversight of the Moderator system for programmes with collaborative provision was considered as a medium risk status. The Collaborative Provision Sub-Committee was actioned to oversee and Monitor the reports from the work of Moderators and report back to ASQC in May 2016. ASQC agreed that given that there were a number of CP Reviews due to take place, appropriate Moderators could be sourced as part of the Review Process with ASQC approval dependent on an appropriate Moderator being in place. For other programmes going through Review, a condition of approval will be applied therefore confirming compliance with the Collaborative Provision Policy Framework.

The Collaborative Provision Sub-Committee has received Moderator Reports for the following programmes in the 2015/16:

- BSc Nursing Practice and Community Health Nursing Practice (teaching out)
- MSc European Spatial Planning and Environmental Policy (review in 2016/17).

### 3.4.7 Action:

- College Deans of Education and Students to provide support in ensuring appropriate Moderators are found for existing programmes and those in a 'teach out' status to ensure the quality of the student experience is maintained.
- The Collaborative Provision Sub-Committee to continue to oversee and Monitor the reports from Moderators and ensure that Moderators are appointed for programmes under review in 2016/17 as a condition of re-approval.

### 3.4.8 Current "Teaching Out" Agreements

There are 5 programmes in a 'Teach Out' phase:

- **Taylor's University** - *MPharm and BPharm programmes in Malaysia (2+2 arrangement)*. The programme has 1 student remaining on the programme at Cardiff. All teaching in Malaysia has ceased.
- **Hochschule Fresenius University of Applied Sciences (HSF)** - *MSc International Pharmacoconomics & Health Economics*. There are currently 14 students on the full-time programme. All part time students have completed their studies.
- **Asian College of Journalism** - *MA Journalism*. This programme has 3 students who have completed their dissertation and are awaiting the final award decision.
- **Oman Specialised Nursing Institute** - *BSc (Hons) in Nursing Studies / BSc Community Health Nursing Practice*. There are currently 162 students on the BSc (Hons) in Nursing Studies and 24 students on BSc Community Health Nursing Practice. All teaching has ceased with students finishing in June 2017.
- **Welsh Government** – *Master's in Educational Practice*: There are currently 863 registered part time distance learning students. A legacy programme is being developed.

All programmes have an active 'Teach Out' plan in place that is monitored through ARE and via moderator reports until the final students have completed their studies. All updates will be discussed and monitored through the Collaborative Provision Sub-Committee and reported to ASQC.

### 3.5 Periodic Review

**Risk assessment status:**

R	A	G
---	---	---

[Periodic Review](#) is the process by which Schools undertake a broad review of all their programmes, evaluate their strategic direction and reflect upon the experiences of their students. As highlighted in section 2.1, it is closely linked with Annual Review and Enhancement identifying strategic areas of focus (based on KPIs identified in The Way Forward) that Schools consider in detail through the Periodic Review process.

#### 3.5.1 Confirmation of conduct and outcome of Periodic Review 2016

All seven Periodic Reviews were successfully completed during 2015/16 academic session within the following Schools:

<b>AHSS</b>	MLANG	<b>BLS</b>	BIOSI	<b>PSE</b>	ARCHI
	SOCSI		MEDIC		EARTH
	WELSH				

The College Deans of Education and Students confirmed at the final Panel meeting that all Schools had engaged with the conduct of the Review, were engaged with the areas of focus identified within the Review and had produced appropriate action plans as a consequence. The Panel confirmed the following:

- The University can have confidence in the outcomes of the Periodic Review in relation to the continuing currency and validity of the School's awards; and
- The University can be confident about the outcomes of the Periodic Review in relation to the protection of the standards of the School's awards and the quality of the provision.

Each Dean of Education and Students was able to approve the outcomes of Periodic Review subject to additions/amendments being made to the School's Action Plan where necessary.

#### 3.5.2 Analysis of key themes identified throughout Periodic Review in 2015/16

As in previous years, key themes were identified in all Periodic Review:

- **Student Voice** (UG, PGT and PGR) in particular the methods of communication' both of process and of outcomes of initiatives undertaken within each School;
- **PGR Research Culture/Community – the Schools** approach to engaging with PGR students, with a view to developing and embedding a vibrant research culture within the School;

- **PGR Submission rates and monitoring procedures;**
- **Recruitment** – review of the size and shape of each School identifying areas for development;
- **Employability & skills/work placement opportunities** – including support for students on placement as a result of the Placement Survey results.

As identified in section 3.1.1, the Schools' Periodic Review Action Plan was included as an appendix to the College ARE Committee papers to allow School's to provide an update on their Periodic Review actions and to ensure that all actions are followed up each year. All of the issues highlighted above were discussed as part of the ARE process and will be followed up at regular intervals by College Education Managers and College Quality Officers to ensure the actions are prioritised and completed.

**Enhancements for 2016/17:**

As indicated in section 3.1.3, the implications of the outcomes of the consultation on the review of Quality Assurance Framework for Wales alongside the information required for the Governing Body annual assurance statements related to quality are as yet unknown. In addition, the proposed enhancements outlined for Annual Review and Enhancement will need to be considered in line with Periodic Review given their interlinking nature.

**3.5.3 Action:**

- In line with action 3.1.4. the relationship between Periodic Review and ARE to be reviewed along with its relationship with other internal and any external quality assurance requirements and updates in University Strategy;
- College Quality Officers to support Schools in updating their Periodic Review Action Plans incrementally before submission as part of ARE 2017.

**3.6 Accreditation by Professional Bodies**

**Risk assessment status:**

R	A	G
---	---	---

The Accreditation Submissions Sub-Committee did not meet during the 2015/16 academic session as ASQC received and considered summaries of 33 reports from Professional Bodies on the outcomes of accreditation activities in Schools (ARCHI x 5, EARTH x 4, HCARE x3, MEDIC x 7, PSYCH x1, SOCSI x1, WELSH x 1). Each report considered the outcomes of each professional body including areas of good practice and identified improvements where needed.

Any identified actions were discussed as part of Annual Review and Enhancement and also Periodic Review to ensure that Schools were reflecting appropriately on the requirements of each professional body. In addition, any substantive changes that were needed were captured through the University Programme Approval Policy Framework to ensure that all changes were appropriately identified and updated in a managed and consistent way.

