



# Quality Manual

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2020-21

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# 1 ABOUT THE QUALITY MANUAL

*The Quality Manual sets out the University's procedures for maintaining baseline quality and standards and enhancing the student experience.*

## 1.1 The Quality Manual

1.1.1 The Quality Manual at Canterbury Christ Church University provides guidance on all aspects of quality assurance and enhancement, covering both academic and professional service departments. It provides detailed guidance on:

- Student representation, engagement and partnership
- Managing the Academic Portfolio, including:
  - Course planning
  - Course development
  - Course approval
  - Course modification
  - Periodic course (and partnership) review
  - Course suspension, withdrawal or closure
- Collaborative partnerships
- Continuous improvement
- Annual professional service monitoring and Service Level Statements
- External Examiners.

## 1.2 The Regulatory Framework

1.2.1 The University has a full set of Academic Regulations approved by its Academic Board. These are set out in the Regulation and Credit Framework. The University has underlying procedures that must be followed to ensure that the University's regulations are met.

1.2.2 A number of courses require Special Regulations that extend or set aside the University's regulations, either in response to external professional and regulatory bodies or to meet other specific requirements. These must be approved by the Academic Board and have the same status as any other regulation.

## 1.3 What is Quality and Standards?

1.3.1 The term Quality and Standards covers two distinct but inter-related areas.

1.3.2 **Standards** is ensuring that the academic provision of the University meets the standards that are prescribed both by external frameworks and by the University's own commitments as an autonomous body with degree-awarding powers. The concept of threshold academic standards has been extended by the Office for Students [OfS] to include the academic standards of degree classifications. The objectives that relate to standards are as follows:

- ensure that awareness and compliance with standards is embedded across the University and the University's portfolio of courses meets the requirements of the University's framework for the delivery of standards and enables standards to be met;

- ensure that the University's academic regulations are clear, explicit, unambiguous and accessible, and support academic standards;
- operate a robust external examiner system;
- engage with external regulatory bodies, and especially the OfS as appropriate.

1.3.3 **Quality** is ensuring that students receive an excellent student experience in general and a student experience that enables a student to meet the academic standards of the University in particular. Quality is a shared activity delivered by the whole University. The partnership between QSO and Learning and Teaching Enhancement [LTE] is fundamental to the delivery of high-quality academic education. Specific objectives relate to quality are as follows:

- work with the Faculty Directors of Quality and colleagues in LTE, PAA and the Education and Students Experience Directorate to create an effective quality community;
- ensure that quality is not seen as a central activity emanating from QSO and that all colleagues are empowered to contribute to the strategic delivery of quality;
- make an appropriate contribution to the design, approval and review of the academic portfolio and its component courses, including that delivered through academic partnerships;
- ensure that partnership work is undertaken with all due diligence.

1.3.4 In pursuing the effective governance of quality and standards, the Quality and Standards Office (QSO) will:

- maintain a strategic focus on outcomes;
- ensure that quality structures enable LTE to be the main driver of high-quality academic education;
- seek to deliver the continuous improvement of student outcomes and the elimination of any critical attainment gaps;
- enable staff to focus on outcomes when they design and review the academic portfolio;
- ensure processes are fit-for-purposes and designed to enable staff to maximise the time they spend on student learning.

#### 1.4 Academic Framework for the Design and Delivery of University Awards

1.4.1 The University's *Academic Framework for the Design and Delivery of University Awards* articulates the structures in place for the operation of the University's awards. It sets out the requirements and attributes for the design and deliver of University awards with which all courses must comply.

#### 1.5 Governance of Quality and Standards

1.5.1 It is the role of the Academic Board to plan the University's academic activities including the structure, nature and content of study courses, schemes and academic infrastructure. The Academic Board retains overall responsibility for the standards of the University's awards and the quality of its courses and determines where authority lies and which categories of people are involved regarding the maintenance of standards and the management and enhancement of the quality of the student experience.

1.5.2 The Education and Student Experience Committee has oversight of and is responsible for assuring the Academic Board that standards are being maintained and the quality of the student experience is being managed and enhanced.

1.5.3 The Quality Monitoring and Review Sub Committee is responsible for keeping the University's academic infrastructure under review and making appropriate recommendations for modification which, following consideration by the Education and Student Experience Committee, will be considered for approval by the Academic Board.

#### 1.6 A continuous improvement approach

1.6.1 The Academic Board, through its Education and Student Experience Committee, oversees the continuous improvement approach to quality and standards. This includes the monitoring and evaluation of key elements of quality management, including:

- continuous monitoring of courses through continuous course improvement plans (CCIP);
- an annual summary report on the conduct of quality matters where authority is delegated to Faculties;
- the annual quality monitoring of professional service departments;
- an annual report on the External Examiner system;
- regular review of key aspects of the quality assurance system, including the operation of:
  - University Regulations;
  - the Course Planning Process;
  - the Course Approval Process;
  - Collaborative Provision;
  - the Periodic Course Review process;
  - research courses;
  - complaints and appeals procedures.

1.6.2 The University's approach to the annual monitoring of courses is one of continuous improvement. This shifts the process of course development from one of static, once a year planning, to one which constantly evaluates, reflects and makes improvements in light of course performance and feedback from both students and staff throughout the academic year and course approval cycle. Monitoring takes place through regular Board of Study meetings.

1.6.3 Evaluation of activities is integrated and reported to the Academic Board through a number of mechanisms, including an Annual Report to Academic Board and the Governing Body on the *Maintenance of Academic Standards and the Management and Enhancement of the Quality of the Student Learning Experience*.

## 2 STUDENT REPRESENTATION, ENGAGEMENT AND PARTNERSHIP

*The University is committed to ensuring that students have the opportunity to contribute to and shape their learning experience, individually, collectively and through the Students' Union.*

*In this chapter, you will find descriptions of student representative roles, training, election and liaison meeting requirements, student representation at University committees and boards and requirements for student course and module handbooks.*

### 2.1 Principles

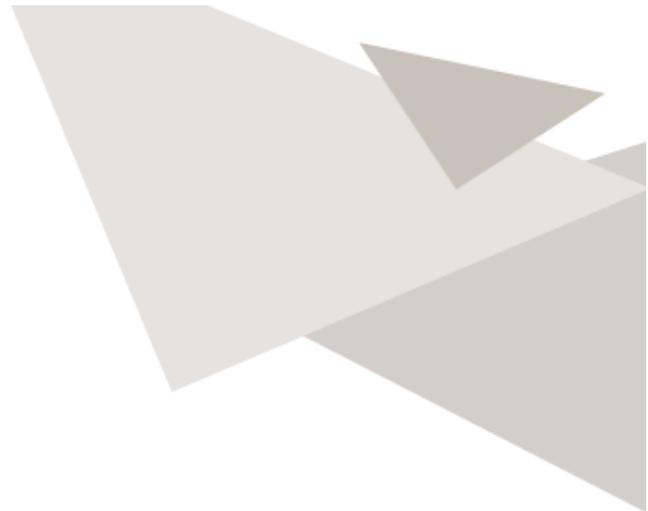
2.1.1 The University is committed to ensuring that students are provided with the opportunity to contribute to the shaping of their learning experience, individually, collectively and through the Students' Union. One of the principles of the University's Learning & Teaching Strategy, 2015-22 is to work with students as partners:

**"We recognise that student representation, engagement and partnership have important roles in improving the student experience and delivering an excellent education and outcomes."**

2.1.2 The role of student representative is vital to assure a high-quality student experience and to support student retention and success. The following principles provide the framework for student representation within the management of the learning experience.

- (i) Student participation and partnership is an essential core component in the design, delivery, review and enhancement of a high-quality educational provision.
- (ii) There must be student engagement and representation on all University Academic Board committees and sub-committees, key Faculty committees and in all aspects of course management.
- (iii) Student engagement in reviewing the learning experience is a key aspect of the normal operation of the University; it should enable student involvement in the proactive decision-making processes that underpin their educational experience both within their course of study and across the wider University.
- (iv) The diverse nature of the student population requires that innovative and flexible approaches are adopted in order to overcome the barriers to participation such as mode or location of study.
- (v) Students and staff are provided with sufficient information, background knowledge, training and on-going support to enable them to work together as full partners in the production of a high-quality student experience.
- (vi) A successful student representation policy recognises that students must be made aware of the outcomes of their involvement in the quality assurance process.
- (vii) The operation of student representation will be monitored by partnership between the Quality Standards Office and the Students' Union in order to ensure that students are enabled to make an effective contribution to the provision and enhancement of a high-quality educational experience.

## 2.2 Student Partnership Agreement



Our shared mission is to pursue excellence in higher education: transforming individuals, creating knowledge, enriching communities and building a sustainable future. This Partnership Agreement is part of this vision and was developed in equal partnership between Canterbury Christ Church University, Christ Church Students' Union and students.

### WE VALUE

- The development of the whole person, respecting and nurturing the inherent dignity and potential of each individual
- The integration of excellent teaching, research and knowledge exchange
- The celebration of being a part of a community which recognises the power of higher education to enrich individuals
- Our friendly, inclusive and professional community of students and staff, preparing individuals to contribute to a just and sustainable future.

### THE UNIVERSITY

To this end the University undertakes to provide students with:

- A high quality, holistic student experience and opportunities in relation to learning and the wider experience of university
- Access to appropriate support, information, advice and guidance on all aspects of studying, living and working before, during and after their programme.

### STUDENTS

To this end students undertake to:

- Be proud ambassadors for the University and the Students' Union and represent them in a manner that best promotes their respective reputations
- Take responsibility for managing their own learning: actively engaging in their programme and supporting their student representatives to help create meaningful dialogue and impactful change.

### THE STUDENTS' UNION

To this end the Students' Union undertake to:

- Represent the interests of students at the University at local and national levels, and champion student representation
- Provide independent advice on academic issues
- Provide a wide range of services and opportunities to support active student and community engagement.

## **2.3 Student Representatives**

### **Introduction**

2.3.1 There will be four strands of elected student representatives:

- Course (formerly Programme) Representatives;
- School Representatives;
- Faculty Representatives;
- University Representatives.

2.3.2 All representatives will be elected through a transparent and independent democratic process. All students in the cohort to be represented will be eligible to nominate and elect their representatives and to stand for election.

2.3.3 The purpose of all student representatives is to act as a voice for the students, providing feedback to the University and Christ Church Students' Union on key issues which affect the student experience and to work proactively to develop and enhance the wider University experience. The system will be most effective when student representatives communicate regularly with the cohort being spoken for.

2.3.4 The Students' Union has a key role in the training and supporting of student representatives, working across the University to provide administrative support, expert advice and to facilitate the creation of a network of representatives.

2.3.5 The names and contact details of all student representatives will be held by the Students' Union and by the University's Quality and Standards Office, and will be publicised to the student body via the virtual learning environment and any other suitable medium. The Students' Union and the Student Communication Unit will support this activity.

2.3.6 Student representation is to be approved as an item for inclusion in section 6.1 of the HEAR and student representation is a suitable volunteering activity for progression through the Christ Church Extra Award.

## **2.4 Course Representatives**

2.4.1 Both undergraduate and taught postgraduate courses will have Course Representatives. There will be one or more Course Representatives(s) for each level of a course. Course Student Representatives will represent students and act as their voice on a course. Activities will include taking part in Staff-Student Liaison Meetings (SSLM) and other course meetings. Course Student Representatives will be expected to Chair SSLMs on a regular basis.

2.4.2 The number of Course Representatives will be determined by the number of students at each course level. There will be a minimum of one Course Representative for every 40 students for each level of a course, irrespective of whether it is a full-time and part-time course.

2.4.3 Elections will normally be held towards the start of each level of a course. The Students' Union will identify and publicise a two-week period during which the elections will take place. Off-site students would be given a longer time in which to vote.

2.4.4 Prior to the elections and training of Course Representatives, no course should hold an SSLM or any other meeting requiring student representation.

2.4.5 There is no limit to the number of times that a student may serve as a Course Representative.

2.4.6 The name, position and current institution of each External Examiner will be communicated to all students through inclusion in the Student Course Handbook and published via the virtual learning environment.

2.4.7 External Examiners' reports must be shared with Course Representatives, through Student-Staff Liaison Meetings and any other mechanism deemed appropriate by the School/Centre. Course Representatives and other students should be included in discussions during the formulation of the

course team's response to External Examiners' reports. The reports and the responses must also be available via the virtual learning environment.

- 2.4.8 Course Representatives must be involved in discussions during Boards of Study and participate in the creation of reports and responses to External Examiners' reports

## **2.5 School Representatives**

- 2.5.1 There will, as far as the student population of a school allows, be one undergraduate and one taught postgraduate Student Representative for each School, who will normally represent the School on the Faculty Quality Committee and the Faculty Learning, Teaching and Assessment Committee. The Chair of the Committees will ensure that both undergraduate and taught postgraduate population are represented. These School Representatives and such additional representatives as required, to ensure that School Representatives are not over-burdened, will sit on relevant School Committee and/or working groups.
- 2.5.2 School Representatives will normally be elected from Course Representatives with existing experience of the role or from students who have participated in a form of academic quality assurance, for example, as members of University Approval panels. Any student is, however, eligible to take on the role of School Representative.
- 2.5.3 School Representatives can be serving concurrently as Course Representatives.
- 2.5.4 Separate arrangements will be made for the representation of postgraduate research students through the Graduate College and the Postgraduate Research Association.
- 2.5.5 School Representatives should co-ordinate communication and meetings between the Course Representatives within the School and create a supportive network.

## **2.6 Faculty Representatives**

- 2.6.1 There will be Faculty Representatives elected as are required to enable students to sit on each Faculty Board and to represent the Faculty on those University Committees and Working Groups which require Faculty representation. This will include one undergraduate and one taught postgraduate representative on each Faculty Board. Separate arrangements will be made for the representation of postgraduate research students through the Graduate College and the Postgraduate Research Association.
- 2.6.2 Faculty Representatives will normally be elected from Course and School Representatives with existing experience of the role or from students who have participated in a form of academic quality assurance, for example, as members of University Approval panels. Any student is, however, eligible to take on the role of Faculty Representative.
- 2.6.3 Faculty Representatives can be serving concurrently as Course and/or School Representatives.
- 2.6.4 Faculty Representatives should co-ordinate communication and meetings between the School Representatives within the Faculty and create a supportive network.

## **2.7 University Representatives**

- 2.7.1 Students are represented on a number of University Committees and Working Groups by Students' Union Sabbatical Officers. Where additional student representation is required, and is not provided by Faculty Representatives, additional representatives will be directly elected.
- 2.7.2 University Representatives will normally be elected from Course and School Representatives with existing experience of the role or from students who have participated in a form of academic quality assurance, for example, as members of University Approval panels. Any student is, however, eligible to take on the role of Faculty Representative.
- 2.7.3 University Representatives can be serving concurrently as Course, and/or School and/or Faculty Representatives.

## **2.8 Election of Student Representatives**

- 2.8.1 All representatives will be elected through a transparent and independent democratic process. All students in the cohort to be represented will be eligible to nominate and elect their representatives and to stand for election. The election process will be on-line and will be organised and run by the Students' Union.
- 2.8.2 Deans, Heads of School, Course Directors or Committee Chairs are responsible for providing the Students' Union with the terms of reference of those committees on which student representation is desirable and/or essential. The Students' Union will publicise the opportunity and request nominations.
- 2.8.3 All eligible students can volunteer for those committees whose remit is of interest to them e.g. equality & diversity, widening participation. The Students' Union may also be provided with nominations by the person requesting representation.
- 2.8.4 The Students' Union will set up the electronic election process and inform the relevant student cohort. Even if there is only one nomination an election will still be held with an option for students to vote RON (re-open nominations.)
- 2.8.5 All students will be invited to stand for election as School or Faculty Representatives. There will be a minimum of 10 School Representatives and 3 Faculty Representatives.

## **2.9 Training of Student Representatives**

- 2.9.1 Training for all student representatives will be undertaken by the Students' Union in partnership with the University. Training will be offered throughout the academic year in a timely manner and dates will be disseminated in appropriate and varied ways through the Students Union and the Student Communications Unit.
- 2.9.2 Online training is available for off-site students and those who are unable to attend. Before undertaking any representation role, the student should complete the training either in person or online.
- 2.9.3 Training will include guidance on Chairing Meetings and the development of Chairing Skills plus guidance on what is considered a general concern and how an individual student issue should be handled.
- 2.9.4 Training by the Students' Union will take place regularly so these representatives will be ready to take up their positions in the following academic year.

## **2.10 Guidelines for Meetings Involving Student Representation**

- 2.10.1 All student representatives should be informed of the agenda and provided with all relevant papers for each meeting that they attend. This must normally be done at least one week before the meeting and with sufficient time to allow consultation with the student body where required. The Chair is responsible for ensuring that the student representatives are given the opportunity for briefing before a meeting.
- 2.10.2 The meeting dates and times must be published at the beginning of the academic year and the first meeting must not take place before there has been an opportunity for the student representatives to have undertaken training.
- 2.10.3 Where a student is required to travel to another campus to attend a meeting, travel expenses should be paid for a journey over and above their usual commute to University.
- 2.10.4 Student representatives should be enabled to contribute to the agenda or a meeting where appropriate.
- 2.10.5 Anonymity is maintained at all times.
- 2.10.6 Student representatives must not be required to take the meeting notes under any circumstances.

2.10.7 The Chair of a committee is responsible for ensuring that appropriate policies and procedures are made available to student representatives. These should include relevant details of University and School/Centre structures, details of roles, policies and procedures relating to the business of the committee.

## 2.11 Governance of the Student Representation System

2.11.1 A review of the system of student representation, including Student Course, School, Faculty and University Representatives, will be undertaken annually by the Students' Union and University in partnership. This will include gathering data regarding student representative attendance at meetings and feedback from all student representatives as well as from Course Directors, Heads of School, Deans and Chairs of University committees.

2.11.2 The Students' Union will also provide the opportunity for students to provide feedback throughout the year and the Students' Union and University will work in partnership to resolve any issues as they arise.

2.11.3 The University will seek to ensure that student representation meets the requirements of statutory bodies.

2.11.4 The figures below set out the requirements for student representation on institutional and Faculty committees. This is not intended to be an exhaustive list of the many possible types of student engagement in aspects of quality monitoring and review.

**Figure 2.1 Student Representatives Required for Institutional Committees**

Committee	SU Sabbatical Officer Requirements	Student Requirements
Academic Board	SU President SU President (Wellbeing)	None
Academic Strategy Committee	None	None
Education and Student Experience Committee	SU President	1 student representative from each Faculty
Research & Enterprise Integrity Committee	None	1 postgraduate research student
Enterprise and Engagement Board	None	1 student member
Learning, Teaching and Assessment Working Group	SU President	1 student from each Faculty
Collaborative Provision Sub-Committee	SU President (Development)	None
Professional Services Quality Committee	SU President	None
Quality Monitoring & Review Sub-Committee	SU President	1 student representative from each Faculty
Research Degrees Sub-Committee	None	2 postgraduate research students (representatives of the Postgraduate Research Association)
Research Quality Enhancement and Excellence Group	None	None

**Figure 2.2 Student Representatives Required for Faculty Committees**

<b>Committee</b>	<b>SU Requirements</b>	<b>Student Requirements</b>
Faculty Board	None	At least two students (taken from areas of study determined by the Faculty Board)
Faculty Quality Committee	None	A student representative from each school and centre
Faculty Learning, Teaching and Assessment Committee	None	A student representative from each school and centre
Faculty Research and Enterprise Committee	None	1 Postgraduate research student
Faculty Ethics Panel	None	1 Postgraduate research student

## **2.12 Student-Staff Liaison Meetings**

### **Introduction**

2.12.1 Student-Staff Liaison Meetings play an integral role in the University's approach to student engagement in academic governance. This policy has been drawn up in consultation with Course Representatives and with the Students' Union and represents the minimum standard that is required from each course. Courses may implement this guidance as appropriate to their needs and structure and are encouraged to develop the role of Course Representatives beyond this minimum standard. It should be noted that Student-Staff Liaison Meetings should not be seen as the only way through which students should be engaged. The student body should be consulted proactively on key course developments. It is the responsibility of the Head of School to ensure that the minimum standards are met.

2.12.2 Student-Staff Liaison Meetings are a forum for the active partnership between course staff and Course Representatives. Students should participate in:

- informing and enhancing teaching, learning, assessment and content of course modules, through both formal and informal channels;
- providing advice from the student perspective with regards to course planning and development;
- providing feedback on the availability, sufficiency and appropriateness of learning resources;
- informing and where appropriate improving the organisation and management of the course;
- facilitating a fair and equal University experience for the diverse members of the student population;
- providing a written or verbal report on student views to all appropriate committees.
- providing feedback to the student body with regard to the meetings and the issues discussed

### **Composition of Staff-Student Liaison Meetings**

2.12.3 There must be a Student-Staff Liaison Meeting (SSLM) to cover each course (or group of courses). These should be held a minimum of one per semester, to enable continuous consultation and feedback.

2.12.4 Student-Staff Liaison Meeting should comprise

- (i) all Course Representatives for the Course;
- (ii) the Course Director;
- (iii) sufficient members of the academic staff as determined by the Head of School in consultation with the Course Director to enable the meeting to be effective.

2.12.5 Whilst the Student-Staff Liaison meeting will determine who should act in the role of chair, it is expected that this shall be a Course Representative.

2.12.6 If a Course Representative is unable to attend a SSLM due to being off-campus an alternative method, such as a live-stream should be found to ensure inclusion.

#### **Timing of Staff-Student Liaison Meetings**

2.12.7 It is the responsibility of the Course Director to set the meetings in a timely manner and circulate the details to all relevant Course Representatives. The meeting dates, times and locations must be published in the Student Course Handbook.

2.12.8 The first SSLM should not take place before the elections and opportunity for training of Course Representatives has taken place.

2.12.9 Student-Staff Liaison Meeting dates, agendas, minutes and action points should be made available to Course Representatives via the course Virtual Learning Environment and/or any other suitable medium.