**Enhancements for 2016/17:**

As identified in the 2014/15 Annual Quality Report, several Professional, Statutory and Regulatory Bodies have introduced changes in the approaches to the accreditation of programmes in recent years relying on a standardised approach to

requesting and confirming accreditation activity and visit schedules. Whilst these changes are slowly being captured on the accreditation database, further support is required in capturing the full extent of accreditation activity throughout the University and the support Schools need for this activity.

### 3.6.1 Action:

- College Quality Officers and College Education Managers will continue to finalise the audit of on-going accreditation activities and update the accreditation register to ascertain if any support is required for ongoing accreditation activity;
- College Quality Officers to maintain a central repository of all accreditation reports that will be published on the University webpages;
- A review of the scope and purpose of the accreditation sub-committee to ensure there are appropriate mechanisms for supporting and reporting on the University's accreditation activity.

## SECTION 4: STUDENT ENGAGEMENT (INCLUDING THE STUDENT LEARNING EXPERIENCE AND STUDENT FEEDBACK)

Student Engagement is at the heart of all University quality management processes in line with [Chapter B5 of the QAA Quality Code](#) and continue to an integral part of the [University's quality management systems](#) via Annual Review and Enhancement (section 2.1), Programme Approval (section 2.3) and Periodic Review (section 2.5).

The [Student Charter](#), developed in partnership with students, the Students' Union and the University, confirms the high level of engagement that exists between our students, the Students' Union and the University to enhance the Cardiff experience. Whilst this experience will be unique to each student, the expectations laid out in the Student Charter demonstrate the range of possibilities open to students helping them to expand their knowledge and abilities beyond the educational experience.

The 2014/15 Annual Quality report identified that there was no dedicated mechanism through which to consider, steer and evaluate the diverse services, activities and policies that support the wider student experience outside of the specific learning objectives of individual programmes of study. As a result, the Student Experience Sub-Committee was established in 2016 reporting to ASQC

### 4.1 Student Representation, Training and Support

Risk assessment status:

R	A	G
---	---	---

The 2015/16 academic session continued to highlight the high level of student representation throughout the University with 1,106 Student Academic Reps covering all Schools and all levels of study. There was a continued emphasis to support this process through 32 School-based training sessions facilitated by the Students' Union with further training offered to all School Chairs and Secretaries. In total, 344 Student Academic Reps completed the training resulting in a greater understanding of the role and its associated responsibilities.

Each School has one or more Staff/Student Rep Co-ordinators whose primary role is to ensure student reps are elected and supported in carrying out their duties throughout the academic year. They are annually trained and supported by the Student Engagement Team, through a Student Rep Co-ordinator Briefing. The VP Education and Student Voice team are involved in the training of the Student Rep Co-ordinators, to allow them to showcase the Union and the support that they can offer their students.

#### **4.1.1 Student Representation at School and College Level**

At School level, Student-Staff Panels continue to be the primary mechanism for students to highlight day to day issues about programmes or their School in general. In 2015/16, student satisfaction decreased from 93% to 77% with respondents indicating that Student-Staff Panels were not seen as an effective way of raising issues or highlighting good practice.. Whilst Student-Staff Panel minutes continue to be collated for University and Student Union staff to analyse, further work is needed to understand the declining levels of satisfaction in the Student-Staff Panel process and how this can be improved.

College Forums continued to grow as a mechanism for all students (UG, PGT and PGR) to escalate issues that may have not been resolved at School level whilst also contributing to University level change when significantly impacting on the student experience. Chairs of all Student-Staff Panels attend these meetings alongside the College Dean (Education and Students), College Education Managers, members of IT services and libraries and appropriate members of the wider University when appropriate.

The 'Student Academic Rep of the Year' at College-level has been maintained as an award at the Enriching Student Life Awards, with high calibre nominations each year. When asked would they, if able, want to continue as a Rep next year 89% of respondents said that they would, an increase of 1% on the previous year, indicating healthy levels of satisfaction with the Student Academic Rep System.

The full time VP Postgraduate position in 2015/16 facilitated the introduction of three Postgraduate Representation Forums, which resulted in Postgraduate student students having a better understanding of what support the Union could offer and as a result, feeling more supported. In contrast, attendance of UG and PGT College Forum meetings declined during the 2015/16 academic session especially in the College for Biomedical and Life Sciences.

#### **4.1.2 Action:**

- The Student Experience Sub-Committee to evaluate the training and support given to student reps highlighting any further areas of development during the 2016/17 academic session.
- The Students' Union to continue to review the Student-Staff Panel minutes to review consistent themes that feed into the quality assurance and enhancement activities outlined in 3.1;
- The Student Voice team to consider the structure, format and timetable of the Student-Staff Panels and College Forums to ensure maximum attendance at meetings.

## **4.2 Student Surveys**

**Risk assessment status:**

R	A	G
---	---	---

Feedback from students is a vital contribution to the enhancement of the student experience and the fulfilment of University strategic goals. The University acknowledges the importance of the **informed student voice** through recognition of the role of students as active partners in the academic community. As a result, the University works closely with the Students' Union. University officers, such as the Pro Vice-Chancellor (Academic Standards and Student Experience), liaise regularly with Students' Union officers and staff, and the University works together with the Students' Union on a number of projects to capture the all aspects of the 'student voice', including surveys to ensure that the student experience is maintained and enhanced where it is appropriate.

During the 2015/16 academic session, all students were asked to complete a wide range of internal and external surveys with Table 3 highlighting the range of surveys, the response rates and overall student satisfaction.