2.12.10 Student-Staff Liaison Meetings should normally be held in the location that the course is delivered. Where a student is required to travel to another campus to attend a Student-Staff Liaison meeting, travel expenses should be paid for journeys over and above their usual commute to University.

#### **Conduct of Meetings**

2.12.11 Student-Staff Liaison Meetings are mechanisms for discussing matters relating to courses and course delivery; Student-Staff Liaison Meetings should be used to discuss matters of general concern not particular matters relating to individual students.

2.12.12 Staff and Course Representatives should be able to contribute to the agenda making sure there is plenty of time to discuss all issues.

2.12.13 Course Representatives and staff should not discuss students or staff by name during the meeting, making sure confidentiality is kept at all times.

2.12.14 Notes of the meeting will be taken by a person provided by the School/Centre and circulated to all parties to check the accuracy. Notes should be approved by the next meeting and actions confirmed. Under no circumstances should Course Representatives be asked to take the notes.

#### **Business of Meetings**

2.12.15 In order for Student-Staff Liaison Meetings to be effective their business should include

- External Examiner reports and the response made by the School/Centre; these should also be made available to the wider student body via the virtual learning environment.
- summary reports on course and/or module evaluation data.
- analysis of relevant Student Survey data.

2.12.16 Heads of School/Centre are responsible for ensuring that appropriate School/Centre and University policies and procedures are made available to Course Representatives. These should include relevant details of University and School/Centre structures, details of the role of the Course Director and policies and procedures relating to student matters and quality processes. This information should also be available through course handbooks.

2.12.17 Course Directors should timetable feedback to the student body from Student-Staff Liaison Meetings to occur as part of the teaching week.

### **2.13 Other matters**

2.13.1 Students should be informed how the feedback will be given, such as through the Virtual Learning Environment. Time should be set aside to enable feedback from Student-Staff Liaison meetings to be given to students where dissemination is to occur as part of the teaching week.

- 2.13.2 Where a student must travel to another campus to attend a Student-Staff Liaison meeting, travel expenses should be paid to those Student Course Representatives having to travel over and above their usual commute to University.

## **2.14 Student Handbooks**

- 2.14.1 The student handbook templates help to ensure that students have essential and consistent information about their course of study and modules and are aware of sources of further information, advice and support. The required University templates for student handbooks can be downloaded from <https://www.canterbury.ac.uk/quality-and-standards-office/regulations-policies-and-procedures/student-handbook.aspx>.

### **Student Course Handbook**

- 2.14.2 Students should be provided with one course handbook only, using the above template, for each course of study. Separate handbooks may be provided for modules and placements.

### **Student Course Handbook (Collaborative Provision)**

- 2.14.3 The Student Course Handbook (Collaborative Provision) is a slightly adapted version of the Student Course Handbook for use by collaborative partners. It maintains the need for consistent information while recognising that there are some inevitable differences in the information provided to our students studying with a collaborative partner. It ensures that students are also provided with information regarding the local delivery arrangements.

### **Module Handbooks**

- 2.14.4 This handbook is to be given to students at the beginning of each module. It is intended to cover all the essential information that students are entitled to know at the beginning of a module. It should be published by module leader/course administrator under the "Module Information" tab on each module Blackboard. It is important that the University moves towards a unified template so that all students, including those studying combined honours, receive equitable information.

- 2.14.5 With regard to the implementation of Module Handbooks in academic year 2020-21, the following arrangements should be followed:

- (i) if you have already developed a module handbook or equivalent for 2020/21 then, providing you have covered all the information set out in the template, you can continue to use your existing format for 2020/21;
- (ii) if you have not yet developed a module handbook or equivalent for 2020/21, please use the Module Handbook template;
- (iii) all modules will be required to use the Module Handbook template from 2021/22 academic year.

### **Initial Approval of Handbooks**

- 2.14.6 For new courses, student course handbooks are to be presented to the course approval event for approval. The panel may set conditions and recommendations relating to the student course handbook.
- 2.14.7 For new collaborative partnerships, the partner approval event must be provided with the student course handbook (collaborative partners). The panel may set conditions and recommendations relating to this.

### **Ongoing Approval of Handbooks**

- 2.14.8 All handbooks should be reviewed prior to each new cohort to ensure they remain fit-for-purpose. Where amendments are made to handbooks, the revised version of the handbook requires approval by the Head of School or their nominee prior to issue to students.
- 2.14.9 The introduction of Boards of Study in 2020 provides a single location for the annual sign-off of handbooks by Heads of School. All completed handbooks should be provided to the Board of Study. Recognising challenging circumstances, 2020/21 will be a transition year in terms of this change in practice.

#### **Ongoing Approval of Handbooks (Collaborative Provision)**

- 2.14.10 For Validated provision handbooks should be drafted by the Partner Course Director, who should liaise with the Academic Link Tutor (CCCU) during drafting, and submitted to the Board of Study for approval. A copy should be provided to relevant CCCU partnership office (IPAD / UK Partnerships).
- 2.14.11 For Franchised provision handbooks should be adapted from the in-house student course handbook by the Partner Course Director, localised text checked by the Academic Link Tutor (CCCU), and submitted to Board of Study for approval. A copy should be provided to relevant CCCU partnership office (IPAD / UK Partnerships).
- 2.14.12 For Transnational provision handbooks should be drafted by the Partner Course Director, checked by the Academic Link Tutor (CCCU), checked by the Senior Academic Link Tutor (CCCU), submitted to Board of Study for approval. The SALT (CCCU) should ensure continuity between courses within a partner/jurisdiction and mediate with the relevant Boards of Study to ensure consistency (the SALT may take advice from a bilingual Academic Link Tutor when in a language other than English). Student course handbooks for TNE partners will be saved on each TNE partners Teams site.

### 3

## MANAGING YOUR ACADEMIC PORTFOLIO

*Managing your academic portfolio covers course planning, development, approval, periodic course (and partnership) review and course suspension, withdrawal or closure.*

- 3.1.1 The processes for managing your academic portfolio were substantively reviewed in 2019-20. This chapter is currently being reviewed to reflect the new processes in place from 2020-21.
- 3.1.2 For information on the processes for design, development, approval and review of courses, together with what to do when changing the status of a course, visit the Managing Your Academic Portfolio webpages:  
<https://www.canterbury.ac.uk/quality-and-standards-office/management-of-the-academic-portfolio/management-of-your-academic-portfolio.aspx>
- 3.1.3 For suspension, withdrawal or closure of a course, see Chapter 7.

## 4 MAKING CHANGES TO COURSES

*Changes to courses are needed to keep module syllabus up to date, enhance the curriculum, promote innovation and further embed the University learning and teaching strategy.*

*An approved course is a form of contract between multiple stakeholders, approved to provide a particular academic experience appropriate to the subject, students, and sector's expectations. Consequently, when a course team needs or wants to make changes, there is a formal process.*

*This chapter covers the areas you will need to consider when applying for a course modification. It sets out the process to follow for each modification type, and the requirements for consulting with students and/or informing applicants.*

### Course Modification

A note on terminology: the term 'course' rather than 'programme' is used throughout this section to reflect the change in terminology being implemented from September 2021.

#### 4.1 Purpose of Modification

4.1.1 Modification is necessary to keep module syllabus up to date, enhance the curriculum to promote innovation and to further embed university learning and teaching strategy, for example introducing an employability strand, creating an international opportunity. In addition, modification provides an opportunity in the early part of a newly validated course to correct or make adjustments based on student evaluation, academic reflection or recommendations from an external stakeholder such as the External Examiner or Professional Statutory or Regulatory Body (PSRB).

4.1.2 A validated course is a form of contract between multiple stakeholders whereby a course has been approved to provide a particular academic experience appropriate to the subject, students, and sector's expectations and the course team has undertaken responsibility to deliver and maintain that. Therefore, when a course team needs or wants to make changes, there is a formal process attached to making changes. This process assures all parties that the changes are made in the best interests of the students and/or staff involved in the course, that the course remains a high quality experience, that it remains in line with sector expectations (academic, cultural, as well as regulatory and professional, where necessary) and that where a change may constitute a significant change to the student experience, that the appropriate measures to conform with the Competition and Markets Authority (CMA) have been or will be put in place to avoid legal challenge.

#### 4.2 Responsibility for Modification

4.2.1 It is the responsibility of a Course Director to use the modification process as part of a cycle of continuous improvement linked to the Continuous Improvement process. It is the responsibility of the Faculty Quality Committee to ensure that the changes will not constitute a risk to the student or institution in terms of the above considerations. It is the responsibility of the Course Director to assure the Faculty Quality Committee that the proposed changes will improve the student and or staff experience and that potential risks have been identified and where

unavoidable, that measures will be put in place to manage risk in line with the University's Change Policy <https://www.canterbury.ac.uk/quality-and-standards-office/management-of-the-academic-portfolio/programme-modification.aspx>

- 4.2.2 The formal process ensures that all changes are recorded and provide a transparent history of the course's evolution. When modifications can clearly demonstrate improvement to the student outcomes and experience, this feeds in to institutional quality reviews and to the Teaching Excellence Framework (TEF) submission. In this regard, the management of modifications by the Faculty Quality Committee should be seen as a service to the institution and to individual courses, rather than an exercise in compliance.

### 4.3 Types of Modifications

- 4.3.1 Modifications fall into three categories – Major Modification, Minor Modification and Routine Updating.

- 4.3.2 Major Modification, where significant changes are being proposed, including:

- Changes to the course aims and/or intended learning outcomes of a course (which may or may not involve a change to the course title);
- Introduction of a new pathway / route (single honours / combined honours);
- Modifications to courses at level 8 and level 7 research degrees;
- Introduction of an additional mode of study;
- Changes to the course duration;
- The introduction of delivery of the course at an additional University campus;
- Addition of a Foundation Year (where the major modification is to the Foundation Year with implications for the relevant degree award(s));
- Introduction of a placement component where the placement sits outside of the existing credits of the course and is a required component to be successful in achieving the course award title.

Additionally the Chairs of the Academic Strategy Committee, the Quality Monitoring & Review Sub-Committee and/or the Faculty Quality Committee (or the Faculty Modification Panel acting on behalf of the Faculty Quality Committee) may determine that the modifications being proposed to a course are sufficiently extensive to require major modification. This may relate to modifications presented as a single package or as a result of a cumulative effect of modifications made.

- 4.3.3 Minor Modification, where changes are being proposed that do not fall into one of the other categories, including:

#### Type 1

- Replacement of a compulsory module, where this can be mapped to the existing stage and course learning outcomes;
- Addition, removal or allocation to a different level of a compulsory module (includes an option module becoming a compulsory module);
- Change to module credit rating of either a compulsory or option module;
- Change to module aims and/or learning outcomes of a compulsory module;
- Change to indicative module content of a compulsory module (other than routine updating);
- Change to the course Special Regulations;
- Addition of a 20 credit placement module.

#### Type 2

- Change to module title;
- Change to module indicative assessment (includes change to mode, weighting and word count / duration);
- Addition, removal or allocation to a different level of an option module;
- Addition or removal of pre-requisites / co-requisites;

- Change to module learning and teaching strategy (may or may not include a change to module duration hours);
- Change to indicative module content of an option module;
- Change to module aims and/or learning outcomes of an option module;
- Change to the semester in which a module will be delivered;
- Addition of new entry points for the course;
- Change to timetabling band for a General Modular Scheme course;
- Change to the course specification not covered elsewhere.

4.3.4 Routine Updating, where an approval process does not need to be followed, including:

- Change to Module Indicative Resources;
- Change to Academic Responsibility at either the module or course level.

4.3.5 Separate processes exist if the sole change is to modify the course / pathway title and for course suspension / withdrawal / closure.

4.3.6 The general principle with regard to all modifications is that they will apply to the next entering cohort and not for any current students. However there are sometimes circumstances when modifications do need to be made affecting current students and prospective students once the admissions cycle has begun. The University has approved a Change Policy to cover circumstances where it is necessary to make a change in the running of an existing course. This can be read in full at: <https://www.canterbury.ac.uk/quality-and-standards-office/management-of-the-academic-portfolio/programme-modification.aspx>. In such circumstances, consideration should also be given as to whether there are any students currently on an interruption. Where this is the case, appropriate arrangements must be put in place to communicate with them regarding the modifications.

#### 4.4 Approval Process for Major Modifications

4.4.1 For a major modification, the University's course approval procedure should be followed as set out in the Quality Manual, except that:

- In-Principle approval is not required unless there are resource implications and/or a change to the course title is being proposed as part of the changes;
- Detailed course planning form is not required unless there are resource implications;
- The documentation requirements will comprise of the following:
  - Rationale document outlining the modifications proposed for consideration by the Major Modifications Panel and the rationale for them;
  - Current course specification
  - Draft revised course specification (including the required appendices) with the proposed changes clearly identified;
  - Revised course student handbook;
  - Evidence of student consultation;
  - Blended / distance learning materials (where relevant);
  - Detailed course planning form (where required);
  - the names of the stakeholders attending the event.

4.4.2 The remit of the Major Modification Panel will be to consider the proposed modifications only. Prior to submission the course documentation should be reviewed to ensure it continues to align to the current University regulations. It will not be a requirement for other aspects of the course to be modified to reflect changes to University strategy and policy unless they directly relate to the proposed major modification. The Major Modification Panel may however make recommendations regarding aspects of the course that are not

part of the proposed modifications that will need to be taken into consideration when reviewing the course prior to the next scheduled Periodic Course Review.

- 4.4.3 As a Major Modification Panel will only consider the proposed modifications to the course, it will not constitute a course re-approval. A Periodic Course (and Partnership) Review will need to be undertaken in the sixth year of operation of the course as set out in Section 10 of the Quality Manual.

#### **4.5 Approval Process for Minor Modifications**

- 4.5.1 Minor modifications are a matter for consideration and approval by the appropriate Faculty Quality Committee, following recommendation by the Faculty Course Modification Panel.
- 4.5.2 The membership of the Faculty Course Modification Panel will be approved by the Faculty Quality Committee but as a minimum should comprise of the Faculty Director of Quality (Chair), Faculty Director of Learning and Teaching, at least one senior academic (normally a Head of School, Subject Director or equivalent) and at least one student representative.
- 4.5.3 The general principle is that modifications will apply to new students only. Where it is deemed necessary to modify a course for existing students and for incoming students minor modifications must normally have been considered by the Faculty Quality Committee at least 6 months prior to commencement of the stage / level of the course to which the modification applies, unless there are exceptional circumstances. Individual courses should however consider key course / scheme dates such as module option choice dates when considering timelines for approval of minor modifications as these may require modifications to be submitted for approval at an earlier point in time.
- 4.5.5 In consultation with the Faculty Director of Learning and Teaching and Faculty Director of Quality, the Course Director must complete Section A of the Modifications Proposal Form along with Appendix 1 (Course Modifications Log). The form should be signed by the Head of School and submitted for consideration by the Faculty Course Modification Panel.
- 4.5.6 Where a module is a validated part of more than one course, the Course Director for the parent course must agree the proposed change with its counterparts. A modification to all courses will be necessary, and this may require a modification by another Faculty. If systematic change cannot be agreed, an additional module(s) will be created and a new module code(s) will be required.
- 4.5.7 The role of the Faculty Course Modification Panel will be as follows:
- (i) To consider the proposed modification(s) in light of any previous modification(s) made to the course(s) concerned since the course approval event / last Periodic Course Review and either confirm that the proposal can be considered under the Approval Process for Minor Modifications, a Course Modification Review Exercise is required or refer for consideration as a Major Modification;

Where it is identified that the proposed modification(s) can be considered under the Approval Process for Minor Modifications, the role of the Faculty Course Modification Panel will also be as follows:

- (ii) To identify any aspects of the proposal that require amendment / further review prior to consideration by the Faculty Quality Committee;
- (iii) To confirm the appropriateness of the mechanisms set out for student consultation to support the proposed modification or identify an alternative student consultation process

and request that this be undertaken prior to submission of the proposed modification to the Faculty Quality Committee;

- (iv) To confirm that the proposed modification can proceed for consultation with the External Examiner (except in the case of a change to a semester/trimester or change to GMS timetabling band, in which case consultation with the External Examiner is not required);

4.5.8 In considering (i) above the Faculty Course Modification Panel will have reference to

- a Course Modifications Log, which will outline all modifications made to the course since the last Course Approval Event or Periodic Course Review Event; and
- the Course Specification with the proposed modification(s) in mark-up.

4.5.9 The Faculty Course Modification Panel will consider the volume of modifications undertaken since the last approval / review event. It will be the responsibility of the Faculty Course Modification Panel to have oversight of the modifications made and to ensure that where a range of modifications have been made that the course aims and learning outcomes are still fit for purpose. As part of this consideration greater weight will be given to Minor Modifications Type 1 as these relate to compulsory modules. The Faculty Course Modification Panel may determine that the volume of the changes proposed taking in to account the cumulative effect of changes already made require either consideration by a Major Modifications Panel (see above) or that a Course Modification Review Exercise (see below) is required.

4.5.10 In the event that the Faculty Course Modification Panel determines that the proposal can be considered under the Approval Process for Minor Modifications, consideration will be given to the proposed student consultation arrangements. The level of student consultation required will depend on whether the proposed modification presents a material change to the published information students have previously been provided with and therefore represents a change in the student contract or whether the proposed modification presents a non-material change or constitutes a change due to circumstances outside the University's control that it could not plan for such as changes to PSRB requirements.

4.5.11 The [Change Policy](#) sets out examples of types of modifications that would be considered as material changes and examples of types of modifications that would be considered non-material.

For non-material changes, the consultation process is as follows:

- all current students that have the potential to be affected by the proposed modification(s) should be consulted and given the opportunity to comment on the proposed modification(s);
- the consultation process must be undertaken in a manner that can be evidenced i.e. through a meeting that is minuted with the minutes capturing both the proposal and student feedback or through a written consultation undertaken by e-mail or via the Virtual Learning Environment;
- the views of the students must be taken in to consideration when finalising the Modification Proposal Form for consideration by the Faculty Quality Committee but a majority agreement will be considered acceptable for the approval of a non-material change.

For material changes, the consultation process is as follows:

- all current students that will be affected by the proposed modification should be consulted and given the opportunity to comment on the proposed modification(s);
- the consultation process must be undertaken in a manner that can be evidenced in respect to individual students;
- the views of the students must be taken in to consideration when finalising the Modification Proposal Form for consideration by the Faculty Quality Committee. For the approval of a material change the Faculty Quality Committee will need to be assured that all students currently on the course that will be affected by the proposed modification(s) have agreed to the change or that alternative arrangements have been put in place to the satisfaction of an individual student where they expressed dissatisfaction with the change.

Separate arrangements exist for notifying applicants as set out in the Change Policy.

4.5.12 The Faculty Course Modification Panel will either confirm that the proposed student consultation arrangements are appropriate or indicate where changes to the proposed student consultation process will be required. The Course Director is responsible for ensuring the specified student consultation process is undertaken.

4.5.13 In the event that the Faculty Course Modification Panel determines that the proposal can be considered under the Approval Process for Minor Modifications and following initial consideration of the proposed modification and the arrangements for student consultation, the Modification Proposal Form will be referred back to the Course Director for completion of Section B of the Form. Section B requires consultation to take place with students and the current External Examiner. If additional resources are needed that cannot be met within the existing School / Centre budget, a detailed course planning form will also need to be approved by the Faculty Course Planning Executive.

4.5.14 On completion of Section B and accompanied by the required supporting evidence, the proposal will be returned for consideration by the Chair of the Faculty Course Modification Panel, who will either confirm that the proposal can proceed for consideration by the Faculty Quality Committee or refer back to the Course Director for further amendment prior to submission to the Faculty Quality Committee.

4.5.15 The Faculty Quality Committee is the decision-making body with respect to the approval of modifications. The Faculty Quality Committee has the discretion to refer the proposal for consideration by a Course Modification Review Exercise or Major Modification Event.

#### **4.6 Course Modification Review Exercise**

4.6.1 In the event that the Faculty Course Modification Panel requires a Course Modification Review Exercise to be undertaken the Course Director will be notified. The following documentation will be required to support the process:

- Course Modifications Log – outlining all approved modifications since the last Approval / Review Event;
- Previous Course Modifications Proposal Forms;
- A summary of cumulative totals of the volume of changed credit and the types of module from which it was derived, i.e. compulsory or option, during the period under consideration;

- The course specification approved at the last Approval / Review Event;
  - The current course specification;
  - Minutes from the Faculty's modifications approval process for the period under consideration;
  - External Examiner's written endorsement of the current appropriateness and coherence of the course in its totality.
- 4.6.2 The purpose of the Course Modification Review Exercise will be to confirm that the approved course award, course aims and course learning outcomes remain intact, valid and achievable.
- 4.6.3 The Course Modification Review Exercise does not require the direct participation of the course team. It is undertaken at the next scheduled meeting of the Faculty Course Modification Panel. A Faculty Director of Quality or Faculty Director of Learning and Teaching from outside of the Faculty will be requested to join the meeting for the purposes of the Course Modification Review Exercise to provide a further element of externality.
- 4.6.4 The outcome of the Course Modification Review Exercise will be reported to the Faculty Quality Committee as a recommendation. The Faculty Quality Committee will:
- EITHER
- Confirm that all modifications completed since the previous approval / review event have followed due process and that the course aims and learning outcomes remain consistent with the approved award;
- OR
- Refers the course for major modification.
- 4.6.5 Where the outcome is the former of the above, the course may proceed with the proposed modification as a minor modification as set out in Section 4.5 above.