**Table 4: Key national and Cardiff University student surveys, response rate and satisfaction rates between 2011-16**

		<b>2011-2012</b>	<b>2012-2013</b>	<b>2013-2014</b>	<b>2014-2015</b>	<b>2015-2016</b>
<b>Welcome to Cardiff Survey (UG)</b>	<b>Response rate</b>	30%	30%	24%	30%	36%
	<b>No. invited</b>	5011	5011	6514	5904	6454
	<b>Overall Satisfaction</b>	85%	85%	84%	84%	91%
<b>Welcome to Cardiff Survey (PGT)</b>	<b>Response rate</b>	17%	17%	19%	24%	29%
	<b>No. invited</b>	3608	3608	4075	3797	4013
	<b>Overall Satisfaction</b>	78%	78%	82%	78%	89%
<b>Welcome to Cardiff Survey (PGR)</b>	<b>Response rate</b>	34%	33%	40%	44%	45%
	<b>No. invited</b>	406	406	411	395	419
	<b>Overall Satisfaction</b>	85%	85%	85%	89%	93%
<b>Study@Cardiff Survey</b>	<b>Response rate</b>	-	-	11%	23%	40%
	<b>No. invited</b>	-	-	6043	6329	6687
	<b>Overall Satisfaction</b>	-	-		80%	79%
<b>National Student Survey (NSS)</b>	<b>Response rate</b>	78%	80%	80%	76%	77%
	<b>No. invited</b>	4592	4592	4594	4776	4746
	<b>Overall Satisfaction</b>	89%	89%	89%	90%	87%
<b>Postgraduate Taught Experience Survey (PTES)</b>	<b>Response rate</b>	44%	38%	30%	41%	49%
	<b>No. invited</b>	4457	4478	3675	5441	5282
	<b>Overall Satisfaction</b>	80%	79%	84%	86%	86%
	<b>Response rate</b>	-	36%	43%	67%	70%

<b>Placement Learning survey</b>	<b>No. invited</b>	-	424	490	444	587
	<b>Overall Satisfaction</b>	-	93%	90%	90%	91%
<b>Study Away survey</b>	<b>Response rate</b>	-	25%	34%	53%	53%
	<b>No. invited</b>	-	182	275	248	266
	<b>Overall Satisfaction</b>	-	80%	79%	84%	83%

\*The Postgraduate Research Experience Survey (PRES) operates every other academic year, and as such did not operate during the 2015-16 session

### **Enhancements for 2016/17:**

The Pro Vice-Chancellor for Student Experience and Academic Standards has convened a cross-institutional Student Surveys Group to monitor the current volume of survey activity across the Institution to agree the appropriate level of survey activity for students and create an action plan for future survey activity. The Group will also provide the Institution with a forum through which to improve and better coordinate promotional activity, review response rates and steer the communication of outcomes.

#### **4.2.1 Undergraduate Response Rates and Overall Satisfaction**

As indicated in Table 4, at undergraduate level, the University remains above both the Welsh and sector-wide average at 87% for overall student satisfaction; however, it remains below the University's Key Performance Indicator of at least 90% overall satisfaction in NSS for every school.

#### **4.2.2 Postgraduate Taught Response Rates and Overall Satisfaction**

Table 4 also highlights that engagement from Postgraduate students was also high, with Cardiff having the sixth highest response rate of any large (>3000 PGTs) institution in the Postgraduate Taught Experience Survey (PTES), achieving a 49% response rate of the eligible students. 'The Way Forward: Education and Students' has the key performance indicators of achieving 90% satisfaction in the PTES and PRES by 2017, with current overall satisfaction performance for these two surveys standing at 86%.

### **Enhancements for 2016/17:**

The Student Engagement Team continues to work with the Students' Union and wider University to promote our internal surveys to increase their response rates. Further support and enhancement strategies are discussed during both ARE and Performance Review meetings, with each School reporting on how they have acted on Student Feedback that year.

#### **4.2.3 Feedback from Students: 2015 PRES**

The institutional question, "I find the progress monitoring useful", was recorded as a PRES lowlight at 59%. In addition, "I understand the requirements and deadlines for formal monitoring of my progress" is the only question, which has fallen by more than 1% since the 2013 PRES, having decreased by 3.8%. This question is below the Sector and Russell Group average by over 3%.

Forty-three PRES free text comments provide further insight to the Progress Monitoring Process. The comments relating to: lack of clear instruction and/or

support (n=31); the timing of progress monitoring (n=8); and SIMS (n=5). It is also possible that the transition to the implementation of SIMS to support Progress Monitoring has been a factor as students familiarised themselves with the new system.

**Enhancements for 2015/16:** Although several Schools reported that a period of adjustment was required for students and staff, most Schools stated at Annual Review that the Progress Monitoring system has now been fully implemented. It has been seen by some to increase productivity and raise awareness of training needs (WELSH, MLANG).

#### 4.2.4 Actions:

- The College Deans of Education and Students to continue to encourage Schools to reflect and take action on student feedback and periodically report updates to University Executive Board.
- The University and Students' Union to work together on a joint 'closing the feedback loop' campaign, in order to demonstrate the significant changes that are made based on student feedback.

## SECTION 5: ASSESSMENT AND FEEDBACK

### 5.1 Assessment

**Risk assessment status:**

R	A	G
---	---	---

Assessment and Feedback remains a high priority for the University, particularly given the disappointing NSS outcomes that were achieved in 2016; the number of Schools reaching the University's KPI of 80% satisfaction in this area falling from four Schools to two in 2016. Further enhancement of this area is being undertaken both through the Education Portfolio, as well as through business as usual activities. Through this work, a range of activities were undertaken in 2015/16 to support the enhancement of assessment and feedback.

Key activities completed in 2015/16 include:

- The allocation of dedicated time for Assessment and Feedback Leads in workload models (min. 150 points) to facilitate the alignment of School and University policies and practices, and lead enhancement within individual Schools;
- The establishment of College-wide networks for Assessment and Feedback Leads for staff to share and discuss ideas, issues, and examples of effective practice, and the creation of an active Yammer community for all staff;
- The development and launch of a new page on the student intranet on assessment and feedback: <https://intranet.cardiff.ac.uk/students/your-study/exams-and-assessment/getting-feedback>;
- The production of a short-animated video with the Students' Union to help make students better aware of the range of feedback they will receive. [<https://youtu.be/ky-hzTLkdQ0> (English) <https://youtu.be/1bPZXrNLril> (Welsh)];



- The award of funding to six assessment-related projects through the CEI Education Innovation Fund;
- The development of new CPD activities through the Academic Practice Programme to ensure newly appointed staff can adopt effective assessment and feedback practice (Core Unit 3) and explore the art of the possible.
- The delivery of bespoke CPD activities in a number of academic schools.