#### **4.7 Reporting of Modifications**

- 4.7.1 The minutes of Faculty Quality Committee will record each proposal submitted. They should include a list of the proposals with sufficient information to identify each one.
- 4.7.2 The Course Director will be formally responsible for ensuring all student-facing documentation and materials are updated as part of the approval process of the modification. They will also be responsible for liaising with Admissions/Marketing with respect to any amendments required to marketing material and for ensuring that any necessary correspondence with applicants is undertaken as set out in the Change Policy at the earliest opportunity.
- 4.7.3 The Faculty Quality Committee must report all minor modifications through submission of the Modification Proposal Form and the revised Course Specification and amended / additional appendices to the following:
- Quality and Standards Office;
  - Student Systems QL in Planning and Academic Administration ([studentsystems.ql@canterbury.ac.uk](mailto:studentsystems.ql@canterbury.ac.uk));
  - Planning Office ([planningoffice@canterbury.ac.uk](mailto:planningoffice@canterbury.ac.uk)); and
  - Faculty Marketing Manager (via [marcomms@canterbury.ac.uk](mailto:marcomms@canterbury.ac.uk)).
- 4.7.4 Student Systems QL will be responsible for modifying the module or course details as recorded in the Student Records System. Such changes must be entered before students are registered for new or modified modules.

4.7.5 On an annual basis, the Quality Monitoring & Review Sub-Committee will receive a Summary Report from each Faculty on the operation of its delegated authority, which will reference its role in the approval of modifications.

#### **4.8 Modification to Course / Pathway Title**

4.8.1 Where a modification relates solely to the modification of a Course / Pathway Title, the Course / Pathway Title Modification Form must be completed. This must indicate a rationale for the title change and be accompanied by comments from an External Examiner to confirm the validity of the proposed change.

4.8.2 Modifications to Course / Pathway Titles will apply to the next recruiting cohort only and cannot be applied to existing students.

4.8.3 The completed form should be signed by the relevant Head(s) of School and submitted to the relevant Faculty Director(s) of Quality along with an updated course specification. The Faculty Director of Quality will ensure that the form is considered by the following Faculty committees:

- Faculty Course Planning Executive, or equivalent body for consideration of any portfolio implications;
- Faculty Quality Committee – for consideration of any quality assurance implications.

The Faculty Committee may determine that changes are required before the proposals can be approved.

4.8.4 Following Faculty-level approval, the form will be signed by the Dean and submitted to the Academic Strategy Committee for institutional-level approval.

4.8.5 The Secretary to the Academic Strategy Committee will notify the Heads of all relevant Professional Service areas of Course / Pathway Title changes approved by the Academic Strategy Committee including:

- Admissions
- Finance
- Marketing
- Planning
- Quality and Standards
- Planning & Academic Administration
- Student Support and Guidance
- UK Partnerships or International Partnerships (where relevant)

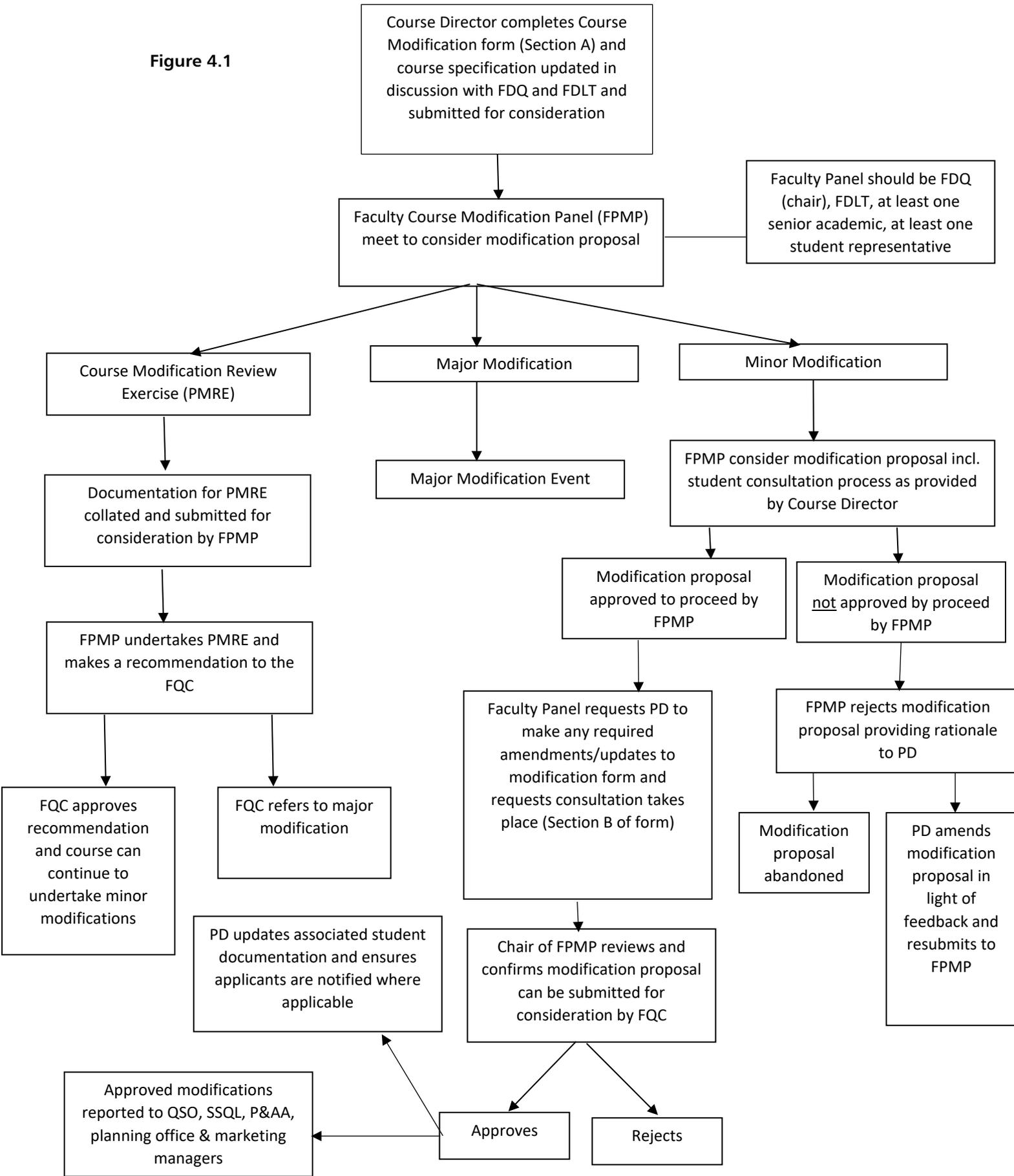
4.8.6 The Faculty Director of Quality is responsible for ensuring that the Professional, Statutory and Regulatory Body is notified (where relevant).

4.8.7 For the avoidance of doubt, a change of course / pathway title will not constitute course re-approval. A Periodic Course (and Partnership) Review will need to be undertaken in the sixth year of operation of the course as set out in Section 10 of the Quality Manual.

#### **4.9 Overview of the Course Modifications Process**

4.8.8 The following flowchart provides an overview of the Course Modifications Process

Figure 4.1



## 5 COLLABORATIVE PARTNERSHIPS

*Working in partnership is central to the academic mission of Canterbury Christ Church University. Collaborative provision is a type of partnership in which:*

*"learning opportunities leading or contributing to the award of academic credit or a qualification...are delivered, assessed or supported through an arrangement with one or more organisations other than the degree-awarding body"* The UK Quality Code for Higher Education, Chapter B10: Managing Higher Education Provision with Others.

*Collaborative courses require start-up and monitoring procedures additional to those for courses delivered exclusively by the University. This chapter covers the processes for planning, developing and approving collaborative courses and partnerships, as well as the requirements for due diligence, formal agreements, training partner staff, marketing, franchise course approval and new partner review.*

*For information on the continuous monitoring and periodic review of collaborative partnerships, see the annual monitoring and periodic course review chapters.*

### 5.1 Overview of the approval of partnership

- 5.1.1 All matters pertaining to the formation of partnerships, the termination of partnerships and the allocation of student numbers both to partner organisations and to collaborative programmes are ultimately the decision of the Vice Chancellor of the University, or person so delegated, following consultation with the Chief Executive of the partner organisation, or person so delegated.
- 5.1.2 Within the University, the person so delegated is the Deputy Vice Chancellor regarding quality matters and regarding student number/strategic matters. Any proposal to enter into a collaborative programme with either a new or existing partner, to terminate an existing collaborative programme, or to re-distribute existing student numbers between programmes falls within the remit of the Deputy Vice Chancellor and proposals should be communicated to the Deputy Vice Chancellor at an early stage, via the Quality Manager in Quality and Standards.
- 5.1.3 Where the University wishes to form a partnership to deliver franchised or validated, there will be a Memorandum of Agreement, approved through the University's central arrangements for the approval of collaborative partnerships.
- 5.1.4 Partnerships that deliver placement learning, work-based learning and distributed learning are developed and approved directly by Faculties and are approved in line with the University regulations for these aspects of delivery.
- 5.1.5 Partnerships entering into progression agreements are approved by the Deputy Vice Chancellor on the advice of the Director of Admissions. Some knowledge exchange and consultancy partnerships are developed and approved through the procedures of Research and Enterprise.

5.1.6 The relevant International or UK Partnerships Office must be consulted at an early stage regarding any proposed new partnerships. The relevant Dean(s) of Faculty will also need to consider and approve any proposal, prior to submission to the relevant decision-making body.

## 5.2 Planning Collaborative Partnerships

### The Planning Process

5.2.1 The collaborative partnership planning process will be overseen by the Academic Strategy Committee, which will give in-principle approval for new collaborative partnerships, taking into account the collaborative portfolio of the faculty and the University as it does so. The Academic Strategy Committee will decide whether developments should be referred to the Senior Management Team for approval.

5.2.2 A Lead Proposer will be appointed to take forward the proposal. The lead proposer will be responsible for

- completing a Partner Proposal Form for New Collaborative Partnerships (PPFNC);
- ensure that due diligence is undertaken.

5.2.3 The PPFNC form will be completed to include details of the programmes which it is proposed that the new partner should run, indicators of the proposed partner's experience in running HE programmes and other 'indicators of esteem' to help the Academic Strategy Committee have confidence in the proposal.

5.2.4 Where the proposal is multi-faculty, the lead proposer will:

- be nominated by the relevant Partnerships Office (UK Partnerships or International Partnerships);
- ensure that there is full consultation with the relevant faculties and schools;
- ensure that the PPFNC and supporting documentation is submitted to the relevant Faculty Portfolio Planning Executives for consideration and is supported by the Deans of the Faculties concerned;
- ensure that the PPFNC and supporting documentation is submitted to the Academic Strategy Committee for an in-principal decision.

5.2.5 Where the proposal is within a faculty, the lead proposer will:

- be nominated by the relevant Head of School, or the Dean, where the provision is in more than one School;
- ensure that there is full consultation the relevant Partnerships Office (UK Partnerships or International Partnerships);
- ensure that the PPFNC and supporting documentation is submitted to the Faculty Programme Planning Executive for consideration and is supported by the Dean of the Faculty;
- ensure that the PPFNC and supporting documentation is submitted to the Academic Strategy Committee for an in-principal decision.

5.2.6 In considering a proposal for in-principle approval, the Academic Strategy Committee will refer any proposals that it considers to be especially high risk to the Senior Management Team (SMT) for further consideration. Periodically the Academic Strategy Committee will make a report to SMT on new partnerships approved.

5.2.7 The Academic Strategy Committee (or SMT) will authorise the signing of a Memorandum of Understanding, for ceremonial purposes, where this is a precursor to a Collaborative Agreement.

5.2.8 Where an existing partner wishes to franchise or validate a programme(s), a PPFNC will not be required and in-principle approval will be sought through the In-Principle form / Faculty Programme Planning Portfolio process. A strategic overview of the partnership may be required by the Academic Strategy Committee from time to time to provide context for such

discussions, especially where large numbers of programmes are to be approved for delivery by strategic partners.

#### **Due Diligence Enquiries**

- 5.2.9 As part of the process of considering the suitability of another institution as a collaborative partner, the University will carry out a 'Due Diligence' check to assure itself of the partner's standing. Such Due Diligence is the norm in similar situations in the commercial world and, in relation to higher education, one of the focuses of the QAA UK Quality Code for Higher Education.
- 5.2.10 It is important to note that there may be variation to the due diligence enquiries required, based upon the perceived level of risk within the proposed partnership and the nature of the information discovered within the enquiry.
- 5.2.11 Initial due diligence will be orchestrated by QSO and will, where possible, be undertaken prior to In-Principle approval by ASC
- 5.2.12 Full due diligence will be co-ordinated by the Lead Partnership Proposer, as identified on the PPFNC submitted to the Academic Strategy Committee. The proposer will be required to liaise with the proposed partner and relevant staff within the University to complete the due diligence activity.
- 5.2.13 Full due diligence will be completed during the Programme Development Stage.

#### **The Memorandum of Agreement**

- 5.2.14 Each collaborative partnership will require a Memorandum of Agreement, a written agreement, signed for up to a six-year period by the Chief Executive of each organisation, which commits the partner to following appropriate processes and practices ensures that the quality of the student experience meets the standards set by the University. The Template for the Memorandum of Agreement is available on QSO website.
- 5.2.15 Each Agreement is underpinned by an Annual Letter which details the student numbers available to the partner, the percentage of the programme to be delivered by the partner, the fee, the arrangement for fees collection, the deduction to meet the University's quality assurance, programme approval and management costs, and the apportionment of the tuition fee income between the Parties. The letter is sent by the University's Director of Finance to Partner organisations at the start of the new academic year.
- 5.2.16 Changes and additions to a MoA may be through the addition of a schedule of changes, signed by the Chief Executives of both parties, or their authorised nominees.

#### **Transnational Regulations**

- 5.2.17 It is the responsibility of the International Partnership and Development Office to ensure that the University is fully aware of any regulatory and/or quality assurance requirements that operate in a country where a partnership is being planned.
- 5.2.18 The University will normally consult a lawyer resident in any country where a partnership is being planned.

#### **Venue Check**

- 5.2.19 A Venue Check must be undertaken, through a visit, to ensure that the facilities and learning resources at the partner institution are suitable for the delivery of a University programme, particularly in regard to accommodation, library, computing and other specialist provision. A separate Venue Check must be completed for each venue at which the collaborative programme is delivered. The pro-forma for the

Venue Check is available at <https://www.canterbury.ac.uk/quality-and-standards-office/collaborative-provision/dev-and-approval-of-new-collaborative-partnership.aspx>.

- 5.2.20 If a partner wishes to deliver the programme at a further venue during the course of the partnership agreement with the University, this venue must also undergo a check before it may be used for programme delivery.
- 5.2.21 Partner and University staff should ensure that any issues that arise concerning approved venues whilst the programme is running are reported to QSO.
- 5.2.22 Where the venue poses a possible risk to staff welfare due to the nature of the business and/or environment (e.g. a prison), a full risk assessment will be undertaken by the University as a part of the Venue Check.
- 5.2.23 Venue Checks are stored in a Shared Folder on the QSO computer drive.

#### **Staffing Resource**

- 5.2.24 In order to ensure that the Partner Staffing resources are sufficient and appropriately qualified to run the intended programmes, the Lead Proposer will:
  - request the CVs of the Partner's academic staff;
  - establish the extent to which delivery will be based by permanent full-time staff and how part-time temporary or associate staff, if any, will be utilised;
  - request details of the Partners administrative staff, relating to registry, admissions and similar functions;
  - request the contact details for the partner institution's Computing Services and Library Services representatives to allow the necessary communication to ensure smooth running of the programme;
  - request the partner's procedures for appointing staff.
- 5.2.25 The appropriate Head(s) of School will:
  - ensure that the academic staff resource is appropriate for the delivery of the programme(s) in their School;
  - retain all relevant staff CVs.
- 5.2.26 The University will:
  - determine that there are sufficient staff resources at the Partner to support the proposed provision;
  - determine that the partner has effective mechanism to ensure the proficiency of such staff;
  - determine that staff are appropriately qualified.
- 5.2.27 Partner staff teaching on collaborative programmes are required to engage with the appropriate part of the University's Associate Tutor Programme. The Lead Proposer must make the Partner aware of this requirement and ensure that they agree to enable this to occur.

#### **The promotion of collaborative programmes**

- 5.2.28 Marketing and promotion material will need to be discussed and put in place before the ASC Scrutiny Group is held.
- 5.2.29 Collaborative programmes must be supported by the appropriate marketing. Collaborative programmes may not be advertised 'subject to approval' until they have received approval from the Faculty Portfolio Planning Executive to proceed to an Programme Approval Event. To ensure this occurs, during the drafting of the Agreement, the HE Manager from the partner institution will be asked to supply the contact details for their Marketing Department, to enable the University and partner to liaise to best effect.

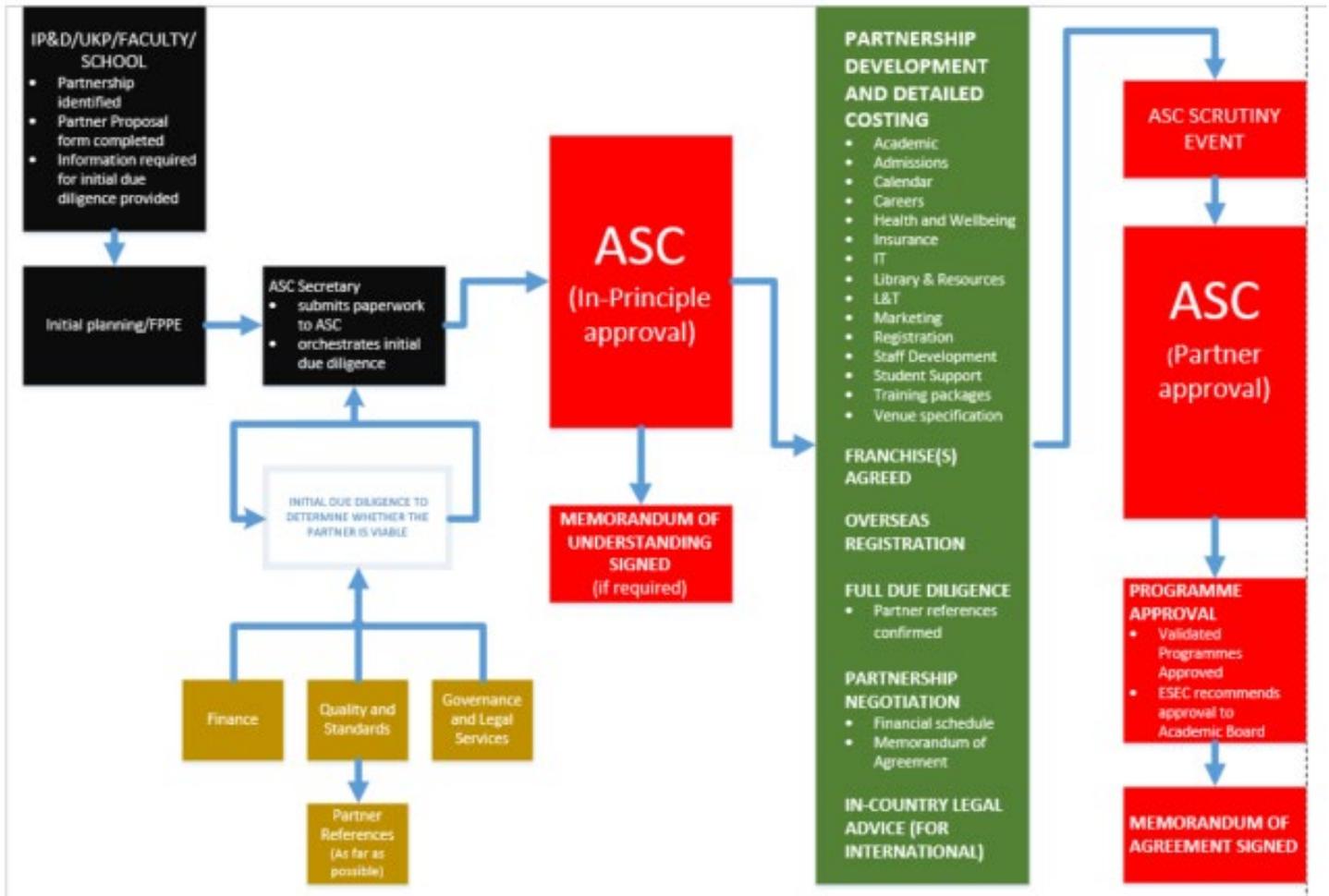
- 5.2.30 All promotional material for collaborative programmes should be referred to the University before dissemination. It is the responsibility of the partner institutions to forward all draft promotional materials to the named contact in the Marketing Department at the University in either electronic or hard copy form. The University will communicate any necessary changes to the partner institution for action.
- 5.2.31 All promotional materials devised and used by the partner institution must be:
- approved by the University prior to their publication or release
  - designed in keeping with the guidelines for the correct use of the University's logo and corporate colours, as set out at <https://cccu.canterbury.ac.uk/marketing-and-communications/services/corporate-identity.aspx>
- 5.2.32 Promotional materials include advertisements, prospectuses, brochures, leaflets, folders, posters, web pages and any other form of printed or electronic communication which refer to the partner institution's connection with the University, and are used to recruit students or staff or to attract funding or other support from public or private sector sources.

### 5.3 The Approval of Collaborative Provision

#### Overview

- 5.3.1 The approval of each new instance of Collaborative Provision will comprise two elements:
- the partnership arrangement that delivers a specific University programme(s), including its resource base (the Partner Development and Approval);
  - the approval of the programme to be run by the partner.
- 5.3.2 Programmes will be either:
- Franchised, which will be undertaken as part of the Partner Approval;
  - Validated through a Programme Approval Event using the University's Programme Approval Process.
- 5.3.3 Partner development will be undertaken under the auspices of the partnership strategic lead and that process reviewed by an ASC Scrutiny Group, prior to approval by ASC.
- 5.3.4 The Programme Approval Event for a Validated Programme will be undertaken at the partner, but video conferencing may be used to minimise the need to travel. The approval will be approval by Academic Board on the recommendation of the Education and Student Experience Committee in the normal way.
- 5.3.5 The Partnership will not be signed off until the Partner Approval and any initial Programme Approval Event(s) have been completed, as the latter may require amendment to the MoA.
- 5.3.6 A proposal to add Franchised or Validated provision to an existing partnership will not require a new Partner Approval Event. A Franchise or Programme Approval Event will be held, and any changes to the MoA will be through an agreed schedule to the agreement.
- 5.3.7 It should be noted that a programme may only be franchised where a prior Programme Approval Event has been held at the University to validate the proposed programme, if it is not already approved.
- 5.3.8 The overview of the process is set out in Figure 5:1.

#### Figure 5:1



## Partner Development

5.3.9 The Partner Development Stage will be led by the strategic lead for partnerships, which will be International Partnerships and Development for International partners or UK Partnerships for UK partners.

5.3.10 The Partner Development Stage will assure the University that:

- it can run the proposed provision with the specified partner;
- the programme-specific resource-base is sufficient for delivery;
- partner staff CVs have been received;
- partner staff will complete appropriate part of the University's Associate Tutor Programme;
- the partner has appropriate policies relating to complaints and appeals;
- the University is made fully aware of any regulation and quality assurance requirements, if the partnership is being delivered outside the UK.

5.3.11 The Partner Development Stage will consider:

- the rationale for the partnership, congruence of missions and policies, student numbers and achievements;
- the potential strengths and weaknesses of the partnership, in particular learning, teaching and assessment, the quality of learning opportunities, and the likely maintenance and enhancement of

- quality and standards;
- the capacity of the partner to deliver specified Franchised programmes;
- the likely effectiveness of the overarching services provided jointly by the University and the partner for Registration, Admissions, Quality Assurance, Student Support and Resources;
- identification of aspects of the partnership that potentially represent good or innovative practice;
- partnership and programme development, including future proposals;
- partnership documentation, including the proposed MoA;
- venues and resources;
- arrangements for Boards of Examiners;
- analysis of the potential strengths and potential limitations of the partnership (for example, communication, curriculum development, assessment, staff support and staff development, examination arrangements, student admission, registration and progression, student support, resources);
- the capacity of the partnership to deliver the programme appropriately.

### **Partner Approval**

5.3.12 Following conformation by the relevant strategic lead that partnership development has been appropriately undertaken, the Secretary of ASC will convene a Scrutiny group, comprising ASC members, which will review the development process to ensure that the actions in 5.3.10 and 5.3.11 have been properly discharged.

5.3.13 ASC will formerly approve the partnership on the recommendation of the ASC Scrutiny Group.

### **Approval of programmes**

5.3.14 The Approval of a Partnership will be dependent on the approval of those programmes that are due to run at the commencement of the Partnership, as agreed in-principle by the Academic Strategy Committee.

5.3.15 Where the initial programmes are Franchised, these will be approved as part of the Partner Development and Approval process.

5.3.16 Where the initial programmes are Validated, the Programme Approval Event(s) will be held at the partner. As agreed by QSO, the Programme Approval Event may be held on the same day or on the following day to the Partner Approval Event. The chair and members of the Partner Approval Panel may act in the same or other roles on the Programme Approval Panel.

### **Recommendation to the Academic Board**

5.3.17 The Academic Board will approve the partner to deliver University programmes following:

- confirmation from the Chair of the Academic Strategy Committee that the Partner has been approved;
- where there are Validated programmes, formal University approval of those programmes.

5.3.18 Governance and Legal Services will ensure that the MoA is in its final form. This will form the basis on which the VC is asked to sign the Agreement.

5.3.19 The Partnership and Programme Approval will be reported to the next meeting of ESEC which will recommend it for approval to the Academic Board.

5.3.20 The delivery of the collaborative programme may not commence until the above process is complete and the Agreement has been signed by both parties.

### **Additional Programmes**

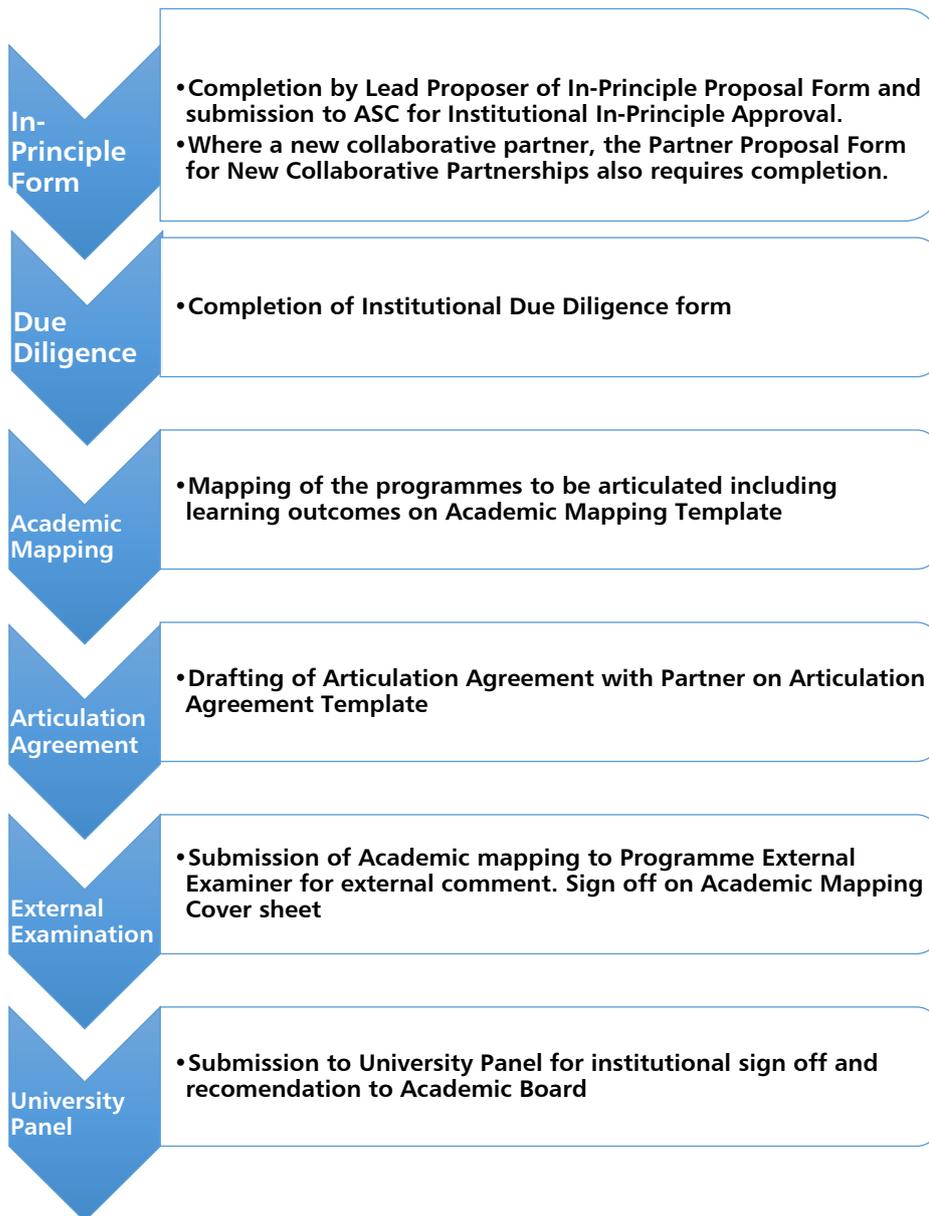
5.3.21 Once a Partnership has commenced, programmes may be added through a Programme

Approval Event.

- 5.3.22 Each programmes or group of programmes will require the nomination of a Lead Proposer who will ensure that in-principle planning and detailed planning are undertaken.

#### **Approval of an Articulation Agreement**

- 5.3.23 An articulation agreement is a formal collaborative agreement that allows specific credit that has been gained from one higher education institution to be transferred to another institution as advanced standing. The right to such advanced standing applies to all students covered by the agreement, who have gained that specific credit, without a further consideration of that credit, subject to any limitations set out in the agreement.
- 5.3.24 Each Articulation Agreement will be underpinned by a detailed curriculum mapping document, which maps the partner programme curriculum to the University programme curriculum at a module level. This will be reviewed by the External Examiner for the University's programme, except when the External Examiner is unable to do so, in which case the Director of Quality and Standards may authorise the engagement of an independent External Assessor in their place, using the procedure for appointing an external assessor for a validation event.
- 5.3.25 Where the documentation required for mapping is in a language other than English, the partner will be responsible for providing the Panel with certified translations.
- 5.3.26 The Panel for the Articulation Agreement Approval will be the University's Standing Approval Panel, which will comprise:
- a Chair (senior academic);
  - an internal panel member;
  - a senior member of QSO.
- 5.3.27 The Articulation Agreement Approval will receive the following documentation:
- evidence that there has been in-principle approval by ASC and the Faculty Portfolio Executive;
  - the detailed curriculum mapping and evidence of review by the External Examiner;
  - a draft articulation agreement.
- 5.3.28 The proposal will be presented to the Articulation Agreement Approval Panel by the Programme Director and/or other nominee of the Head of School, such as the School lead for Internationalisation.
- 5.3.29 The Articulation Agreement Approval Event will confirm:
- that appropriate due diligence has been undertaken;
  - that full mapping has been conducted and has been reviewed by the External Examiner;
  - that, as set out in the articulation agreement, either (i) incoming students are guaranteed a place without further entry requirements or (ii) there are appropriate entry requirements in place at the point of advanced standing;
  - that arrangements are in place at programme level to support the incoming students;
  - that the articulation agreement meets University requirements and can be recommended for signature by the Vice-Chancellor or nominated SMT Member.
- 5.3.30 The Articulation Approval Event Panel will either recommend approval of the articulation arrangement or reject the proposal.
- 5.3.31 Figure 5:2 Summary of stages for the approval of articulation agreements



## 5.4 The approval of new non-collaborative partnerships

- 5.4.1 Non-collaborative partnerships are normally lower risk than collaborative partnerships. It therefore follows that a lower degree of scrutiny is required in their approval.
- 5.4.2 Lead proposers should in the first instance liaise with their relevant Head of School, Dean of Faculty and the relevant Partnerships Office (UK Partnerships or International Partnerships).
- 5.4.3 The Partnerships Office will provide the lead proposer with a New Partner Proposal Form for Non-Collaborative Partnerships for completion and submission to the relevant SMT Lead for Partnerships.
- 5.4.4 The relevant SMT lead will conduct a risk assessment of the proposed partnership, and decide what further vetting is necessary, including whether further due diligence enquiries need to be completed. Once any further stages specified by the SMT lead have been completed, the SMT lead will recommend that the partnership be approved, and the Memorandum of Understanding or contract will be signed by the Vice-Chancellor.
- 5.4.5 The relevant Partnerships Office will keep a record of all relevant non-collaborative partnerships.

## 5.5 Summary of Authorised Signatories of Agreements

- 5.5.1 It is important that the agreements used for collaborative arrangements by the University are signed by appropriate and authorised representatives of the University.
- 5.5.2 The following table details the authorised signatories for the different types of agreements utilised by the University for collaborative arrangements.
- 5.5.3 N.B. Although it is not a collaborative arrangement, the Progression Agreement is included for clarity.

**Figure 5:3 Summary of authorised signatories of agreements**

Type of Agreement	Approval Route	Authorised Signatory within the University
Memorandum of Understanding	Not contractual or collaborative. Recommended for approval by the appropriate partnership SMT lead.	Vice-Chancellor or nominated SMT Member, on the advice of the relevant SMT Lead.
Agreement/Memorandum of Agreement/Articulation Agreement (B10)	Recommended by the Approval Event to the Education and Student Experience Committee, for onward recommendation for approval by the Academic Board.	Vice-Chancellor or nominated SMT Member, on the advice of the DVC.
Agreement or service contract (Non B10)	Not collaborative. Contractual arrangements recommended for approval by the appropriate SMT lead.	Person authorised by Vice-Chancellor or SMT lead.

<p>Placement/Work-based Learning/Distributed Learning Agreement*</p> <p>*Where managed at faculty level (Health &amp; Wellbeing and Education)</p>	<p>Managed through the Faculty placement mechanisms.</p>	<p>Person authorised by the Dean of Faculty.</p>
<p>Placement/Work-based Learning/ Distributed Learning Agreement*</p> <p>*Where managed at programme level</p>	<p>Recommended by the Validation event to the Education and Student Experience Committee, for onward recommendation for approval by the Academic Board.</p>	<p>Person authorised by the Dean of the Faculty.</p>
<p>Progression Agreement</p>	<p>Recommended by Collaborative Provision Sub-Committee to the Education and Student Experience Committee.</p>	<p>DVC or nominated SMT Member.</p>

## **The Management of Partnership Agreements following Approval**

5.5.4 Once a new collaborative partnership has been approved, confirmed details of the partnership will be added to the University's definitive list of collaborative partnerships, which is regularly reported to the Academic Strategy Committee and the Collaborative Provision Sub-Committee. QSO will continue to ensure that all collaborative agreements are monitored, reviewed and refreshed, as necessary.

5.5.5 Any decision to terminate a collaborative partnership will be made by ASC, upon the recommendation of the Deputy Vice Chancellor. Further information can be found in the sections below.

### **5.6 New Partner Review**

5.6.1 For new partners, or partners where significant new development has taken place, a New Partner Review meeting will take place after approximately six months of operation.

5.6.2 The purpose of the meeting will be to ensure that systems are operating effectively and to address any misunderstandings or concerns developing with the partner in the first six months of the programme / collaborative partnership.

5.6.3 The meeting will be organised and led by a senior member of QSO and involve staff in the relevant schools and the partner.

5.6.4 Following the meeting, QSO will produce a report and an action plan where relevant. This will be considered by the Collaborative Provision Sub-Committee.

### **5.7 Termination of a Partnership**

5.7.1 The termination process will be regulated by the terms of the formal Agreement between both parties. The period of notification required to close a collaborative partnership or specific collaborative programme will usually be between 6 to 12 months, depending on the specific terms of the formal Agreement. However, closure of a partnership or programme may be undertaken in a shorter timescale in the case of a breach of contract. The specific terms of the Agreement will set out the procedures to be followed in the case of a breach of contract.

5.7.2 In all cases both parties are expected to co-operate to safeguard the interests of current students and applicants and follow the programme/withdrawal/closure procedures as set out in the Quality Manual.

5.7.3 The implications for the University of the termination of a contract must be carefully considered including:

- The strategic consequences of closure for the University and the other party;
- The impact of the closure on staff and students;
- How the quality and standards of the student experience will be maintained following notification of termination and/or closure;
- The process of consultation with or notification of students where the delivery of the programme will materially change;
- The strategy for on-going delivery and support (including areas such as External Examiner arrangements, revalidation requirements, etc.) during the phasing-out period;
- The implications regarding professional body registration (where applicable);
- The potential for legal action ensuing from terminating the agreement.

5.7.4 In addition to this, whether the termination is instigated by the University or the partner, the University must ensure a phasing-out period is negotiated and a financial arrangement is agreed to enable any current students registered with the University to complete their programme of study.

The University must ensure that the quality and standards of the programme, and the student learning experience are maintained during the phasing-out period. The partner will be expected to commit agreed resources to this process.

### **Closure of a Programme, and/or termination of the Partnership**

- 5.7.5 Where the University is considering terminating a collaborative partnership or closing a collaborative programme, or the University is formally notified of a partner organisation's wish to close a partnership or programme, the Assistant Director of Quality and Standards must be informed. The Strategic Lead for Quality and Standards will liaise with the Deputy Vice Chancellor, the Director of UK Partnerships or International Partnerships, and the University Solicitor (as appropriate), regarding the closure.
- 5.7.6 Following this consultation, and where the University agrees it wishes to instigate the termination of a formal agreement, the Deputy Vice Chancellor or nominee will issue a formal notice of termination to the partner under the relevant terms of the agreement. The Deputy Vice Chancellor has the discretion to determine whether the formal notice of termination is issued in advance of a Programme Withdrawal Form being completed and approved by the Academic Strategy Committee or whether it is a requirement that this be completed and approved prior to issuing the formal notice of termination. In the event that the formal notice of termination is issued in advance of a Programme Withdrawal Form being completed, the Deputy Vice Chancellor has the discretion to determine when the decision is reported to the University and may agree with the Partner when it reports the decision.
- 5.7.7 A Programme Withdrawal Form must be completed at the appropriate stage and considered by the Faculty Programme Planning Executive and the Faculty Quality Committee prior to submission to the Academic Strategy Committee for approval.
- 5.7.8 Collaborative partnerships entering termination, or programmes facing closure, will be reported to the Collaborative Provision Sub-Committee following Academic Strategy Committee approval.
- 5.8 The closure of a programme following a teach-out period**
- 5.8.1 Academic Strategy Committee must be informed about the conclusion of a programme following a teach-out period.
- The Board of Examiners should be informed that the final cohort of students has completed the programme.
  - The Chair of the Board of Examiners should ensure that this is recorded in the minutes of the Board of Examiners and make appropriate arrangements for the University to be notified.
  - A copy of the final Board of Examiners minutes should be sent to the Quality and Standards Office with notification that no further awards will be made. This should be copied to the Faculty Director of Quality.
- 5.8.2 The Quality and Standards Office will ensure that the Academic Strategy Committee is informed that the programme has closed and that there are no residual quality concerns.

## 6 APPROVING A SHORT COURSE

*This chapter provides the short course definition and sets out the process for approving short courses and collaborative short courses. It also covers the review of short courses.*

### 6.1 Definition of a short course

- 6.1.1 The University defines a short course as a course of study of up to 40 credits or 400 total learning hours, the learning outcomes of which are either at levels 0-7, or are commensurate with work at that level, which leads to
- the award of credit, and/or
  - University summative assessment, and/or
  - a certificate or transcript of award, issued by the University, and/or
  - a formal record kept by the University Registry.

### 6.2 The approval of short courses

- 6.2.1 Where a student is required to undertake more than 40 credits or 400 hours of total learning time, the University's requirements for course approval must be followed.
- 6.2.2 In Principle Approval for a short course is required from the Academic Strategy Committee in advance of proceeding to planning and approval.
- 6.2.3 Where a short course carries with it an award title, that title will be 'University Certificate' followed by the Academic Strategy Committee approved description, except where the Chair of the Academic Strategy Committee has approved an exception to this rule. This will apply to all new approvals and re-approvals.
- 6.2.4 A short course award should be made only as a 'pass', except where there are regulatory, professional or contractual requirements, in which case special regulations will need to be approved by the Academic Board.
- 6.2.5 The policies and procedures set out in the Regulation and Credit Framework and the Assessment Procedures will apply to short courses in all instances where they are capable of application, unless specifically set aside by this document. In particular it should be noted that where credit is awarded an External Examiner will need to be appointed.
- 6.2.6 A short course award cannot be made as an exit award to a student registered full time or part time on a University course.

### 6.3 The approval of a non-collaborative short course

- 6.3.1 The Faculty Quality Committee approves non-collaborative short courses for the faculty, using the University's agreed processes. In doing so, the Faculty process must ensure that:
- for a short course that is credited at an HE level: the Faculty Quality Committee must ensure that it is fully compliant with all aspects of the UK Quality Code for Higher Education, including the Framework for Higher Education Qualifications;
  - for a non-credit-rated short course: the Faculty Quality Committee must ensure that the University can assure those aspects of achievements that are reflected in the certification.
- 6.3.2 Non-collaborative short courses should be approved using the University's Short Course Approval Form, available on the website of the Quality and Standards Office.

- 6.3.3 Where the non-collaborative short course is to be delivered by University staff off-site, a venue check must be carried out using the form available on the Quality and Standards Office website. This should form part of the documentation considered by the Faculty Quality Committee.
- 6.3.4 This form should be submitted to the Faculty Quality Committee where the content of a short course has been approved as a module(s) of a University course.
- 6.3.5 A short course will be approved for an unlimited number of intakes for a period of five years, unless determined otherwise by the Faculty Quality Committee. However, the Committee cannot extend the maximum period beyond five years.
- 6.3.6 The Faculty will each term provide the Academic Strategy Committee with a list of proposed short course titles to enable the University to oversee the approval of proposed award titles.
- 6.3.7 The Faculty will provide the Registry, on approval, with a copy of each Short Course Approval Form to enable curriculum set up to take place.
- 6.3.8 The Faculty will each term provide the Quality and Standards Office with a list of approved short courses to enable reporting to the Quality Monitoring and Review Sub Committee.

#### **6.4 The approval of a collaborative short course**

- 6.4.1 All collaborative short courses require consideration by a Partner Approval Event in line with the University's collaborative procedures. This will also include in-principle approval of new collaborative partnerships by the Academic Strategy Committee, planning approval by the Faculty Course Planning Executive, due diligence enquiries, venue check, the drawing up of a collaborative Agreement. Where the collaborative partner's contribution is restricted to recruitment and the provision of a venue for the short course, the Quality and Standards Office will ensure that the procedures are applied in a way which is proportionate to the academic risk.
- 6.4.2 Where a collaborative short course is approved to run with one collaborative partner and it is proposed to run it with additional collaborative partner(s), Partner Approval Event(s) will be required to approve delivery at each individual collaborative partner.

#### **6.5 The review of short courses**

- 6.5.1 Each short course will be reviewed as part of the Course Continuous Improvement Plan of the appropriate school/centre, considering
  - an evaluation by the participants in each intake that completed during that year,
  - an evaluation of the short course by the short course convenor, using the appropriate University template, and, where appropriate,
  - the annual review of the collaborative partner.
- 6.5.2 The University will assure itself that the standards and quality of its short courses are appropriate through the following mechanisms:
  - the review process as outlined above, and
  - any separate processes that the Faculty may wish to put into place to monitor its short courses, and
  - the annual faculty report to the Quality Monitoring and Review Sub Committee on the conduct of delegated powers.