### **Enhancements for 2016–17:**

Ongoing improvement will be supported through the activities outlined below and through bespoke support activities with individual schools:

- A Student Communications campaign in November and December 2016, to raise student awareness and understanding of assessment feedback before the next NSS;
- The launch of the CEI Learning Hub, and the development of an online 'Assessment Hub' for staff, to bring together all assessment and feedback related policy and guidance into one user-friendly place;
- Improved support for Assessment and Feedback Leads to lead the strategic improvement of assessment and feedback, communication with students, and support for staff in discipline specific contexts;
- The development and approval of a revised University Policy on Assessment Design;
- Ongoing delivery of CPD for newly appointed staff through the Academic Practice programme, and a review of University-wide CPD, to ensure provision offered to staff is attractive and utilised;
- Support for innovative projects funded through the CEI Centre for Education Innovation Fund. Staff have been actively encouraged to bid for funds to support assessment and feedback related projects.

#### **5.1.1 Technology Enhanced Assessment**

A range of work was undertaken across the Education Portfolio to help improve the management of assessment and the provision of feedback to students in session 2015/16. Notable achievements include the implementation of personalised exam timetables for students in SIMS, the adoption of *Panopto*; used by a number of staff to provide video feedback to students, the piloting of software in BLS to manage OSCEs and to provide rapid feedback, and the roll-out of GradeMark across BLS.

To help identify the University's future needs in this area, an initial report was produced in February 2016 to assess current e-assessment practice across the three Colleges and suggest future requirements. Based on the outcomes from consultation from over 150 staff, the report sought to identify where we would like to be in 5 years' time, what tools would help support these plans, and what support needs to be provided. While the report summarised the outcomes from the consultation exercise, it has not yet proved possible to identify the specific software that the University might invest in, many different needs being identified and many staff focussing more on current systems rather than where they want to be in five-years time. Further work (see below) is now being undertaken to complete an audit

of the different systems used in Schools and the processes used to manage assessment within Schools.

**Key activities completed in 2015/16 include:**

- The development and implementation of personalised exam timetables for students;
- The procurement and piloting of an electronic solution to support structured clinical assessments (OSCEs, ISCEs, and MMIs) across seven Schools in BLS;
- Support for staff to use GradeMark effectively and its roll-out across all Schools within BLS;
- The adoption of *Panopto*, which is being used by a small number of staff to provide audio-visual feedback to students;
- The trialling of *Mahara*, which can be used by staff to support the assessment of portfolios;
- The production of an initial exploratory report on future Technology Enhanced Assessment needs.

**Enhancements for 2016/17**

To help the University build on the initial improvements made, and to help identify longer-term enhancement plans, a range of activities will be undertaken across the Education Portfolio, the central importance of assessment across all of the different programmes within the portfolio having been recognised.

**5.1.2 Action:**

- An audit of assessment data from across all Schools on the nature and volume of assessments and the processes used for marking and disseminating feedback;
- A review of the learning environment to enable possible future enhancements to Learning Central to be identified;
- Mark Integration – Development of a proof of concept to demonstrate how marks can be passed from GradeMark to SIMS;
- The introduction of Enhanced Transcripts / Higher Education Achievement Record (HEAR) for students.

**5.1.3** To enable the University to effectively transform the student experience of assessment and feedback, further work is currently being undertaken to develop a series of options for the future state. This will identify a number of targets and deliverables under each option and will be designed to allow fully-costed proposals to be developed for each of these. This will allow the University to determine what investment will be required in this area to achieve the significant enhancement being sought.

This will cover all areas of assessment and feedback, including:

- Effective student engagement with and use of feedback to improve learning;

- Ways of eradicating poor practice and developing staff to provide an excellent experience;
- Plans for communication with and the provision of information for students;
- The introduction of tools (online or otherwise) to enhance and improve the delivery of A&F, and;
- The processes that need to be put in place to manage A&F effectively and efficiently.

In turn this will allow a detailed business case to be developed for the aspects of enhancement that will be managed through the Assessment and Feedback project in the Student Engagement Programme. It is planned that this will be presented to the programme's Steering Group in early 2017.

## 5.2 Examination Paper Errors

**Risk assessment status:**

R	A	G
---	---	---

Since the 2013/14 academic session, Schools have routinely undertaken a review of the examination paper setting process to ensure consistent high quality papers are provided. Schools take considerable time and effort to check papers, both before and after submission to Registry with many corrections taking place prior to examinations taking place. Where errors have been found, clear procedures are in place to ensure that any disadvantage to the students is minimised and correct information provided promptly. Registry staff also ensure that Examining Boards are fully aware of the situation and consider the defect and/or irregularity at the Examining Board and the impact on any affected students.

Table 5 indicates demonstrates a consistent reduction in number of errors on exam papers across the University since 2013. In the 2015/16 academic session, an average of 3% of examination papers contained errors, which were discovered during the examination. In most cases, the errors were minor and rectified within the first half an hour of the examination. The types of errors included clarification of formula, the number of questions to be asked or the phrasing of questions.

### **Enhancements for 2016/17:**

Registry will continue to support Schools in reducing the number of errors in examination papers before examinations take place. This will be annually reviewed however as there are robust procedures in place for checking and monitoring within Schools, the risk presented is minimal therefore will not feature as an independent section in the 2016/17 Annual Quality Report unless significant issues have been reported.

**Table 5: Examination paper errors for all Colleges between 2013 to 2016**

AHSS	2013-14						2014-15						2015-16					
Dept.	No. papers	Errors before exam	Errors during exam	Total errors	% errors	% Errors during exam	No. papers	Errors before exam	Errors during exam	Total errors	% errors	% Errors during exam	No. papers	Errors before exam	Errors during exam	Total errors	% errors	% Errors during exam
CARBS	400	14	23	37	9%	6%	405	5	16	21	5%	4%	351	10	8	18	5%	2%
COMMS	17	0	0	0	0%	0%	9	0	0	0	0%	0%	3	0	1	1	33%	33%
CPLAN	23	0	1	1	4%	4%	20	0	0	0	0%	0%	19	0	1	1	5%	5%
ENCAP	76	1	2	3	4%	3%	69	0	0	0	0%	0%	78	1	0	1	1%	0%
JOMEC	13	0	1	1	8%	8%	15	0	1	1	7%	7%	18	1	1	2	11%	6%
LAWPL	183	4	4	8	4%	0%	250	1	2	3	1%	1%	203	2	4	6	3%	2%
MLANG	122	0	4	4	3%	3%	133	0	1	1	1%	1%	0	0	0	0	0%	0%
MUSIC	23	0	1	1	4%	4%	26	0	0	0	0%	0%	122	4	2	6	5%	2%
SHARE	138	0	1	1	1%	1%	159	0	0	0	0%	0%	25	0	1	1	4%	4%
SOCSI	75	2	0	2	3%	0%	72	1	2	3	4%	3%	155	1	1	2	1%	1%
WELSH	22	0	0	0	0%	0%	19	1	0	1	5%	0%	79	2	0	2	3%	0%
Totals	1092	21	37	58	5%	3%	1177	8	22	30	3%	2%	1074	21	19	40	4%	2%