#### **6.6 Other Courses**

- 6.6.1 The Academic Strategy Committee may approve other courses of undergraduate study, leading to a University award, with the explicit requirement that the award cannot be made as an exit award to a student registered full time or part time on a University course. The University currently awards a University Diploma for an approved course of study of 60 credits

at levels four to six. Such courses must be approved by the University Standing Approval Panel.

## 7 THE SUSPENSION / WITHDRAWAL / CLOSURE OF A COURSE

*Recruitment to courses may be suspended or withdrawn or courses closed for business or academic reasons, or a lack of market interest.*

*Whatever the reason, and at whatever level within the University the issue is identified, the procedures to follow are set out in this chapter.*

*The key element is to ensure that any student affected by closure has an opportunity to complete their course of study.*

### 7.1 Introduction

7.1.1 Recruitment to courses may be suspended or withdrawn or courses closed for a number of reasons:

- Suspension means that recruitment to the course ceases for an agreed period of time.
- Withdrawal means that recruitment ceases permanently to a course that currently has registered students.
- Closure means that the course is formally removed from the academic portfolio as no students remain on it.

7.1.2 Where the University decides to suspend, withdraw or close a course, implications of will have been carefully considered including:

- The strategic consequences for the University.
- The impact on the staff and the students.
- How the quality and standards of the student experience will be maintained until the completion of the course.
- The process of consultation with or notification of students where the delivery of the course will materially change.
- The strategy for on-going delivery and support (including areas such as External Examiner arrangements, revalidation requirements, etc.) during the phasing-out period.
- The implications regarding professional body registration (where applicable).
- The time scale / sequencing of any intended replacement courses

7.1.3 In the case of a course delivered in collaboration with a partner and terminated as the result of that partnership ending, particular consideration should be given to the need of the student to complete his or her award.

### 7.2 The decision to suspend/withdraw recruitment to a course and/or close a course

7.2.1 Where a decision is made to suspend recruitment to a course for a fixed period of time, the Course Suspension/Withdrawal/Closure Form available on the QSO website at <https://www.canterbury.ac.uk/quality-and-standards-office/management-of-the-academic-portfolio/programme-suspension-withdrawal-closure.aspx> must be completed. This should clearly indicate the period of suspension, which should not be more than two years. In the event that it is subsequently determined to withdraw / close the previously suspended course a new Course Withdrawal Form will be required.

- Suspension: The form must clearly indicate the period of suspension which should not be more than two years. In the event that it is subsequently determined to withdraw or close the previously suspended course the form must be updated using track changes.
  - Withdrawal: Courses with existing students may only be withdrawn. Once the final student has completed, the form must be updated using track changes to request to close the course.
  - Closure: A course that does not have existing students may be closed.
- 7.2.2 The form should be signed by the relevant Head(s) of School and submitted to the relevant Faculty Director(s) of Quality. The Faculty Director of Quality will ensure that the form is considered by the following Faculty committees:
- Faculty Course Planning Executive, or equivalent body – for consideration of any portfolio implications;
  - Faculty Quality Committee – for consideration of any quality assurance / student experience implications.
- 7.2.3 The Faculty Committees may request changes to the forms.
- 7.2.4 Following Faculty-level approval, the form will be signed by the Dean and submitted to the Academic Strategy Committee for institutional-level approval.
- 7.2.5 The Secretary to the Academic Strategy Committee will notify the Heads of all relevant Professional Service areas of course suspension/withdrawal/closure approved by the Academic Strategy Committee including:
- Admissions
  - Finance
  - Marketing
  - Planning
  - Quality and Standards
  - Registry
  - Student Support and Guidance
  - UK Partnerships or International Partnerships (where relevant)
- 7.2.6 The Faculty Director of Quality is responsible for notifying the professional body (where relevant).
- 7.2.7 This procedure is to be followed where a course delivered at multiple University sites is suspended/withdrawn and/or closed from one or more but not all.
- 7.3 The decision to terminate a collaborative partnership**
- 7.3.1 Please see Chapter 5 – Collaborative Partnership.

## 8 CONTINUOUS IMPROVEMENT

*Continuous improvement approach shifts the process of course monitoring from one of static, once a year action planning, to one which constantly evaluates, reflects and makes improvements in light of course performance and feedback from both students and staff throughout the academic year and course approval cycle.*

### 8.1 Introduction

8.1.1 The University's approach to quality management and enhancement is based on a process of continuous improvement. This is achieved by three main approaches:

- (i) Using Boards of Study as the main mechanism for continuous monitoring and improvement at programme level.
- (ii) Operation of a Programme Continuous Improvement Plan (PCIP) within Boards of Study to monitor ongoing programme improvement.
- (iii) Undertaking annual programme monitoring at Faculty level and University level with the inclusion of Faculty Monitoring Action Plan (FMAP) to link programme improvement activity with faculty strategic priorities.

8.1.2 The process of continuous improvement will enable Heads of School, programme teams and students to work collectively to make changes and adjustments to programmes, throughout the academic year.

8.1.3 Continuous improvement applies to both University and collaborative partner provision. Collaborative partners will therefore be expected to:

- (i) Carry out their own Boards of Study throughout the academic year where required or attend School Board of Study.
- (ii) Maintain ownership of their PCIP in order to continuously evaluate programme improvement activity throughout the year.
- (iii) Participate in an annual partnership monitoring meeting to comment on the overall health of the individual collaborative partnerships by evaluating their ability to manage the academic standards and quality of learning opportunities of provision leading to a CCCU award.

### 8.2 Boards of Study

#### Purpose and Aims

8.2.1 Boards of Study are the main mechanism for carrying out continuous programme monitoring throughout the academic year and approval cycle. They aim to provide an opportunity for structured reflection on teaching and the student experience, as well facilitate the communication and dissemination of good practice.

8.2.2 The purpose of Boards of Study is to:

- (i) Monitor the progress of programme development and performance through programme team Programme Continuous Improvement Plan (PCIP) updates to: -

- Approve the priorities, actions and overall direction of every programme team's PCIP at the Annual Monitoring Board of Study at the start of each academic year.
  - Monitor the ongoing progress of programme improvement activity to ensure that teams are using their PCIP efficiently to address both University and programme specific priorities, throughout the year.
  - Evaluate the outcome and impact of actions using the PCIP RAG-rating system and recommend changes and adjustments to actions where necessary.
- (ii) Carry out programme review to identify action to be taken by programme teams to address any areas of concern in relation to:
- Withdrawals and interruptions
  - Continuation and progression rates per year group
  - Outcomes from Staff Student Liaison Minutes
  - Annual metrics i.e. NSS, PTES and Guardian League Table
  - Approving programme modifications and recommend to FQC for approval
- (iii) Carry out module review to identify action to be taken by programme teams to address any areas of concern in relation to:
- Reviewing module evaluations and taking action where required
  - Consider External Examiner reports and approve responses to external examiners
  - Reviewing and monitoring key module data, which includes attendance, attainment and assessment submission rate.
  - Approve module modifications and recommend to FQC for approval.
- (iv) Carry out review of induction, transitions, and in-year academic support.
- (v) Oversee the annual updating of the Student Programme Handbooks and relevant module information.
- (vi) Consider student issues raised and take action where concerns regarding student experience have been highlighted.
- (vii) Provide an opportunity for programme teams to share and identify common issues and good practice.

### **Operating Boards of Study**

- 8.2.3 Responsibility for the effective operation of Boards of Study will reside with Faculties. In particular: -
- Faculty Registrars (FRs) will ensure that there are appropriately constituted Boards of Study in operation at the University and at partners (except where that function is explicitly allocated to IP&D or UKP, as part of a multi-faculty arrangement);
  - Faculty Directors of Learning and Teaching (FDLT) will provide support and guidance that enables appropriate learning and teaching outcomes to be achieved;
  - Faculty Directors of Quality (FDQs) will provide strategic advice on quality matters, monitor the outputs of Boards of Study to ensure that they deliver suitable progress in programme development and performance.
  - All Faculty Directors are responsible for ensuring the ensuring effective communication of issues to the wider Faculty and the University arising from Boards of Study.
- 8.2.4 Heads of School are responsible for the schedule and composition of all Boards of Study within their School at the start of each academic year. This includes ensuring the schedule is communicated to Faculty, School, and partner staff where appropriate.

- 8.2.5 There must be a minimum of three Boards of Study spread evenly across the academic year.
- 8.2.6 All collaborative partners are expected to participate in Boards of Study and manage their own PCIP. Partners will either run their own Boards at their campus or participate in the School Boards of Study.
- 8.2.7 Where partners run their own Board of Study, the appropriate nominee at the partner institution is responsible for the configuration of their Board of Study with the support from IPAD / UKP (where relevant), Academic Link Tutor (ALT) but approval should be sought from the relevant Head of School (if single School partner) or IPAD / UKP if multi faculty.
- 8.2.8 For operational best practice, the appropriate partner nominee for Chair should be encouraged to attend the relevant University Board of Study, either in person or via video link, in order to learn how Boards of Study are effectively run, as well as share insights and student feedback related to the curriculum with the programme team.
- 8.2.9 Where partners attend School Boards of Study, the ALT is responsible for ensuring the schedule is made known to the appropriate nominee at the partner so that they can attend.
- 8.2.10 All Boards of Study minutes and PCIPs at both school and partner level must be made available to FDQs, FDLTs and Faculty Registrars throughout the academic year to enable them to routinely monitor whether they are delivering suitable progress in programme development and performance.

#### **TNE Partners**

- 8.2.11 TNE partners offering validated provision will be expected to run their own Boards of Study at their campus using the partner programme PCIP template to address their programme improvement priorities. It is anticipated that these will be held as close to each School Board of Study as possible in order to enable ALTs to communicate outputs from the partner PCIP to the School Board of Study and identify improvement actions where needed.
- 8.2.12 TNE partners who deliver franchised provision will also be expected to run their own Boards of Study at their own campus and manage their own partner PCIP. However unlike Boards for validated provision, the partner programme team should look to align their PCIP with the priorities of the parent programme where appropriate to ensure issues can be addressed as a whole.
- 8.2.13 The final schedule and configuration of TNE partner Boards of Study should be agreed between the partner, IPAD, ALT and the Head of School. Faculty Managers of Quality (FMQs) and IPAD are responsible for ensuring the schedule is published and all stakeholders are aware.

#### **UK Partners**

- 8.2.14 UK partners who deliver franchised provision will be expected to attend the School Board of Study. They will also be expected to manage their own PCIP, which is aligned as closely as possible to the priorities of the parent programme. See [Board of Study Guidance](#) for specific requirements for UK partners offering validated provision.

#### **Multi-faculty provision**

- 8.2.15 UK partners that offer provision which spans across more than one Faculty will be expected to hold their own Board of Study at their own campus with support from the relevant ALTs.
- 8.2.16 UKP/ IPAD are responsible for ensuring that all multi-faculty partners hold Boards of Study and that they fully engage with the PCIP as part of the University's quality management processes.

#### **Agenda and membership**

- 8.2.17 Boards of Study meetings are informed by standard agenda and minutes templates and supported by a designated administrator to formally record discussions and outputs. All associated actions should include realistic timeframes within which they will be completed.
- 8.2.18 The standard agenda will be split into unreserved and reserved sections. It is expected that most issues pertinent to the ongoing improvement and development of programmes should be discussed within the unreserved agenda, with students being invited to contribute and lead on particular areas where relevant. Students are not permitted to attend the part of the meeting where reserved matters are discussed. Heads of School / Chairs will decide whether an item is reserved or unreserved business.
- 8.2.19 Boards of Study membership must include: -
- Chair - Head of School or nominee
  - Suite / Subject leads
  - Programme Directors
  - Module leaders
  - Academic Link Tutors (ALTs)
  - Partner Programme Director / appropriate nominee (where required)
  - Year or tutor group leads
  - Professional Support Staff, i.e. Programme Support Officers or Programme Administrators
  - Student Representatives
  - Board of Study Administrator (minute taker)
- 8.2.20 Where appropriate the Head of School may also invite:
- Members of the Faculty directorate (FDLT, FDO, FDQ)
  - Industry or PSRB stakeholders
  - Wider partner representatives
  - Academic Developers
  - Learning Developers
  - Learning and Research Librarian
  - Employability Lead for the programme/s
  - Faculty Digital Academic Developer

### **Student Representatives**

- 8.2.21 Every Board of Study, at both school and partner level, is expected to include student representatives, ideally from every programme being considered and from each year of student. Heads of School should consider the availability of students when planning the timing of Boards.
- 8.2.22 Ideally, a minimum of three students needs to be present and they can attend either in person or via video link.
- 8.2.23 It is expected that the University's Student Union will be responsible for recruiting and training School Boards of Study student representatives and ensuring that they attend meetings when appointed.
- 8.2.24 The Head of School should meet (either in person or via video link) all relevant elected student representatives to outline the role and nature of the Boards of Study and ask for representation across all three meetings.

## **8.3 The Programme Continuous Improvement Plan**

### **Purpose and Aims**

- 8.3.1 The PCIP is a live document used by programme teams throughout the academic year to record, evidence and evaluate the impact of their ongoing actions which they are carrying out to address priority areas within their programme. It is a standard template used by all programme teams.
- 8.3.2 The PCIP requires teams to focus their ongoing programme specific improvement actions within specific overarching priorities. These overarching priorities are directly informed by Faculty and University strategic priorities.
- 8.3.3 In some cases, it might be more appropriate for teams to select their own overarching priorities. But they must be able to demonstrate to the Head of School that their programme consistently delivers year on year, all of the following: -
- Positive student retention and attainment across all levels
  - No marked difference in attainment between students from different ethnic backgrounds, including BAME and young white males.
  - All students are in employment relevant to their subject of study within 6 months after graduation.
  - All students report positively that their voice is heard as part of their learning experience.
- 8.3.4 The PCIP requires programme teams to evaluate the impact of their actions by analysing data, recording evidence, and making necessary adjustments based on outcomes. Actions are identified, undertaken, reported on, and the impact evaluated in 'real time' throughout the course of the academic year and programme validation cycle.
- 8.3.5 At the start of each academic year, programme teams will complete their PCIP by identifying priority areas and the action they will take to deliver improvements for approval in the first Board of Study in October / November.
- 8.3.6 Programme teams should use the following quantitative and qualitative data to inform their PCIP priorities from the following sources: -
- Data from AMI dashboards and SAS
  - Outcomes from previous action plans, including areas of good practice
  - Discussions and outputs from Boards of Studies, Staff Student Liaison Meetings and Programme team meetings
  - Module evaluations
  - External Examiner, PSRB and placement reports (where applicable)
  - National student survey and other survey outcomes.
  - Graduate outcomes surveys
- 8.3.7 Throughout the year, programme teams will evaluate the outcome and impact of their actions by adjusting or introducing new actions where necessary. As part of this ongoing review and evaluation activity, programme teams will need to: -
- Check SAS and AMI dashboard data, particularly during key points within the academic year, to inform progress of actions and understand what further adjustments are needed.
  - Consider discussions in BoS, programme team meetings and SSLMs to inform actions.
  - Consider feedback from module evaluations and module outcomes in order to make changes.
  - Consider feedback from External Examiner reports in order to make changes.
  - Gather evidence confirming that action taken has had the desired impact and that priority areas are being addressed.
  - Use the PCIP RAG rating system to evaluate the progress of an action and whether it has had the desired outcome and impact.
- 8.3.8 A partner PCIP has been developed to allow flexibility if the partner does not share the same University strategic priorities. The partner PCIP allows partners to focus on addressing different priorities that align

more with the University's priorities for its partners, rather than directly for its home programmes. The following is noted: -

- i. Partners delivering franchised provision should use their own programme continuous improvement plan for their programmes. They should align their programme priorities with those of the parent programme to ensure issues within the programme can be addressed as a whole across all provision. But they may wish to consider regional differences that may impact on delivery and student experience.
- ii. Partners offering validated provision should use their own PCIP to address priorities within the programme relevant to their students and delivery style.
- iii. The relevant ALT is responsible for assisting partner Programme Directors with the development and effective use of their PCIP.
- iv. The ALT is responsible for ensuring that any issues identified in the partner PCIP are made known to the School Board of Study. This includes working with the School Programme Director to coordinate actions to be taken on partner and School PCIP's to support the continued development and performance of the programme as a whole.
- v. It is expected that every partner programme will use their PCIP, whether it be the school or partner version, in the same way as University programme teams so as to ensure a general standard of practice across all provision.

#### **8.4 Operating the PCIP with Boards of Study**

- 8.4.1 Every Board of Study will monitor and evaluate the progress and impact of improvement action detailed on each team's PCIP to assess how well it is meeting its overarching programme and University priorities. This will take place through a standing agenda item 'PCIP Updates' and the PCIP's RAG-rated system. The Board will also recommend adjustments to actions where it feels insufficient progress or improvement is being made, or a better outcome could be delivered.
- 8.4.2 Team members responsible for a particular action will be expected to provide detailed updates in the 'PCIP updates' section of every Boards of Study in order to ensure a team approach to programme improvement.
- 8.4.3 PCIP Updates discussions will include the following: -
  - (i) Concise verbal evaluation from either PD or Lead(s) responsible of the current progress and impact of the actions currently being taken to address priority areas.
  - (ii) Use of the RAG-rating (either by HoS, PD or Lead(s) Responsible) to highlight where: -
    - Actions have had or are on course to have the desired impact (Green).
    - actions either need more time to assess impact or, have not had quite the desired Impact and may need adjusting (Amber).
    - Actions have not been completed on time and have not had a positive impact toward addressing the overall priority area (Red).
  - (iii) Close examination of actions which have been highlighted either amber or red. Chair to ask teams to provide explanation for these actions, as well as explore with members alternative actions or adjustments that can be made to improve progress.

- (iv) Discussions should conclude with the team adjusting either amber or red actions with updated time scales, as directed by the Chair.

## **8.5 Annual Programme Monitoring**

- 8.5.1 This is currently under review.

## 9 PROFESSIONAL SERVICES ANNUAL MONITORING

*The Professional Services Annual Monitoring process is paused in 2020-21. Departments should complete the new Service Level Statement template in 2020-21 as this will form the basis of annual monitoring in 2021-22.*

### 9.1 Introduction

The Professional Service Annual Monitoring process has been paused for 2020-21 in order to facilitate the development of departmental level Service Level Statements. This decision has been made to enable professional services to:

- focus on delivery of a high quality student experience during the 2020-21 academic period in the context of a reduced senior staff capacity;
- develop a Service Level Statement during 2020-21 to form part of annual monitoring from 2021-22.

### 9.2 Service Level Statements

#### Purpose of Service Level Statements

9.2.1 In 2019-20 the University's approach to Service Level Agreements / Statements was reviewed taking into account the effectiveness of existing practice, external practice, and the potential to enhance consistency, coherence and visibility of department's services for a student and staff audience.

9.2.2 As a result of the review a revised Service Level Statement template is in place from 2020-21. The purpose of the Service Level Statement is to:

- set out the expectations of the services provided by each Professional Service department, both for the department operating the service and its users and stakeholders;
- enable each service to track how well it is delivering the commitments in its statement, so actions for improvements can be explored and evidenced through the Professional Services Annual Monitoring process.

#### Content of Service Level Statements

9.2.3 The Service Level Statement template provided on the QSO website should be used. The template should be completed in 2020-21 and reviewed annually thereafter as part of the Professional Services Annual Monitoring process. The template comprises two sections:

- Section A – Generic content headings to be used by all departments that are required to complete an SLS (see paragraph 9.3.16 below)
- Section B – Key Performance Indicators, which must be used in addition to Section A by the departments listed in paragraph 9.3.15 below.

9.2.4 Section A of the template provides headings that will enable each service to be clear about what it is expected to deliver and what is expected from its services users. Service users may be students, other University departments or services, internal staff, or external stakeholders such as collaborative partners, employers, regulatory bodies or placement providers.

9.2.5 The headings in Section A of the Service Level Statement template require departments to record the following information:

- a summary of the service(s) provided by a department and its main objectives;
- the availability and frequency of the service(s);

- a clear indication of the responsibilities of the service and how these will be discharged;
- a clear statement of the services that are *not* delivered by the department e.g. the department may be responsible for the *appointment and approval process* for External Examiners but not the *payment of travel and subsistence expenses* to External Examiners;
- key quality monitoring data such as how the service has listened and responded to customer feedback, surveys and other forms of external benchmarking, monitoring or review;
- a list of stakeholders, making explicit where successful delivery of the department's services is dependent on work or information being provided by another department or area;
- the obligations of users of the department's service(s), for example what the department expects from its users and stakeholders in order to be able to deliver the service(s);
- how services users can expect to be contacted.

### Key Performance Indicators

- 9.2.6 Section B of the Service Level Agreement template is dedicated to departmental Key Performance Indicators. A Key Performance Indicator (KPI) is a quantifiable measure that allows a department to determine how well its services are meeting its operational and strategic goals. This section of the SLS supports departments in establishing their most important targets and then monitoring the success, or otherwise, of performance against these targets.
- 9.2.7 In 2020-21, it is recommended that departments focus their efforts on setting the most important KPIs for their service(s). These should be areas that, if improved, would have a demonstrable positive impact on the student experience. Departments are encouraged to take a whole-department approach to developing a clear set of KPIs that can be measured and monitored in a meaningful way. Rather than setting a huge number of goals that are unlikely to all be met, it is advised that departments focus their efforts on two or three areas where there is more chance of making a real and positive difference to the student experience in the next year.
- 9.2.8 Some examples of KPIs that would be applicable for a range of different services have been provided below to guide departments new to developing KPIs:
- to respond to all student enquiries within 2 working days;
  - to resolve 90% of enquiries within 7 working days;
  - to train 80% of new student representatives by Christmas 2020;
  - to reduce the number of enquires from staff about Boards of Examiner operational procedures by 20% by the start of 2021-22.
- 9.2.9 This is not an exhaustive list and departments are encouraged to develop the KPIs that will most improve the student experience in their area of service. If your department has already developed and monitored KPIs then 2020-21 is a chance to review these to ensure that they remain fit-for-purpose. Departments are invited to refer to the [University KPIs](#) when developing their service KPIs.
- 9.2.10 Departments that are not required to produce KPIs should not be deterred from having measurable targets for their services. An example of such a target would be to distribute conditions and recommendations to a panel 1-2 days after the programme approval panel has met, and to circulate the full report by two weeks after the panel event.
- 9.2.11 In 2020-21 the KPIs should be drafted (if not already in place) by the departments listed in paragraph 8.3.16. Departments not listed may also develop KPIs on an optional basis, but it is not a requirement.
- 9.2.12 KPIs enable departments to track service issues over time, evaluate the success of interventions made and either (a) close the loop where efforts have been successful or (b) change course when the work put in place to make an improvement is not having a demonstrable outcome.
- 9.2.13 Departments are encouraged to measure and evaluate their success or otherwise of delivering their service KPIs throughout the year as part of regular team or departmental meetings. The process Professional Services Annual Monitoring (when this restarts in 2021-22) will provide an annual 'census point' and quality critical friend to support the evaluation of your KPIs. The process will continue to be a mechanism to share inter- and intra-service good practice.