BLS	2013-14						2014-15						2015-16					
Dept.	No. papers	Errors before exam	Errors during exam	Total errors	% errors	% Errors during exam	No. papers	Errors before exam	Errors during exam	Total errors	% errors	% Errors during exam	No. papers	Errors before exam	Errors during exam	Total errors	% errors	% Errors during exam
BIOSI	191	9	6	15	8%	3%	178	5	11	16	9%	6%	184	3	2	5	3%	1%
DENTL	31	1	0	1	3%	0%	31	0	0	0	0%	0%	26	1	1	2	8%	4%
HCARE	64	6	0	6	9%	0%	62	0	1	1	2%	2%	37	0	2	2	5%	5%
MEDIC	59	9	3	12	20%	5%	77	0	6	6	8%	8%	44	0	2	2	5%	5%
OPTOM	50	1	2	3	6%	4%	45	2	3	5	11%	7%	45	2	5	7	16%	11%
PHRMY	37	1	1	2	5%	3%	42	1	1	2	5%	2%	38	0	2	2	5%	5%
PSYCH	69	4	5	9	13%	0%	64	0	2	2	3%	3%	65	0	2	2	0%	3%
Totals	501	31	17	48	10%	3%	441	8	24	32	7%	5%	439	6	16	22	5%	4%

PSE	2013-14						2014-15						2015-16					
Dept.	No. papers	Errors before exam	Errors during exam	Total errors	% errors	% Errors during exam	No. papers	Errors before exam	Errors during exam	Total errors	% errors	% Errors during exam	No. papers	Errors before exam	Errors during exam	Total errors	% errors	% Errors during exam
ARCHI	6	0	0	0	0%	0%	4	0	0	0	0%	0%	0	0	0	0	0%	0%
CHEMY	77	1	4	5	6%	5%	89	1	3	4	4%	3%	92	1	6	7	8%	7%
COMSC	66	0	3	3	5%	5%	71	0	3	3	4%	4%	93	2	5	7	8%	5%
EARTH	95	3	3	6	6%	3%	97	1	2	3	3%	2%	86	0	2	2	2%	2%
ENGIN	230	5	23	28	12%	10%	248	0	16	16	6%	6%	194	5	11	16	8%	6%
MATHS	96	4	3	7	7%	3%	106	0	3	3	3%	3%	121	2	7	9	7%	6%
PHYSX	84	3	2	5	6%	2%	84	0	2	2	2%	2%	86	2	5	7	0%	6%
Totals	654	16	38	54	8%	6%	699	2	29	31	4%	4%	672	12	36	48	7%	5%

### 5.3 Academic Appeals, Unfair Practice, Fitness to Practise and Discipline Cases

Risk assessment status:

R	A	G
---	---	---

#### 5.3.1 Academic Appeals

During the 2015/16 academic session, developments in the ways that students could submit academic appeals were implemented where students receiving a transcript before 27<sup>th</sup> June 2016 have previously been able to submit an appeal by downloading an appeal form and sending the completed form by email or post to the Student Cases team.

For students receiving a transcript on or after 27 June 2016, the results transcript includes a link to SIMS and student can now appeal via SIMS. This means that an appeal can be submitted straight after results and without the need for a form to be downloaded or completed, if the student chooses.

There has been a 12% rise in the number of academic appeals submitted by students in the 2015/16 academic session which is the same percentage increase identified in the 2014/15 Annual Quality Report. Table 6 highlights that there has been a noticeable increase in appeals on the ground of arithmetical or other error, which is one of the outcomes of the new way in which an appeal can be submitted. A student is not required to provide evidence in support of an appeal on the ground of arithmetical error. In addition, there has also been a rise in students appealing on the ground of extenuating circumstances. Further analysis of the information indicates that in the majority of cases, students did not report extenuating circumstances to the School before the deadline for submitting extenuating circumstances. If students do not report extenuating circumstances until the appeal stage, they must show good reason for failing to report the circumstances to the School. It is important therefore that steps continue to be taken to ensure students are made aware of the importance of reporting extenuating circumstances before the deadline.

**Table 6: Grounds for Academic Appeals**

Grounds of Academic appeal	2012-13	2013-14	2014-15	2015-16
Not stated/applicable	12	44	42	4
ARITH	57	55	64	97
ARITH + DEF	6	16	14	17
ARITH + EXT	21	29	21	19
ARITH + EXT + DEF	14	5	22	9
DEF	26	41	56	64
EXT	231	238	245	306
EXT + DEF	26	32	48	27
DEF + EXT + SUP	1	-	-	-
EXT + SUP	-	-	-	1
SUP	-	-	-	-
DEF + EXT + PREJ + SUP	1	-	-	-

DEF + SUP	-	-	-	2
DEF + PREJ	1	-	-	-
<b>Total</b>	<b>396</b>	<b>460</b>	<b>513</b>	<b>546</b>

Note: the current Academic Appeals procedure does not allow PGR appeals on the grounds of inadequate supervision or prejudice/bias.

ARITH	Arithmetical Error
DEF	Defect or Irregularity
EXT	Extenuating Circumstances
SUP	PGR – Inadequate Supervision
PREJ	PGR – Evidence of prejudice or bias in assessment

### Enhancements for 2016/17:

The impact of the new SIMS system on numbers of appeal will be apparent during the 2016/17 academic session, when the process has been in place for a full academic year. As part of annual briefings for both Senior Academics and Chairs of Examining Boards, feedback will be requested regarding their experience of the operation of the SIMS appeals system. The feedback will be used to consider any training needs and/or changes to functionality of the system and reported in the 2016/17 Annual Quality Report.

### 5.3.2 Timescales for appeal

When the SIMS appeal system was authorised for development, it was intended that a combination of the SIMS appeals and an appointment within the Student Cases team would enable compliance with the timescales required by the Procedure, as set out in OIA guidelines. The guidelines state that all stages of an appeal, including the final review stage, must be completed within 90 days of the appeal being submitted. The SIMS appeal process has saved a significant amount of administration time on receipt of the appeal; there is no need for SIMS appeals to be logged, printed for the paper file, scanned and saved electronically - this happens automatically within the SIMS system. The SIMS system also appears to be more convenient and efficient for both the student submitting an appeal and for the School when providing its response. This should enable cases to move quicker through the appeals process, although the impact of the SIMS appeals system may not be fully apparent this academic year, as it was introduced part way through the time for submission of appeals.

Overall, 94% of cases which were submitted via SIMS were processed within the 90-day timescale. The cases which fell outside this timescale were exceptional cases in that the appeal was complex and/or had been suspended pending the outcome of a related complaint investigation. The related complaint and the complexity of the issues are reasons that the OIA will accept for cases taking longer than 90 days. The average time for dealing with the 94% cases completed in 90 days was 45 days. This is slightly less than the 47 days reported in the 2014/15 Annual Quality Report even though there was a 12% increase in caseload.

### 5.3.3 Action:

- The Student Cases Team to monitor and review the operation of the SIMS appeals system during the 2016/17 academic session identifying areas of good practice and further areas for development.

### 5.3.4 Review Requests

An additional review stage of the appeal procedure was introduced to the Academic Appeal Procedure in the 2015/16 academic session. This review stage was introduced as a result of a recommendation within the Office of the Independent Adjudicator's good practice framework. The framework requires both stages of the Procedure (appeal and review) to be completed within 90 days. Overall, 28 requests for review were submitted and processed with 16 requests disallowed by the Academic Registrar's nominee as not being within permitted grounds. One review request was withdrawn by the student and four decisions were changed by the PVC. Seven requests remain outstanding for this period. As this was a new part of the procedure for the 2015/16 academic session, there are no figures available from previous years for comparison. Following the 2016/17 academic session, trends of numbers of review requests, and numbers of successful requests can be analysed and reported.

### 5.3.5 Unfair Practice

Table 7 highlights that Unfair Practice cases between 2012 - 2016 increased in comparison to previous years; most of the growth in respect of cases being dealt with at School level. A number of Committees of Enquiry have expressed a frustration with the current range of penalties available to a Committee; the range is considered by these Committees to be too limited in its options, particularly where a Committee finds that severe extenuating circumstances have contributed to a student being brought to a Committee of Enquiry.

**Table 7: Total Number of Unfair Practice Cases between 2012 - 2016**

	2012-13	2013-14	2014-15	2015-16
	280	376	319	495
No case found	11	9	50	73

#### **Enhancement for 2016/17:**

A review of the Unfair Practice procedure will consider how the University can best define the different types of unfair practice including self-plagiarism, how cases can be investigated and concluded in a way which is timely, fair, transparent and consistent and which maintains academic standards. The review will also consider the range of penalties available at School and Committee of Enquiry investigations and consideration of how the distinction should be drawn between plagiarism, poor referencing and poor academic practice.

#### **5.3.6 Action:**

- The Student Cases Team to establish a review of the Unfair Practise Procedure and report to ASQC at the end of the 2016/17 academic session on progress. . It is anticipated that new draft regulations will then be presented for consideration during the 2017/18 Academic Session.

### 5.3.7 Fitness to Practise cases

Since the 2012/13 academic session there has been a steady increase in fitness to practise and discipline cases (Table 8 and 9). Table 8 shows a significant increase in the Fitness to Practise cases in the School of Medicine. These cases arose from one event although each was processed as an individual case to ensure fairness.

**Table 8: Number of Fitness to Practise Cases between 2012 - 2016**

<b>Fitness to Practise Cases</b>	<b>2012-13</b>	<b>2013-14</b>	<b>2014-15</b>	<b>2015-16</b>
DENTL	-	1	3	0
HCARE	9	15	16	15
LAWPL	-	-	-	0
MEDIC	1	2	4	33
OPTOM	-	-	1	0
PHRMY	-	6	4	0
SOCSI	1	1	-	0
(cases considered at University level)	(4)	(10)	(7)	
<b>Total</b>	<b>11</b>	<b>25</b>	<b>28</b>	<b>48</b>

#### **Enhancements for 2016/17:**

The Student Support Centre is establishing a review of the Fitness to Study Procedure during the 2016/17 academic session and will report in the 2017/18 session.

### 5.3.8 Discipline and Behaviour Cases

A new Student Behaviour Procedure was introduced in the 2015/16 academic session with changes to the process of investigation. The description of alleged offences remains the same so it is appropriate to make comparisons with figures from previous years; however, the new procedure provides for a wider range of sanctions available to the Academic Registrar, which may lead to only the most serious cases proceeding to a Committee. In 2015/16, 31 cases were reported, 11 cases did not proceed to an investigation (this is where e.g. the issues did not fall within the Procedure or the notifier did not provide evidence). Overall, 9 cases were completed by the Academic Registrar following receipt of an investigation report. The sanctions imposed included cautions, formal reprimands, requirement for apologies and attending a substance abuse course.

Two cases were dealt with by the Vice Chancellor who used executive power (following an investigation) to exclude students who were given an offer to study on the basis of forged documents. Nine cases remain open as the investigation has not yet concluded or because the University is awaiting the outcome of court proceedings.

**Table 9: Total number of Discipline Cases between 2012-2016**

<b>Discipline Cases*</b>	<b>2012-13</b>	<b>2013-14</b>	<b>2014-15</b>	<b>2015-16</b>
<b>Total</b>	<b>24</b>	<b>26</b>	<b>40</b>	<b>31</b>



## Enhancements for 2016/17:

There are additional amendments to the Student Behaviour Procedure to be discussed in 2016/17, including the description of the breaches of the Procedure and the process for student appeal of temporary suspension pending investigation. A working group will be established and report to ASQC on developments.

### 5.4 Postgraduate Research Monitoring

Risk assessment status:

R	A	G
---	---	---

The Research Student Progress Monitoring Procedure provides a formal system of regular reporting and evaluation, which aims to complement the supervision process. The purpose of the Procedure is to support students and staff and maximise the likelihood of timely thesis submission as it allows for the identification of practical, as well as academic obstacles to progress, and for concerns about progress to be raised, documented and addressed. Progress is monitored at regular intervals from the date of initial registration on the programme through to submission (including during any period beyond that of fee-paying registration and any resubmission period). The University recognises that differences between disciplines, types of programme and mode of study necessitate variation in the implementation of the Monitoring Procedure, but the key elements are common to all and promote a consistent approach. Compliance with this Procedure is mandatory and applies to all students registered for research degrees.