## Service Level Statement Requirements for 2020-21

- 9.2.14 The SLS template requires the development and monitoring of departmental-level Key Performance Indicators for departments that are directly student facing, or have a greater influence on the quality of student experience. The list of eligible departments was agreed by the Education and Student Experience Committee in March 2020.
- 9.2.15 The following departments/areas should complete the **Service Level Statement Template Sections A and B** in 2020/21, which must include KPIs:
- Community Liaison
  - Estates and Facilities
  - Unitemps
  - IT Service
  - i-zone
  - Library and Learning Resources
  - Learning and Teaching Enhancement
  - Planning and Academic Administration
  - Faculty Administrative Support Teams
  - Student Support, Health and Wellbeing.
- 9.2.16 The following departments/areas should complete a **Service Level Statement Section A only** in 2020/21, but are welcome to adopt the use of KPIs (section B) on a voluntary basis if they wish:
- Christ Church Sport
  - Enterprise and Employability
  - Finance
  - Governance and Legal Services
  - Graduate College
  - Human Resources and Organisational Development (including Equality, Diversity and Inclusion)
  - International Partnerships and Development
  - Marketing and Corporate Communications
  - Quality and Standards Office
  - Research Development
  - Student Communications Unit
  - Student Survey Unit.
- 9.2.17 The following departments/areas are **not required to submit a Service Level Statement** in 2020/21 but this may be reconsidered after the first year of operation:
- Chaplaincy
  - Director of Curriculum
  - Director of Combined Honours
  - Sustainability
  - UK Partnerships
  - Arts and Culture
- 9.2.18 It is recognised that some departments, for example IT Services, already have in place a sophisticated approach to measuring KPIs, going beyond the University's minimum requirements. Departments are invited to see the KPI section of the Service Level Statement as a starting point and minimum requirement.
- 9.2.19 The first submission of the SLS will be as part of the Professional Services Annual Monitoring process in Autumn 2021. However, for advice and guidance Heads of Department are welcome to submit draft Service Level Statements (Sections A and/or B) to [quality@canterbury.ac.uk](mailto:quality@canterbury.ac.uk). The Professional Services Quality Committee, which will meet in early November 2020 and mid-March 2021, will provide a forum to discuss the development of your SLS.

### 9.3 Professional Services Annual Monitoring

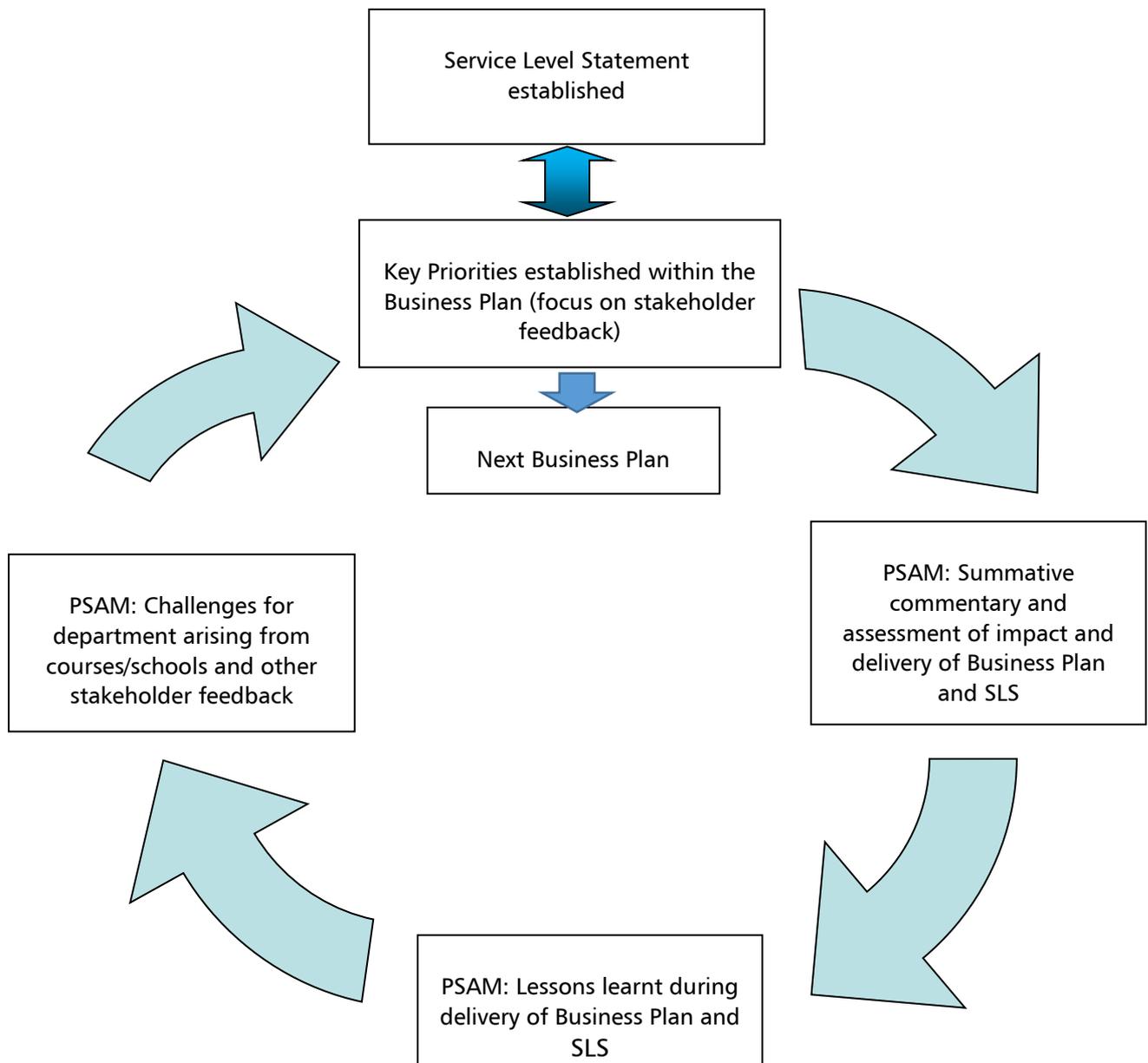
9.3.1 The Professional Services Annual Monitoring process is paused in 2020-21.

### 9.4 Introduction to Professional Services Annual Monitoring

9.4.1 The purpose of the Professional Service Annual Monitoring is:

- To provide assurances that the professional service is meeting its objectives;
- To assess the quality of the student/stakeholder experience through consideration of lessons learnt through delivery of the Service Level Statement and consider mechanisms for enhancement;
- To identify and manage any risks and ensure appropriate action plans are implemented to address any identified risks;
- To identify good practice and share it to facilitate quality enhancement.

9.4.2 All professional service departments are required to have Business Plans and a Service Level Statement and the following diagram sets out the principles of the Professional Services Annual Monitoring (PSAM) process. This more clearly links the process to the Business Plan and Service Level Statement.



## 9.5 Links with other processes

- 9.5.1 *Business Planning* – the Business Plan is the main operational planning mechanism for departments. The Annual monitoring process should both reflect on the previous year’s Business Plan with regard to any quality concerns relating to the student experience that may not have been resolved and look forward to the next Business Plan in terms of identifying any quality concerns that would feed in to the next Business Plan. A high quality Annual Monitoring report should facilitate the Business Planning process. It should not however duplicate it.
- 9.5.2 *Service Level Statements* – The Annual Monitoring Process should facilitate an annual review of performance against Service Level Statements. It should also afford an opportunity to review the continued appropriateness of the SLS..
- 9.5.3 *Student/Stakeholder Feedback* – Departments have in place a range of different processes for gaining feedback from their stakeholders. Stakeholders will vary depending on the individual professional service department. For a number of professional service departments, the report should evidence that consideration has been given to outcomes of surveys such as the National Student Survey, UK Engagement Survey, Graduate Outcomes (LEO), Postgraduate Taught Experience Survey and Postgraduate Research Experience Survey. These may not be relevant for all professional service departments. Feedback from stakeholders may be sought through bespoke surveys but there is no suggestion that professional service departments need to introduce additional surveys just for the purpose of annual monitoring. Feedback could be received through meetings with stakeholders and informal mechanisms.
- 9.5.4 With regard to specific feedback from courses / schools, there is a responsibility for both course teams / schools and professional service departments to maintain a dialogue throughout the year and identify any issues or good practice, particularly those that may not have been resolved in the annual monitoring process. As the Course Continuous Improvement process and the Professional Service Annual Monitoring process need to take place simultaneously to both feed in to the Business Planning process it is complex for the two processes to feed in to each other. The two processes will meet at the Quality Monitoring and Review Sub-committee however and this sub-committee will have a key role to play in terms of identifying any issues that may not have been picked up by the appropriate professional service departments / faculties.

## 9.6 Sharing of Good Practice

- 9.6.1 The report template includes a specific requirement for good practice to be identified and for the Professional Services Quality Committee to consider approaches for the sharing of good practice.

## 9.7 Report Format

- 9.7.1 The report template issued by the Quality and Standards Office is to be used by all professional service departments. This is intended to shift the focus of the process to **exception reporting** whilst still enabling the sharing of good practice. The design of the report template is intended to more clearly focus attention on the issues raised by the review of evidence. The report does not need to provide commentary on all the evidence reviewed rather just focus on the key issues that have arisen throughout the year under review.
- 9.7.2 The report is to be produced as a whole department activity, led by the Director/Head of Department. The report should be evaluative and critically self-reflective, not just descriptive.
- 9.7.3 The report should be produced in reference to a range of sources of evidence. The report should reference documents provided as part of the evidence base rather than repeat content from the sources of evidence. The sources of evidence will need to be compiled in to an electronic data pack to be submitted along with the completed report for consideration by the SMT Lead and the Quality and Standards Office.
- 9.7.4 Once finalised the report should remain a live document and the action plan should be reviewed for progress throughout the year via the departmental team meeting. The report should also inform the University’s business planning process.

## 9.8 Scrutiny of Reports Prior to Submission

- 9.8.1 The SMT Lead has responsibility for ensuring reports are produced for all professional services within their area. The report must be approved by the SMT Lead prior to submission to the Quality and Standards Office. There may be a requirement for the report to undergo further amendment following consideration by the SMT Lead.

## 9.9 Timelines for Production and Consideration of Reports

- 9.9.1 The following indicative schedule and committee responsibilities provides a clear indication of the deadlines for submission of the APSM Report and consequent consideration through the committee structure. Deadlines for submission of reports must be adhered to in order to enable the feed up of appropriate summary reports through the University committee structure.

<b>Timescale</b>	<b>Activity</b>
Late-September – mid-December	Completion of reports and sign off of reports by relevant SMT Lead
Mid-December	Submission of reports to the Quality and Standards Office
Mid-January	Consideration of reports by the Professional Services Quality Committee
Mid-January	Production of an Overview Report on the Annual Monitoring process for Professional Service Departments
February	Consideration of the Overview Report by the Quality Monitoring & Review Sub-Committee, which produces a further report for the Education and Student Experience Committee

## 10 PERIODIC COURSE (AND PARTNERSHIP) REVIEW 2020-21 ONLY

*This chapter has been rewritten for academic year 2020-2021 to reflect the streamlined approach adopted for one academic year only in response to the impact of the pandemic.*

*It covers the principles for review for this academic year only, the process which will be adopted, timelines and documentation requirements. It provides an overview of the review process and what to expect at the review event, as well as how partnerships are considered.*

### 10.1 Introduction

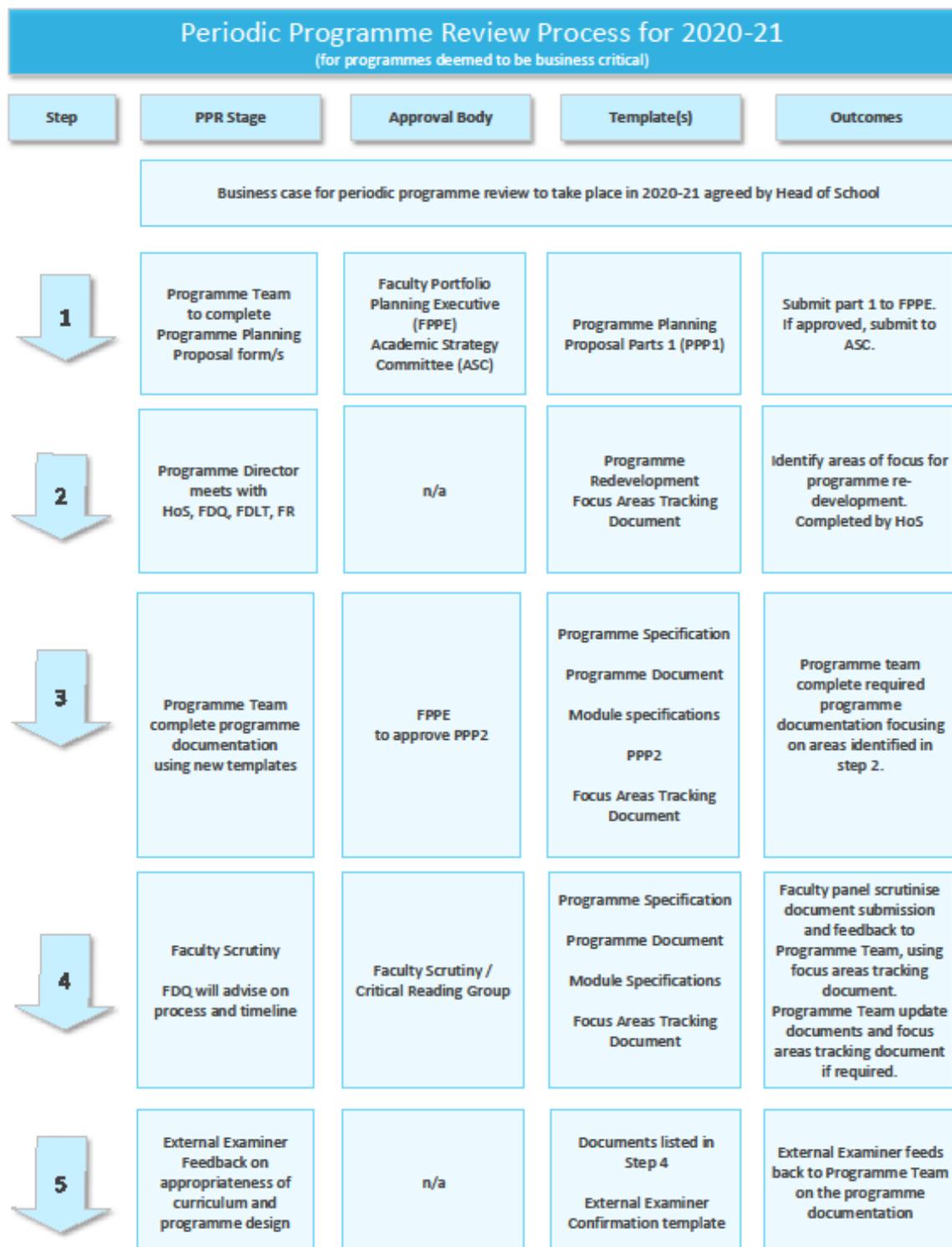
- 10.1.1 All programmes and partnerships must undergo Periodic Programme (and Partnership) Review. In usual circumstances this would generally be every six years. However, for 2020-2021 only programmes who have been identified as having a business-critical need, or PSRB requirements, will be subject to Programme Periodic Review in 2020-2021. All other programmes will have their programmes extended by one year.
- 10.1.2 As part of the Quality Cycle project Period Programme Review was being amended with implementation due in 2020-21. However, due to the impact of the pandemic it has been agreed that an interim transition process will be implemented for 2020-21 with the new Periodic Programme Review process commencing in 2021-22.
- 10.1.3 The following principles have informed the development of the Periodic Programme Review process for 2020-2021:
- The need to maintain and safeguard standards and quality across the University's provision.
  - All programmes due to undergo PPR in 2020 will have their term extended by one further year.
  - Only programmes who present a clear business case regarding the need for reapproval in 2020/21 will undergo a streamlined, light touch reapproval only process.
  - Where there are PSRB requirements the streamlined process will be adapted to meet the PSRB needs.

### 10.2 Programme Periodic Review key features 2020-2021 only

- 10.2.1 The process for 2020-21 removes the review aspect focussing instead on the reapproval of the programme. It places responsibility on the HoS, FDQ and FDL, alongside the programme teams, to identify those aspects needing revision recognising that, where the programme works well, minimal change will be needed.
- 10.2.2 The key features of this process are:
- A focus on the curriculum and student experience only amending the programme where student, staff, data or external stakeholder feedback suggests change is needed.
  - Slimmed down programme documentation which meets the needs of the wider University and protects the integrity of the data

- The removal of preliminary meetings and lengthy panel meetings with various stakeholders and the programme team.
- The centrality of the FDQ and FDLT, alongside the programme team, in the redevelopment of the programme.
- Heads of School, Faculty Directors of Quality, Faculty Directors of Learning and Teaching and Faculty Registrars will meet with the programme teams to agree the areas of focus for reapproval
- Faculties will have flexibility in designing their own internal scrutiny / critical reading process to review the documentation
- Externality will be provided through discussions with the programme's external examiner
- FQC will be responsible for the final approval of the document leaving the Faculty.
- The University Standing Approval Panel will give the final approval for the revised programme

Figure 10.1 – Periodic Programme Review Process Flow for 2020-21



Step	PPR Stage	Approval Body	Template(s)	Outcomes
6	HoS, FDO, FDLT and FR sign off	Head of School, Faculty Director of Quality, Faculty Director of Learning and Teaching, Faculty Registrar	Documents listed in Step 4 Focus Areas Tracking Document sign-off section	Confirm that areas of focus have been addressed and documentation is complete
7	Release from Faculty	Faculty Quality Committee	Documents from step 6 FQC sign-off	Confirm that: 1) Faculty is satisfied the documents are appropriate for release 2) due process has been followed 3) appropriate scrutiny has taken place
8	University Level Review	Standing Approval Panel	Documents from step 6 Standing Approval Panel sign-off	If approved, outcome is reported to Education and Student Experience Committee (ESEC)
9	University Level Sign-off	Education and Student Experience Committee	Documents provided by QSO on behalf of Standing Approval Panel	If approved, the Committee recommend Academic Board to approve
10	University Level Ratification	Academic Board	Documents provided by QSO on behalf of ESEC	If approved, QSO notify professional services departments, systems teams and faculty

Once Academic Board grants re-approval, QSO advise Student Systems and Professional Services departments to enable set up of the programme in the University system and recruitment of new cohorts of students.

### 10.3 Timing of review

- 10.3.1 Heads of School, Faculty Directors of Quality, Faculty Directors of Learning and Teaching met with Quality and Standards to agree which programmes should undergo programme periodic review in 2020-2021.
- 10.3.2 Timings for each periodic programme review will be agreed between the Faculty and Quality and Standards and communicated to programme teams through the Faculty. All documentation should have been approved by the Faculty by the end of March 2021.
- 10.3.3 Each faculty will specify mechanisms for signing off the programme documentation to proceed to the Faculty Quality Committee who will have the final responsibility to approve the documents to leave the Faculty.
- 10.3.4 Programme documentation should be submitted via the office of the Faculty Director of Quality to the Quality Officer.
- 10.3.5 The full set of documentation should normally be submitted six weeks in advance of the agreed Standing Approval Panel. In the event that the documentation is not received in a

timely manner, the programme will be delayed in being presented to the Standing Approval Panel , in order to give the panel sufficient time to read the documentation.

- 10.3.6 In conjunction with the Faculty Director of Quality, the Quality and Standards Office will agree a date for the programme to be presented to the University's Standing Approval Panel. Programmes must normally have been considered by the Standing Approval Panel at least 6 months prior to commencement of the re-approved version of the programme unless there are exceptional circumstances.
- 10.3.7 The Quality and Standards Office will appoint the Standing Approval Panel. Details of the membership of this panel can be found below.

Role	Who	Main focus	Secondary focus
Chair:	Head of School / Centre / Dean of Faculty	The scrutiny process	Engagement with students and stakeholders
Internal Panel Member:	e.g. Experienced programme director or experienced subject lead	Student experience, student voice and student support  Recruitment logistics e.g. process, interviews, DBS requirements consideration of accessibility, inclusivity for students	Programme management  Placement (where relevant)
QSO Panel Member:	Quality Manager or Strategic Lead for Quality and Standards	Collaborative arrangements and management  PSRB requirements	Module descriptors – technical check and learning outcome mapping  Work-related learning or placement
Learning and Teaching Panel Member:	Assistant Director of Learning and Teaching, Senior Academic Developer or Faculty Director of Learning and Teaching	Learning, teaching and assessment strategy, module aims and learning outcomes	Graduate skills, work-related learning
Senior Member of PAA / Faculty Registrar	Faculty Registrar or senior member of Planning and Academic Administration	Technical set up, calendar, programme structure efficiency  Student recruitment – entry requirements, interviews, DBS etc.	Student facing information  Placement (where relevant)
Observer (optional)	Member of Academic or Professional Services member of staff to attend for staff development purposes		

## 10.4 Externality

- 10.4.1 For 2020-2021 only externality for Periodic Programme Review will be provided through the programme's appointed external examiner. They will participate through receiving and feeding back on the revised documentation. A fee of £100 will be paid for this additional work.

10.4.2 Programme teams will be responsible for liaising with their external examiner and requesting their support with reviewing the documents for curriculum and structure relevance and appropriateness. A template will be provided by Quality and Standards for the External to complete which will be a part of the required documentation to be provided to the Standing Approval Panel.

## **10.5 Documentation Requirements**

10.5.1 The Programme Team are required to make the following documentation available for the Programme Periodic Review:

- Programme Specification for each named award
- Programme Document
- Module specifications
- Planning Proposal Part 2 (PPP2)
- Areas of development tracker document

## 11 EXTERNAL EXAMINERS

*The External Examiner system is the principal external means, on a continuous basis, for assuring the maintenance of quality, academic standards and comparability across the HE Sector.*

*The contribution of the External Examiners is integral to procedures for monitoring and maintaining academic standards.*

*This chapter covers the nomination and approval of External Examiners, how to extend an Examiner's term of office (in exceptional circumstances only), the induction, right to work, fee and expense arrangements, and finally External Examiner reporting and how to respond to the annual report.*

### 11.1 Introduction

11.1.1 The University operates a two-tier Board of Examiner system; the Module Achievement Board (MAB) and the Progression and Award Board (PAB). To support this system, there are two separate External Examiner roles, the Module External Examiner and the Progression and Award External Examiner.

### 11.2 External Examiner Appointments

11.2.1 To support the University's two-tier Board of Examiner system there are two separate External Examiner roles:

- Module External Examiner
- Progression and Award External Examiner

11.2.2 The majority of the content in this handbook applies equally to both Progression and Award Board External Examiners and Module Achievement Board External Examiners so only the title External Examiners will be used for the most part.

### 11.3 Module External Examiners

11.3.1 Subject specialist External Examiners are appointed to modules rather than to courses. This allows modules that are shared across more than one course to have a consistent external perspective from a single External Examiner. It also allows the University to make the best use of the specialist knowledge of our External Examiners.

11.3.2 Module External Examiner will not normally be appointed to more than 400 credits of modules. However, while all modules will have an appointed External Examiner to enable consultation where a modification is proposed, not all modules will have samples of assessed work to be reviewed, such as those at level 0 and level 4. This means that an External Examiner's overall credits may be higher than 400 but this will not involve more work.

11.3.3 Module External Examiners will attend meetings of Module Achievement Boards of Examiners (MABs) and provide an annual report. The annual report will address the allocated modules and comment on the subject / course of which the modules form a part.

11.3.4 The Module Achievement Board of Examiners considers student achievement and performance on individual modules. The key responsibilities are as follows: -

- Consider the performance of students on modules.
  - Confirm the marks achieved by students on modules.
  - Award credit for the achievement of students on modules.
  - Take account of the decisions made by Extenuating Circumstances Request panels.
  - Take account of the agreed outcomes of investigations into cases of plagiarism or academic misconduct.
  - Assure the appropriate standards for the modules.
- 11.3.5 Ensure that the assessment process at a module level is operated in a fair and reliable manner making use of agreed assessment criteria and in line with the University's Regulations and Assessment Procedures.
- 11.3.6 The role and responsibilities of the Module External Examiner are as follows:
- Review and approve draft examination papers;
  - Review a sample of scripts for all components of assessment for all examinable modules to which they are appointed;
  - Review the marking to determine if it is of an appropriate standard;
  - Attend the relevant Module Achievement Boards of Examiners for the modules to which they are appointed;
  - Judge the overall standards of student performance on the modules to which they are appointed;
  - Ensure that published University procedures for marking are observed for the modules to which they are appointed;
  - Comment on proposed minor modification to both the examinable and non-examinable modules to which they are appointed and new modules in related subject areas;
  - Bring to the attention of the Module Board of Examiners any issues relating to the delivery of the modules in the context of the course(s);
  - Provide an annual written report.
- 11.4 Progression and Award External Examiners**
- 11.4.1 The role and responsibilities of the Progression and Award External Examiner are to contribute to the decision of the Progression and Award Board (PAB) in respect of the Board's role to:
- Consider the overall profile of marks for each student and recommend students for awards or make recommendations for a course of action in the case of failure.
  - Make recommendations about students, not in their final year, with regard to progression or make recommendations for a course of action in the case of a student not being eligible to progress to the next level.
  - Award credit to students on modules passed by compensation.
  - Ensure that the assessment process at a course level is operated in a fair and reliable manner making use of agreed degree classification criteria and in line with the University's Regulations and assessment procedures.
  - Assure the appropriate standards for the awards.
  - Consider any issues relating to the delivery of modules in the context of the course(s) as reported from Module Boards.

- 11.4.2 Each PAB will normally have a single PAB External Examiner. PAB External Examiners are appointed at institutional level, rather than to a specific PAB, allowing for some flexibility in setting up the PAB. PAB External Examiners do not need to be subject specialists as the PAB does not focus on individual assessments.
- 11.4.3 All PABs are held at an Institutional level to align with the calendars set by Registry in the operational schedule of Board of Examiners.
- 11.4.4 It is expected, but not mandatory, that PAB External Examiners will also be Module External Examiners.

#### **11.5 External Examiners' Term of Office**

- 11.5.1 The criteria relating to External Examiners' terms of office, approved by the Academic Board are as follows:
- The duration of an external examiner's appointment will normally be for four years, with an exceptional extension of one year to ensure continuity.
  - An External Examiner may be reappointed in exceptional circumstances but only after a period of five years or more has elapsed since their last appointment.
  - External examiners normally hold no more than two external examiner appointments for taught courses/modules at any point in time.
- 11.5.2 An application for an extension to an External Examiner's term of office will need to be made by the Head of School to the External Examiner Appointments Panel and the Education and Student Experience Committee on behalf of Academic Board.

#### **11.6 Extension of an External Examiner's Duties**

- 11.6.1 A course team may ask an External Examiner to take on additional duties. Where an External is happy to do so, an application for an extension to an External Examiner's duties will need to be made by the Head of School to the External Examiner Appointments Panel, and the Education and Student Experience Committee, on behalf of Academic Board.
- 11.6.2 An extension of duties will not normally involve an extension of the External Examiner's term of office.
- 11.6.3 A PAB External Examiner cannot have their duties extended, as they cannot be appointed to more than one of the four Faculties.

#### **11.7 Briefing and Induction Arrangement**

- 11.7.1 University External Examiner inductions and meetings are carried out virtually. The University's main software used for all virtual meetings is MS Teams. However, it is recognised that in some instances, primary contacts may wish to hold individual meetings with their External Examiners using alternative software. All references to meetings in this document will therefore be assumed as taking place virtually.
- 11.7.2 New External Examiners should normally take up an appointment on or before the retirement of their predecessors. External Examiners should remain available after the last assessments with which they will be associated in order to deal with any subsequent reviews of decisions.
- 11.7.3 Every new External Examiner will receive a formal letter of appointment from the Quality and Standards Office setting out the period of office, the modules to be examined during the term of appointment and the fee structure. External Examiners are asked to return the acceptance slip confirming their appointment.
- 11.7.4 All External Examiners will have a primary point of contact. The primary contact for Module External Examiners will be a Course Director, Module Leader or Academic Link Tutor from the

group of courses the External Examiner's modules reside in. The primary contact for PAB External Examiners will be the relevant Faculty Director of Quality.

- 11.7.5 Every new External Examiners will be invited to attend the External Examiner Induction meeting held by the University's Quality and Standards Office. This will take place as close to the start of the academic year as possible. The External Examiner Induction will include the following:
- Introduction to the University
  - Overview of the role and responsibilities of External Examiners
  - Briefing on the organisation of Examination Boards
- 11.7.6 All briefing information will be available to review on the Information for External Examiners section of the Quality and Standards Office website.
- 11.7.7 A new MAB External Examiner's Induction should also include a private meeting with their primary contact, other staff and if necessary, students. This meeting should be arranged by the primary contact with support of the Faculty Administration Office within which the course resides. See point 12.8.7 for more detail on what a Module External Examiner's briefing should include.
- Upon their appointment, a new Module External Examiner should receive from their primary contact:
  - A written statement about the place of the relevant examinations within the context of the relevant course(s);
  - A written statement about the organisation and phasing of relevant curriculum;
  - Information about the arrangements for examination of work and the Module Achievement Board of Examiner date;
  - Any course specific information, including a copy of the Course Specification(s) and Course Handbook(s) for the relevant course(s);
  - Module handbooks for the modules for which the External Examiner is responsible.
- 11.7.8 At an early stage in their appointment, a new Module External Examiner should be briefed by their primary contact. The briefing should cover:
- Intended learning outcomes of the relevant course(s), its modules and how these meet the requirements of the benchmark statements, the UK Quality Code for Higher Education: Section A and other external reference points, as appropriate;
  - Syllabuses and teaching methods of the modules for which the External Examiner is responsible
  - Methods of assessment and marking criteria;
  - Guidance and/or a demonstration on how to access samples of work in Turnitin on Blackboard.
  - Regulations for the relevant course(s) including those concerned with compensation for failure and opportunities for reassessment;
  - External Examiner's role in relation to the examining team as a whole.
- 11.7.9 Throughout a Module External Examiner's term, it is the primary contact's responsibility to:
- Provide the External Examiner with any draft examination papers for review and approval;
  - Provide the External Examiner with dates of meetings of Module Board of Examiners.
  - Provide the External Examiner with access to student work, including on VLE, prior to the meeting of the Module Achievement Board of Examiners;

- Make arrangements for the External Examiner to meet with students on the relevant course(s), where necessary.
- 11.7.10 PAB External Examiners should be briefed by their primary contact. The briefing should cover:
- External Examiner role in relation to the Progression and Award Board;
  - Structure and organisation of the Progression and Award Board including dates of meetings;
  - University regulations for awards;
  - Details of the courses being considered.

## **11.8 Rights of External Examiners**

- 11.8.1 To support External Examiners in undertaking the role, the rights of External Examiners are as follows:
- External Examiners should have adequate access to all student work from the modules of which they are examining.
  - External Examiners are entitled to meet students for the purposes of induction or where there is a need to oversee practical assessments and should be given reasonable opportunity to do so. This also includes via online meetings if necessary.
  - External Examiners are guaranteed full independence to make judgements about the examination process and award of qualifications and no Examiner shall be dismissed for exercising such judgement;
  - No arrangement for marking made by Course Directors shall limit in any way the role of the External Examiner.

## **11.9 Resignation by the External Examiner**

- 11.9.1 Where an External Examiner is unable to continue with the role until the end of their appointment, or where an External Examiner is likely to be unavailable for an extended period of time during their appointment, the External Examiner should notify their primary contact at the University in writing, as soon as possible. Notification should be in sufficient time to enable appropriate alternative arrangements to be made so as not to impact on the assessment process and the student experience.
- 11.9.2 Resignations by External Examiners will be reported to the Education and Student Experience Committee.

## **11.10 Early Termination of External Examiner Contract by the University**

- 11.10.1 The contract with an External Examiner for a taught award may be terminated by the University before the end of the External Examiner's term of office in one or more of the following circumstances:
- Failure to disclose a relationship, contractual or otherwise, which may impair the integrity of the examination process and the independence of the External Examiner;
  - Failure to fulfil the terms of the contract by failing to attend meetings, and/or presenting the required report(s), and/or return students' work following examination;
  - Dismissal by the main employer of the External Examiner for improper conduct in relation to the person's employment, which may impair the integrity of examination process or the independence of the External Examiner;
  - Disbarment from being able to practise that may impair the integrity of examination process or the independence of the External Examiner, where there is a clinical or professional element to the Course of Study;

- Breach of University policies, including its Equal Opportunities Policy or equivalent.
  - The course or modules assigned have been withdrawn or suspended by the University for an indefinite period means that the post is no longer valid.
  - The University has made changes to its Board of Examiners operations which means that the post is no longer valid.
- 11.10.2 Any External Examiner whose contract is subject to early termination shall have the right of appeal to the Vice-Chancellor within 28 days of the issue of the notice of termination, who shall establish a panel of independent senior members of the University to hear and determine the matter, and make recommendations.

### **11.11 Attendance of Board of Examiner Meetings**

- 11.11.1 The University operates all of its Board of Examiners meetings online via MS Teams.
- 11.11.2 All External Examiner are full members of the relevant Board of Examiners and their participation is crucial to the assessment process. It is anticipated that the External Examiner will attend the relevant Board of Examiners meetings.
- 11.11.3 It is the primary contact's responsibility to ensure that all Module External Examiners are provided with the Board of Examiners meeting dates and virtual forum login details in order for them to attend. This also includes the Reassessment Board of Examiners.
- 11.11.4 Where a Module External Examiner is unable to attend a Module Achievement Board of Examiners meeting, or in the event of IT failure, then should submit brief written confirmation in advance of the meeting to their primary contact that they have:
- Reviewed the students' work from the allocated modules
  - Are satisfied that threshold academic standards have been maintained and that the assessment process measures student achievement rigorously and fairly
  - Are happy for the Chair of Module Achievement Board to sign-off the profiles for the relevant modules.
- 11.11.5 This confirmation should be provided using the External Examiner Board of Examiner Report Template.
- 11.11.6 This template will be provided to the External by the relevant Faculty in which the course resides. Please note this is NOT your final annual report.
- 11.11.7 External Examiners have the right to attend any meeting of a Board of Examiners of which they are a member.
- 11.11.8 No University credit or associated award shall be made without the participation of at least one fully appointed External Examiner.
- 11.11.9 External Examiners should have access to the full set of documentation provided to Board of Examiner members. In order to ensure the integrity of the process, all documentation should be provided to the External Examiner by secure means, such as via a restricted-access Blackboard site or in hard copy sent by Special Delivery.
- 11.11.10 An External Examiner participating in Board of Examiner meetings must do so from a location where they will not be disturbed by others and where the confidentiality of the Board of Examiner meeting will be maintained for the duration of the meeting.

### **11.12 Absence of External Examiner from Board of Examiner Meetings**

- 11.12.1 No meeting of a Board of Examiners shall take place in the absence of an External Examiner if that External Examiner indicates a wish to be present at the meeting. That is unless the Deputy Vice-Chancellor authorises the meeting to proceed as scheduled without the External

Examiner, in which case a report outlining the decision where this was taken will be submitted to the Academic Board.

11.12.2 There are circumstances in which the Chair of the Board of Examiners may view it as impractical for the External Examiner to attend the Board of Examiners. The following is not an exhaustive list, but suggest the circumstances in which the meeting may go ahead as scheduled without the External Examiner:

- there are few candidates, usually five or less, and the External Examiner has seen all the relevant work in advance;
- only reassessment candidates, or first sit candidates sitting along with reassessment candidates are considered, and the External Examiner was involved at an earlier stage. All decisions regarding awards and progression at these meetings are minuted and forwarded to the External Examiner(s);
- there is another External Examiner and the absent External Examiner was involved earlier for the same candidates. In such instances, the External Examiner must still be invited to the meeting and enabled to attend should he or she wish to do so.

11.12.3 Where no External Examiner is able to attend, the Chair of the Board of Examiners shall determine, in conjunction with the Course Director and the Director of Planning & Academic Administration, whether the Board of Examiners can proceed, and what categories of business must be deferred to a later meeting.

11.12.4 In the event that it is impossible for any External Examiner to attend the Board of Examiners, the following procedures must be adhered to:

- the primary contact must ask the External Examiner who is unable to attend to provide a written report on the candidates and the examination process for consideration by the Board of Examiners;
- where decisions about a candidate has to be deferred, this must be clearly recorded in the minutes of the Board of Examiners.

11.12.5 Following the Board of Examiners:

- the primary contact shall convey to the External Examiner a report on the proceedings as soon as practicable after the meeting;
- the primary contact shall obtain the written agreement of the External Examiner as to the decisions taken;
- the absent External Examiner should provide written agreement for any decisions taken where it was agreed that any External Examiner present would not confirm the decisions of the Board of Examiners on behalf of the absentee.

### **11.13 Annual Report Requirements**

11.13.1 The purpose of a Module External Examiner annual report is to: -

- Enable the relevant Course Director(s), internal examiners, the Faculty, and the Academic Board and its committees to judge whether academic quality and standards are being maintained;
- Make any necessary improvements; and to further develop the relevant course(s), immediately or at the next review as appropriate. It follows that this report is vital in the whole process of course review.

11.13.2 The purpose of a PAB External Examiner annual report is to provide assurance to Faculty Deans and Faculty Quality Committees of the following: -

- the written University procedures for progression, award and classification are being observed; that threshold standards are being maintained;

- the standards set for the award are appropriate for the level of the qualification.
- 11.13.3 External Examiners are asked to submit their reports ONE calendar month from the date of the Board of Examiner meeting.
- 11.13.4 In cases where a Board of Examiners meets more than once during the year, External Examiners are asked to provide the annual report ONE calendar month after the final Module Achievement Board or Progression and Award Board of Examiners for that academic year.
- 11.13.5 Prior to the Board of Examiner meeting, the Quality and Standards Office will provide each External Examiner a hyperlink to their own SharePoint folder where they can access their Annual Report to complete. This report will be pre-populated with the modules they have examined. If you are unable to access your report you should contact the Quality and Standards Office at [external-examiners@canterbury.ac.uk](mailto:external-examiners@canterbury.ac.uk)
- 11.13.6 External Examiners should complete their annual report by following the SharePoint link and then notify the Quality and Standards Office by email at [external-examiners@canterbury.ac.uk](mailto:external-examiners@canterbury.ac.uk)
- 11.13.7 More information on how to access your Annual Report can be found on the Information for External Examiners section of the Quality and Standards website.
- 11.13.8 External Examiners are asked not to name individuals, as annual reports will be made available to students and staff of the institution. The University reserves the right to request amendment to your report, where a report identifies a student or member of staff. Where reports are found to identify individuals, the External Examiner concerned will be asked to amend the report or, if this is not possible, the names will be removed, prior to publication.
- 11.13.9 Exceptionally, External Examiners are entitled to report any serious matter, particularly where it relates to academic quality and standards, directly to the Vice-Chancellor, in confidence.
- 11.13.10 Module External Examiner and PAB External Examiner Reports should be completed on the appropriate templates provided: <https://www.canterbury.ac.uk/quality-and-standards-office/external-examiners/information-for-external-examiners.aspx> and forwarded to the relevant Faculty Quality Office.
- 11.14 Consideration of Module External Examiner Reports and Feedback to Module External Examiners**
- 11.14.1 The Quality and Standards Office shall:
- Authorise payment for the External Examiner once the report has been received.
  - Make the report available to all staff and students of the University.
- 11.14.2 It is expected that all relevant course teams will contribute towards a written response to a report covering their modules (Response to the External Examiner Report). This should be a single document, which will highlight any good practice identified, discuss issues raised and draw attention to any actions that will be taken.
- 11.14.3 The consideration of a Module External Examiner's comments and the response is the responsibility of the whole relevant course team and not of a single individual or select group of individuals; as such a report should be discussed at such bodies as Boards of Study, Course Management Committees, Course Boards and Student-Staff Liaison Committees.
- 11.14.4 The Head of School shall:
- consider for approval the response written to a Module External Examiner report;
  - ensure that a report is made available to all members of academic staff teaching on the relevant course(s) including collaborative partners (where applicable) and all students on the relevant course(s);

- ensure that all issues raised by a Module External Examiner, either in their report or through other aspects of their role, are identified, including those for which action has already been taken, and given due consideration by the relevant course team(s);
- ensure that appropriate action is taken in response to all issues raised by a Module External Examiner, or ensure that the reasons why no action is taken are noted. Such actions will be communicated to all stakeholders in the relevant modules, including the Module External Examiner and, where appropriate, external bodies. Such actions will be monitored and evaluated through the course monitoring process
- ensure that when a Module External Examiners raises a significant issue, one that if not rectified threatens the standards of a module or course, the issue is reported on the appropriate pro forma to the Faculty Quality Committee, and thereafter to the Quality Monitoring and Review Sub-Committee. The reporting of the issue should also include how the issue will be addressed.

11.14.5 The Faculty Director of Quality shall:

- read all Module External Examiner Annual Reports for all courses managed by their faculty;
- ensure that each School Board of Study addresses all issues of significance related to quality matters and escalates issues to the University following the approved process;
- inform the Dean of Faculty of any issue of serious concern raised in an External Examiner's report;
- inform the Director of Quality and Standards of any serious issue of concern to the University arising in Module External Examiners' reports;
- inform the appropriate Faculty Director of Quality of any issue which is related to another faculty where there is joint working;
- ensure that any issue of significance, is considered by the Faculty Quality Committee, together with the action taken or to be taken in response;
- submit an annual report on issues raised in Module External Examiner reports to the Education and Student Experience Committee, normally in Semester 2.

11.14.6 The Faculty Director of Learning and Teaching shall:

- read all Module External Examiner Reports for all courses managed by their faculty;
- ensure that each School Board of Study addresses all issues of significance related to learning and teaching matters and escalates issues to the University following the approved process
- inform the Dean of Faculty of any issue of serious concern raised in an External Examiner's report
- inform the Director of Learning and Teaching of any serious issue of concern to the University arising in Module External Examiners' reports related to Learning and Teaching
- inform the appropriate Faculty Director of Learning and Teaching of any issue which is related to another faculty where there is joint working;
- ensure that any issue of significance, is considered by the Faculty Learning and Teaching Committee, together with the action taken or to be taken in response;
- (vii) Contribute to the Faculty's annual report on issues raised in Module External Examiner reports to the Education and Student Experience Committee, normally in Semester 2.