The SIMS online system was developed to support Schools in the management of progress monitoring. It was trialed in four pilot schools (SHARE, MEDIC, CHEMY and ENGIN) in 2013-14 and fully implemented across the University in 2014-15. The system enables students and supervisors to submit documentation to a central and easily accessible location. Automatic alerts are generated to prompt all parties to complete relevant tasks and advise Directors of PGR Studies of any issues that need addressing. This removes the need for Schools to maintain a separate PGR database to track monitoring.

#### 5.4.1 Feedback from Schools: ARE Data and Initial and On-going Review

Feedback on SIMS was sought in January 2015 from non-pilot Schools who had recently begun using the system to manage progress monitoring. Many of the concerns raised by Schools at this stage related to the SIMS interface and usability, as academic and administrative staff familiarised themselves with the new system; they are not necessarily reflective of their views of progress monitoring more generally. Areas for improvement were suggested and have been outlined below.

A number of positive comments on the Progress Monitoring Procedure were reported in the ARE reports submitted in November 2015 and in feedback collected from Schools throughout the year. By this stage, the implementation of SIMS was viewed by some Schools as 'largely effective' (OPTOM) and a 'significant improvement over the previous paper-based system' (CHEMY), enabling the storing of documentation in a single central location and placing Schools in a much better position to detect problems early on (LAWPL). It was seen to make the monitoring process 'more open and transparent' (MEDIC) and has proved to be 'very useful' in 'motivating students to succeed' (WELSH).

On-going issues can be divided into two distinct areas:

- General concerns about the Progress Monitoring Procedure; and
- Problems specific to the SIMS system.

Common themes reported include:

- The timing of the reporting events;
- The number of tasks required;
- A shortage of staff to support the Procedure;
- Difficulties navigating the online system;
- Problems uploading documents for review;
- Concerns over the automatic emails generated; and
- A lack of guidance on the requirements.

#### 5.4.2 Action:

- Further development work is planned by a Task and Finish group established by ASQC to address some of the problems that have arisen, including a review of the PGR Monitoring Procedure where a more comprehensive analysis can be presented in the 2016/17 Annual Quality Report.

## SECTION 6: ACADEMIC REGULATIONS

**Risk assessment status:**

R	A	G
---	---	---

The Academic Regulations provide definitive rules, policies and procedures for all academic awards and related processes of the University as approved by Senate. Changes made during the 2015/16 academic session were generally minor in nature and as such no impact assessment was undertaken. Many served to clarify, rationalise or make more consistent the style of presentation of regulations and associated guidance.

### 6.1 Review of University policies and codes of practice

Whilst the Annual Quality Report provides a holistic overview of all quality assurance and enhancement activities, it does not outline a detailed schedule of formal review of all policies and codes of practice.

#### 6.1.1 A schedule of review highlighting a standard review period for each policy and code of practice has been presented to ASQC identifying the following:

- Last date of formal review
- Proposed date of next review (a maximum of 5 years from previous review);
- Circumstances under which policies and codes of practice can be reviewed outside of the main review period.

The aim of the schedule is to respond to issues identified through the Annual Quality Report each year and routinely confirm that all processes and procedures are regularly reviewed and that enhancement activity is responsive to feedback and external requirements.

### **6.1.2 Action:**

- At the start of each academic session, an updated schedule of review will be presented to ASQC in addition to the Annual Quality Report which will allow the University to have confidence that all processes and procedures are regularly reviewed with a risk status for each area of activity identified to highlight areas of concern.

## SECTION 7: SUMMARY OF ACTIONS

The primary actions contained within the report are detailed below:

Reference	Action	Person Responsible	Risk Status
Admissions			
2.1.2	Admissions Sub Committee to report to ASQC on any updates or outcomes of the policy reviews identified for implementation in the 2018/19 admissions cycle.	Admissions Sub Committee	Amber
2.3.2	CMA Project Group to ensure the preparation of the durable medium for 2018/19 entry is brought forward to be completed ahead of the start of next cycle with up-dates and formal sign-off of the document prior to the 1st October 2017. This will allow the durable medium to be issued alongside offers from the start of the 2018/19 cycle.	CMA Project Group	Amber
2.3.2	The Assistant Director of Finance to work with the Admissions and Recruitment Group to review fee setting to ensure sign-off of fees ahead of the admissions cycle.	The Assistant Director of Finance	Amber
2.3.2	Admissions Sub-committee to submit updated admissions policies to ASQC and Senate at the end of the 2016/17 academic session	Admissions Sub-committee	Amber
Annual Review and Enhancement			
3.1.4	ASQC to commission a full review of the scope and purpose of ARE and its relationship to other quality related processes, including Periodic Review, will be undertaken, commencing in the 2016/17 Session and to be concluded by March 2018	ASQC	Green
3.1.4	The review should consider the outcomes of HEFCW consultation on the external assurance of quality required by regulated institutions and the consultation on governing body annual assurance statements related to quality;	Quality and Standards Team	Green

3.1.4	College Quality Officers and College Education Managers to facilitate regular updates on College and University level issues to inform School developments and action plans.	College Quality Officers and College Education Managers	Green
External Examining			
3.2.2	ASQC to monitor the outcomes of the consultation on the revised operating model for Quality Assessment will in Wales and the implications of any revised requirements on the training and induction of External Examiners at Cardiff.	ASQC	Green
3.2.6	ASQC to consider the issues identified the use of the full range of marks within Schools and determine if they are considered a priority within the current work stream undertaken by the Education Portfolio and the Centre for Innovation and Education.	ASQC	Green
3.2.8	The PGR Quality and Operations team to monitor the Result and Report Form and associated guidance provided to examiners in interpreting the decisions available to them following the amendment to the Regulations and advise the College Deans (PGR) to report to ASQC with reflection in the 2016/17 AQR.	The PGR Quality and Operations team	Green
Programme Approval and Policy Frameworks			
3.3.2	College Deans (Education and Students), College Education Managers and College Registrars to ensure Stage 1 Strategic Approval is appropriately enforced during the 2016/17 academic year in line with the agreed annual cycle timetable to ensure a full cycle of recruitment	College Deans (Education and Students), College Education Managers and College Registrars	Green