11.14.7 The Director of Quality and Standards shall:

- read a sample of Module External Examiner reports;
- draw to the attention of the relevant Faculty Director of Quality any issues of significance that relate to that faculty;

- inform the Deputy Vice-Chancellor of any issue of serious concern to the University, to enable the Vice-Chancellor to be made aware. This will enable the Vice-Chancellor to take any immediate action needed in the light of a serious issue raised in a report by a Module External Examiner;
- ensure that any issue of significance is considered by the Quality Monitoring and Review Sub-Committee, together with the action taken or to be taken in response;
- submit an annual report on issues raised in Module External Examiner reports to the Education and Student Experience Committee, for consideration by the Academic Board normally in the Lent Term.

#### **11.15 Consideration of Progress and Award Board External Examiner Reports and Feedback to Progress and Award Board External Examiners**

11.15.1 On receipt of a PAB External Examiner report, the Faculty Director of Quality will ensure the following:

- that all issues raised by the PAB External Examiner, either in their report or through other aspects of their role, are identified, including those for which action has already been taken, and given due consideration.
- that appropriate action is taken in response to all issues raised by the PAB External Examiner, or that the reason why no action is taken is noted. Such actions will be communicated to the Faculty Quality Committee.
- That the Chair of the PAB will produce the response to the PAB External Examiner. Where the Chair is the Faculty Dean, the response will clearly not require approval. If the Chair was the Dean's nominee, the response will need to be approved by the Dean.
- If any report suggests a serious problem, or one requiring urgent attention, the Faculty Director of Quality will contact the Director of Quality and Standards who will take the matter forward to the Deputy Vice-Chancellor directly.

#### **11.16 Right to Work Checks**

11.16.1 The University has a responsibility to check that external examiners have the right to work in the UK before work commences. Right to Work checks are a necessary step in getting External Examiners set up on HR&OD's staff record (enabling the payment of fees and expenses, and access to the VLE).

11.16.2 A Right to Work check would normally involve seeing the External Examiner with their passport in person (or other approved documentation) and any relevant visa and making a signed copy. Currently, Right to Work Checks are being carried out virtually via Microsoft Teams by the Quality and Standards Office.

11.16.3 The online Right to Work Check will be carried out by the Quality and Standards Office. As part of this process, all newly appointed External Examiners will be sent the following documentation to complete and return to [external-examiners@canterbury.ac.uk](mailto:external-examiners@canterbury.ac.uk)

- Personal Details form
- HMRC form
- Photo of the picture section of their passport with the passport number clearly visible.

11.16.4 The External Examiner will also be required to take part in a 5 minute video call via MS Teams with a member of the Quality and Standards team who will verify that the passport photo is an exact likeness, as well as take a screenshot of the passport. These details will be sent to the University's HR department who will produce a Staff Account for the External Examiner.

## **11.17 External Examiner Access to Blackboard and Other Computer Systems**

- 11.17.1 External Examiner access to the University's Virtual Learning Environment (VLE) Blackboard is given to enable an External Examiner to effectively carry out their duties and/or to facilitate access to the documentation required to enable them to carry out their duties effectively.
- 11.17.2 All External Examiners are entitled to a University computing account upon appointment. Staff Accounts are set up automatically once the External Examiner has completed their Right to Work check. Failure to complete the Right to Work Check will delay External Examiner set up on the University system. It is therefore essential the right to work check is completed before they start their duties.
- 11.17.3 Once a Staff account has been set up, HR will advise the External Examiner of their username and how to log on to the VLE. The Quality and Standards Office will also advise the primary contact of the External Examiner's username. The primary contact will be responsible for ensuring that an External Examiner has access to the relevant VLE sites to enable them to undertake their external examining duties.
- 11.17.4 External Examiners will be provided with access to the module Blackboards and will be able to review student work from across the mark bandings. The primary contact will provide a demonstration at their External Examiner briefing on how to access work in Turnitin.
- 11.17.5 Once an External Examiner has a University computing account, the primary contact will grant them have access to previous External Examiner's reports and associated course responses through the Staff intranet, upon request.

## **11.18 Payment of External Examiner Fees**

- 11.18.1 External Examiner fees are paid through the Quality and Standards Office to the amount of the fee set at the beginning of the term of office in the Confirmation of Appointment Letter and/or any subsequent Confirmation of Extension letters.
- 11.18.2 The fee for a Module External Examiner is based on the total credits for modules in their appointment in which samples of assessments are reviewed. As discussed above in point 2.2.2, not all modules will have samples of assessments to be reviewed, such as those at level 0 and level 4, and therefore will not count towards a Module External Examiner's fee. This is set out in the University Policy on the Payment of External Examiners Fee.
  - For credits up to 240 a fee of £300 will be paid;
  - For credits between 245 and 320 the fee will be £400;
  - For credits more than 320 credits the fee will be £500.
  - PAB External Examiners receive a fixed fee of £100.
- 12.5.1 Payment is made on the submission of the External Examiner's Annual Report (subject to 6.1.5). External Examiners for the Doctorate in Clinical Psychology are an exception to this rule; fees are paid at the end of the academic year when the course team can assess the division of labour. Fees can therefore change year on year for those External Examiners.
- 11.18.3 As long as an External Examiner has submitted completed Payroll forms, and a Right to Work check has been satisfactorily undertaken, the University (QSO) will automatically process the fee payment upon receipt of the report and no further action is required by the External Examiner.
- 11.18.4 External Examiner fee payments are processed via the University's Payroll system on the PAYE system. There is one payment run per month with forms needing to be submitted by around the 7th of the month for payment on the last working day of the month. Please note that if you submit your report after the cut-off date you will not be paid until the following month.

11.18.5 External Examiners can access their payslips via the University's self-service system, Staff Space. Information on accessing the Staff Space system and how to view payslips can be found in Appendix 10 of the External Examiner Handbook.

11.18.6 Essential additional visits will attract an additional fee of £50 per half day. Payment for additional days visits, if not set out in the Confirmation of Appointment Letter and/or any subsequent Confirmation of Extension letters, requires a claim to be submitted to the Quality and Standards Office on an annual basis.

### **11.19 Claiming Expenses**

11.19.1 Normally External Examiners are expected to make their own travel arrangements and claim this back through expenses from the University. The University can assist with accommodation arrangements providing sufficient notice is given.

11.19.2 Where External Examiners do make arrangements themselves and for all other expenses incurred, they will be reimbursed by the School in which the modules sit to which you are the appointed External Examiner. All expenses claims must be submitted on the University Expenses Claim form <https://www.canterbury.ac.uk/quality-and-standards-office/external-examiners/information-for-external-examiners.aspx>

11.19.3 Claims must be made in line with the University Guidance on Expenses for External Examiners.

### **11.20 Guidance on Drawing Up Responses to External Examiner Reports**

#### **General points:**

1. A single response can be made to a number of reports for the same course, as long as each external examiner can be reassured that their points are addressed.
2. For the avoidance of doubt, the response should be addressed directly to the External Examiner. It is not a response to the University.
3. Responses can be formulated in a number of ways. Versions using bullet point and other formats may be used. All issues identified in the report requiring action should be responded to using the action plan table, but there may be commentary alongside this.
4. Responses to external examiner reports are public documents that will be made available to all staff and students at the University, and must, therefore, be written in appropriate academic style, and must not contain typographical errors. The academic title of the external examiner must be used, and individual staff and students must not be mentioned by name or be identifiable in any way. Roles should be used to identify those responsible for completing actions within the action plan table.

#### **Suggested structure for a response to an external examiner's report**

1. Welcome the positive points in the report and to highlight areas of good practice.
2. Identify those areas which the external examiner report recognises as best practice and worthy of dissemination across the University, and describe how the matter is being taken forward. [Referral to institutional committees is not the only possible route.]
3. Identify the actions taken in response to points raised by the external examiner that unless addressed might indicate a failure to meet national expectations or might threaten the standard of the award. An example of this is where assessment methods are not designed well enough to meet the course learning outcomes. This response should be completed in consultation with the Faculty Director of Quality who will advise on whether the issue is of a significance that requires reporting separately to the university, if this has not already occurred. The specific actions to be taken should be included in the action plan table within the response template.

4. Identify the actions taken or to be taken in response to points raised by the external examiner that are matters of academic choice where the course team or department wishes to take positive action in response to these points to enhance the course. The specific actions to be taken should be included in the action plan table within the response template.
5. Discuss those issues raised by the external examiner where the course / school does not wish to take up the external examiner's suggestions. Please note that this applies only where the external examiner is reflecting on something that is a matter of academic choice.
6. External examiners' reports often raise issues where the University has taken a different policy stance. It is likely that the University has taken that decision for good reasons and will not wish to change that policy without substantial evidence that the current position is not the appropriate one. State that the issue raised conflicts with university policy and note the stance that the course team, school or faculty has decided to take in the light of the comment. This might be that the issue has been passed on for discussion or that the issue is to be taken no farther. The Quality and Standards Office or the Faculty Director of Quality will be happy to advise.

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AB	Academic Board
A(PA)P	Approval (and Partner Approval) Panel
ASC	Academic Strategy Committee
CCIP/PCIP	Course (Programme) Continuous Improvement Plan
CPSC	Collaborative Provision Sub Committee
BoE	Board of Examiners
EENP	External Examiner Nomination Panel
ESEC	Education & Student Experience Committee
FB	Faculty Board
FDLT	Faculty Director of Learning and Teaching
FHEQ	Framework for Higher Education Qualifications
FPPE	Faculty Portfolio Planning Executive
FQC	Faculty Quality Committee
FDQ	Faculty Director of Quality
FAP	Faculty Ethics Panel
FLTAC	Faculty Learning, Teaching & Assessment Committee
HoC	Head of Centre
HoD	Head of Department
HoS	Head of School
LTE	Learning and Teaching Enhancement
LTS	Learning and Teaching Strategy
MoA	Memorandum of Agreement
MoU	Memorandum of Understanding
PO	Planning Office
PCR/PPR	Periodic Course (Programme) & Partnership Review
PSQC	Professional Services Quality Committee
QMRSC	Quality Monitoring & Review Sub-Committee
QSO	Quality and Standards Office
RDSC	Research Degree Sub-Committee
RPCL	Recognition of Prior Certificated Learning
RPEL	Recognition of Prior Experiential Learning
RPL	Recognition of Prior Learning
RQEEG	Research Quality Enhancement & Excellence Group
SAP	Standing Approval Panel
SLS	Service-Level Statement

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## GLOSSARY

*A glossary of the terms used in this manual.*

Academic Framework for the Design and Delivery of University Awards	A document that articulates the structures in place for the operation of the University's awards. It sets out the requirements and attributes for the design and delivery of University awards with which all courses must comply.
Accreditation	The process by which the University allows greater autonomy in areas of quality assurance to partners that are working with the University to confer a University award, and which over a period of time have demonstrated their ability to have management of quality and enhancement delegated to them. The University does not at the present have such arrangements. Offering validated courses does not in itself evidence the capacity to so act.
Additional Regulations	A set of regulations approved by Academic Board for academic courses, such as joint awards and jointly approved programmes, which are additional both to the University Regulations and Special Regulations.
Advanced Standing	The use of a prior certificated award to gain entry to a programme at a level or stage of study later than the normal entry point;
Articulation agreement	An articulation agreement is a formal agreement that allows specific credit that has been gained from one higher education institution to be transferred to another institution as advanced standing. The right to such advanced standing applies to all students covered by the agreement, who have gained that specific credit, without a further consideration of that credit, subject to any limitations set out in the agreement. An articulation agreement is therefore covered by Chapter B10 of the <i>UK Quality Code for Higher Education</i> , as the University in receipt of the credits will need to assure itself of the quality and standards of the learning that is undertaken at its partner and cannot do this through an assessment of the achievement of the individual student. It contrasts therefore with RPL (qv) where there is no prior commitment to offer a student advanced standing and where entry is dependent on an assessment of the achievement of a student, and with a Progression Accord (qv), where no credit is being imported and where there may be additional hurdles, such as an interview.
Blended learning	Course delivered using a combination of traditional classroom-based learning and distance learning, normally using such information technologies as video-conferencing, audio-conferencing, Internet, and other media, and underpinned by effective learner support systems.
Board of Study	Boards of Study monitor and oversee course development and performance throughout the academic year and course approval cycle.

Characteristics Statements	The QAA has published characteristic statements for four areas of academic activity (i) Doctoral degrees, (ii) Master's degrees, (iii) Foundation degrees, (iv) Qualifications involving more than one degree-awarding body. It is University policy that its awards should be consistent with these.					
Collaborative provision	Collaborative Provision is an arrangement in which a higher education institution enters into partnership with another organisation to offer academic courses together. Collaborative courses are primarily those where students are registered as students of the University but study in whole or in part at another organisation. Students are registered as students of the University and receive an award from the University, the standard of which is guaranteed by the University as equivalent of the awards it delivers entirely itself.					
Credit	<p>Credit is an educational currency that provides a means of quantifying learning achieved at a given level of study. It is awarded to students who have demonstrated that they have attained the specified intended learning outcomes of a module/course. The amount of credit attributed or awarded is based upon an estimate of the notional average time which it would take the student to acquire the specified learning at a given level. Credit is awarded for achievement at or above a threshold or pass level. One credit is attributed to 10 hours of notional learning time at a specified level.</p> <p>120 credits are attributed to the learning acquired at a particular level in a full-time academic year of approximately 30 weeks. One full-time academic year involves 1200 hours of notional learning time; one full time week involves 40 hours of notional learning time.</p> <p>Students using RPL for Advanced Standing may "reuse" credits that have already been used for other awards but only on one occasion. Credit cannot be re-used for other purposes except to support an RPEL application. Only the credits and not the marks or grades derived from those credits can be re-used.</p> <p>Where credits are re-used for Advanced Standing it is expected that they will only be used for a purpose different from their original use. This is an academic decision to be taken when the admission decision is made.</p>					
Credit Framework	The University currently manages the majority of its taught awards through the Regulation and Credit Framework. This sets out the architecture of taught undergraduate and taught postgraduate awards.					
	HE qualifications as set out in the FHEQ	FHEQ Level	Minimum credits	Minimum at award level	FQ-EHEA cycles	ECTS credit ranges from the FQ-EHEA
	PhD/DPhil	8	Not typically credit-rated		Third cycle (end of cycle) qualifications	Not typically credit-rated
	Professional doctorates (e.g. EdD, DBA, DClinPsych)		540	360		
	Research master's degrees (e.g. MPhil, MLitt)	7	Not typically credit-rated		Second cycle (end of cycle) qualifications	The minimum requirement is 60 ECTS credits; however a range of 90-120 ECTS credits is more typical at second cycle level
	Taught MPhil		360	240		
	Taught master's degrees (e.g. MA, MSc, MRes)		180	150		
	Integrated master's degrees (e.g. MPharm)		480	120		
	Postgraduate diplomas		120	90		
Postgraduate Certificate in Education (PGCE)	60		40			

	Postgraduate certificates		60	40		
	Bachelor's degrees with honours (e.g. BA/BSc Hons)	6	360	90	First cycle (end of cycle) qualifications	180-240 credits ECTS credits
	Bachelor's degrees		300	60		
	Professional Graduate Certificate in Education (PGCE)		60	40		
	Graduate diplomas		80	80		
	Graduate certificates		40	40		
	Foundation Degrees (e.g. FD)		5	240	90	Short cycle (within or linked to the first cycle) qualifications
	Diplomas of Higher Education (Dip HE)	240		90		
	Higher National Diplomas (HND)	240		90		
	Higher National Certificates (HNC)	4	120	120		
	Certificates of Higher Education (Cert HE)		120	90		
Distance learning	Distance learning is a mode of study in which students undertake courses of study outside and institutional environment and usually without face-to-face tuition. Distance Learning course documentation requires specific information detailing how the distance learning course will operate and be managed and how quality and standards are to be assured. Academic standards for distance learning and the quality of provision should be equivalent to those offered at the University. Distance-learning materials required for the operation of the course must be prepared in advance of the course approval process.					
Framework for Higher Education Qualifications	<p>The main purposes of <i>The framework for higher education qualifications in England, Wales and Northern Ireland</i> (FHEQ), as summarised from page 6 of the second edition of the framework (August 2008) are:</p> <ul style="list-style-type: none"> <li>To provide reference points to set and assess standards</li> <li>Assist in indicating progression routes</li> <li>Promote a shared understanding of expectations associated with typical qualifications.</li> </ul> <p>The framework provides level descriptors at levels 4-8. The design of University courses embeds the FHEQ. Level descriptors must be utilised in course design.</p> <p>This is subsumed within Part A of the <i>UK Quality Code for Higher Education</i> (qv).</p> <p>See also Higher education credit framework for England.</p>					
Franchise	A collaborative provision arrangement where a partner works with the University to confer a University award or credit that has been developed within the University.					
Higher education credit framework for England	The <i>Higher education credit framework for England: guidance on academic credit arrangements in higher education in England</i> (August 2008) offers guidance for course credit arrangements. Please note that the University does not offer all these awards.					

Intended learning outcome	Intended Learning Outcomes identify what a successful student is expected to achieve on the completion of an award. They embody the educational purposes and values of the overall learning experience within a course of study and provide the strategic framework for the process of learning.
Level	<p>The University recognises the following higher education levels of achievement:</p> <p>Level 0: University learning, such as a Foundation Year of a degree, that does not result in the award of HE credit but may comprise the first year of a four-year course of study.</p> <p>Level 4: Certificates of Higher Education</p> <p>Level 5: Foundation degrees, Diplomas of Higher Education</p> <p>Level 6: Ordinary (Bachelors) degrees, Bachelor's degrees with Honours, Graduate Certificates and Graduate Diplomas, Professional Graduate Certificates in Education</p> <p>Level 7: Masters degrees, Postgraduate Certificates, Postgraduate Diplomas, Postgraduate Certificates in Education</p> <p>Level 8: Doctorates</p>
Module	A module is a component of study within a course. Each module has its own aims and intended learning outcomes which are assessed during that module. A University module normally represents a notional 200 hours of study and carries 20 credits.
Non-credit bearing courses and courses	<p>Courses that do not carry HE credit but result in an award of the University and are subject to the same regulations. These may be allocated to Levels 0-8 in the Framework for Higher Education (QAA).</p> <p>Where a course or course does not carry credit, these will follow the same planning, approval and review processes as would a credit-bearing course with a comparable learning time.</p> <p>Courses which offer an attendance certificate are classed as non-credit bearing courses and must follow the appropriate planning, approval and review process. The FDQ will advise as to what constitutes a course for this purpose.</p>
Pathway	A pathway is normally used to denote a route through a course that carries a discrete award of the University. The term pathway was in use for course approval purposes until September 2021.
Professional, Statutory and Regulatory Body	<p>A Professional, Statutory or Regulatory Body (PSRB) is an organisation which is authorised to accredit, approve or recognise specific courses.</p> <p>Faculty Quality Committees have responsibility for the oversight of the reports by Professional, Statutory and Regulatory Bodies. Annual reports regarding PSRB activity are received by the Quality Monitoring and Review Sub Committee.</p>
Course	<p>A course is an approved curriculum which provides a coherent academic experience, expressed in its generic aims and objectives, followed by a registered student and leading to a named award.</p> <p>The University termed this a 'programme' before September 2021.</p>

Course Approval	Mechanism for the approval of an academic course of study.
Progression agreement	A formal agreement that allows a student who completes one qualification entry to another, subject to any limitations imposed by the accord. Where limitations exist, they may include specific levels of achievement on the award that has been completed, or additional hurdles such as an interview. Unlike an Articulation Agreement (qv), the institution receiving the student does not take any responsibility for the standards of the award to be achieved for entry.
Quality Strategy Group	A Group, comprising key members of the Quality and Standards Office and the Faculty Directors of Quality, which meets weekly to consider key strategic and operational issues relating to academic quality. It is not a decision-making body and it is not a substitute for University-wide consultation or for the deliberative function of University committees and sub-committees.
Recognition of prior learning (RPL)	A process that recognises learning undertaken outside the course of study being taken. This can be through either: <ul style="list-style-type: none"> <li>• Recognition of prior certificated learning (RPCL) - the use of prior certificated credits to gain exemption from specific module(s) within a University programme of study, where no credit is awarded by the University, including Advanced Standing;</li> <li>• Recognition of prior experiential learning (RPEL) - the use of recent previous professional or non-certificated experience to gain exemption from part of a University programme of study, where credit is awarded by the University.</li> </ul>
Regulations	A set of rules approved by Academic Board that must be followed. They include course specific Special Regulations. Regulations cannot be set aside or qualified by a subsidiary process. The University's regulations are set out in the Regulation and Credit Framework.
Special Regulations	This denotes a regulation that is approved to extend or vary the University regulations for a course or group of courses. These are distinct from Additional Regulations.
Short Course	A short course is a course of study of no greater than 400 hours learning time, usually but not always credited, and which normally leads to a University Certificate.
Subject benchmarks	'Subject benchmarks provide a means for the academic community to describe the nature and characteristics of courses in a specific subject. They also represent general expectations about the standards for the award of qualifications at a given level and articulate the attributes and capabilities that those possessing such qualifications should be able to demonstrate.' (The Quality Assurance Agency for Higher Education).  Where they exist, subject benchmarks should be consulted in the designing of courses and, where appropriate, reflected in the aims and intended learning outcomes for those courses. Unquestioning adherence, however, is not required. Course designers are encouraged to use them selectively - to adopt those which apply to the design of their particular course and where necessary to give reasons why others are not applicable or relevant. It is important that course documentation is clear and explicit about how the relevant benchmark statements have been used.
<i>UK Quality Code for Higher Education</i>	The <a href="#">UK Quality Code for Higher Education</a> sets out the formal expectations that all UK higher education providers reviewed by QAA [The Quality Assurance Agency] are required to meet. It is the nationally agreed, definitive point of reference for all those involved in delivering higher education courses that lead

	to an award from, or are validated by, a UK higher education awarding body (a provider entitled to award degrees). All higher education providers reviewed by QAA must commit to meeting the expectations that it sets out.
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