3.3.2	College Quality Officers to ensure agreed timelines of activity are prepared with Schools after Stage 1 Strategic Approval that aligns with the agreed annual cycle of activity timetable and identifies responsibility for each action agreed.	College Quality Officers	Green
3.3.2	College Education Officers to support College Education Managers and College Quality Officers to promote the established programme approval timelines and support the process of ensuring the swift transition between Stage 3 University Approval onto SIMS and able to be visible on Coursefinder for marketing activity within 4 weeks.	College Education Officers to support College Education Managers and College Quality Officer	Green
3.3.6	ASQC to monitor the nature and volume of approvals during the 2016/17 academic session and the impact of the introduction of the published programme approval timeline has on development activity.	ASQC	Green
Collaborative Provision Policy Framework			
3.4.1	The Collaborative Provision Sub Committee to monitor any further updates issued by HEFCW and the potential impact on current agreements with collaborative partners.	Collaborative Provision Sub-Committee	Amber
3.4.3	The Collaborative Provision Sub Committee to monitor any changes in agreement status to ensure they are accurate to be declared to HEFCW and submitted with the Fee and Access Plan each year	Collaborative Provision Sub-Committee	Amber
3.4.3	The Collaborative Provision Sub Committee to monitor the delivery of any collaborative provision activity to ensure there is appropriate educational oversight requirements for Tier 4 purposes	Collaborative Provision Sub-Committee	Amber
3.4.3	Head of Schools to monitor their Partnership Management Plan annually to ensure that the arrangements remain in line with the signed agreements.	Head of Schools	Amber

3.4.5	The Collaborative Provision Sub Committee to consider how a suitable PGR Framework could be developed to ensure that processes and procedures support the strategic development of PGR provision within the University.	Collaborative Provision Sub-Committee	Amber
3.4.5	Once established, the PGR Quality Team to provide advice and guidance on strategic developments, including associated risks and management of risk, timescales, levels of approval needed;	PGR Quality Team	Amber
3.4.5	The Collaborative Provision Sub Committee to consider any proposals brought forward from the Placement Project which impact on the Code of Practice for Placement Learning and the Taxonomy of Collaborative Provision presented in the Framework.	Collaborative Provision Sub-Committee	Amber
3.4.7	College Deans of Education and Students to provide support in ensuring appropriate Moderators are found for existing programmes and those in a 'teach out' status to ensure the quality of the student experience is maintained	College Deans of Education and Students	Amber
3.4.7	The Collaborative Provision Sub-Committee to oversee and Monitor the reports from Moderators and ensure that Moderators are appointed for programmes under review in in 2016/17 as a condition of re-approval	Collaborative Provision Sub-Committee	Amber
Periodic Review			
3.5.3	In line with action 3.1.4. the relationship between Periodic Review and ARE to be reviewed along with its relationship with other internal and any external quality assurance requirements and updates in University Strategy;	Head of Quality and Standards/College Quality Officers	Green
3.5.3	College Quality Officers to support Schools in updating their Periodic Review Action Plans incrementally before submission as part of ARE 2017.	College Quality Officers	Green

Accreditation by Professional Bodies			
3.6.1	College Quality Officers and College Education Managers will continue to finalise the audit of on-going accreditation activities and update the accreditation register to ascertain if any support is required for ongoing accreditation activity	College Quality Officers and College Education Managers	Green
3.6.1	College Quality Officers to maintain a central repository of all accreditation reports that will be published on the University webpages	College Quality Officers	Green
3.6.1	ASQC to review the scope and purpose of the accreditation sub-committee to ensure there are appropriate mechanisms for supporting and reporting on the University's accreditation activity.	ASQC	Green
<b>Section 4: Student Engagement</b>			
Student Representation			
4.1.2	The Student Experience Sub Committee to evaluate the training and support given to student reps highlighting any further areas of development during the 2016/17 academic session.	The Student Experience Sub Committee	Green
4.1.2	The Students' Union to continue to review the Student-Staff Panel minutes to review consistent themes that feed into the quality assurance and enhancement activities outlined in 3.1;	The Student Union	Green
4.1.2	The Student Voice team to consider the structure, format and timetable of the Student-Staff Panels and College Forums to ensure maximum attendance at meetings.	The Student Voice Team in the Student Union	Green
Student Surveys			
4.2.4	The College Deans of Education and Students to continue to encourage Schools to reflect and take action on student feedback and periodically report updates to University Executive Board.	The College Deans of Education and Students	Amber



4.2.4	The University and Students' Union to work together on a joint 'closing the feedback loop' campaign, in order to demonstrate the significant changes that are made based on student feedback.	Student Engagement Team	Amber
Assessment and Feedback			
5.1.2	An audit of assessment data from across all Schools on the nature and volume of assessments and the processes used for marking and disseminating feedback.	The Assessment and Feedback Group	Amber
5.1.2	A review of the learning environment to enable possible future enhancements to Learning Central to be identified.	The Assessment and Feedback Group	Amber
5.1.2	Mark Integration – Development of a proof of concept to demonstrate how marks can be passed from GradeMark to SIMS.	The Assessment and Feedback Group	Amber
5.1.2	The introduction of Enhanced Transcripts / Higher Education Achievement Record (HEAR) for students.	Registry	Amber
Academic Appeals, Unfair Practice, Fitness to Practise, and Discipline Cases			
5.3.3	The Student Cases Team to monitor and review the operation of the SIMS appeals system during the 2016/17 academic session identifying areas of good practice and further areas for development.	Student Cases	Green
5.3.6	The Student Cases Team to establish a review of the Unfair Practise Procedure and report to ASQC at the end of the 2016/17 academic session on progress. . It is anticipated that new draft regulations will then be presented for consideration during the 2017/18 Academic Session.	Student Cases	Green

Postgraduate Research Monitoring			
5.4.2	Review of the PGR Monitoring Procedure	PGR Quality and Operations Team	Amber
Academic Regulations			
6.1.2	At the start of each academic session, an updated schedule of review will be presented to ASQC in addition to the Annual Quality Report which will allow the University to have confidence that all processes and procedures are regularly reviewed with a risk status for each area of activity identified to highlight areas of concern.	Quality and Standards Team	Green