UNIVERSITY OF HERTFORDSHIRE
ACADEMIC STANDARDS AND AUDIT COMMITTEE

Amendments to UPR AS17 (Academic Quality) for 2022/23

This paper summarises the proposed amendments to UPR AS17 for the 2022/23 academic year.

1. *Continuous Enhancement Planning (CEP) Process*

A Continuous Enhancement Planning (CEP) process was introduced in September 2021, to eventually replace the Annual Monitoring and Evaluation (AMER) reporting process for the University's taught provision. Now that the process has been introduced, the following amendments to UPR AS17, section C2 have been approved:

C2 ~~Annual~~ *Ongoing* **Monitoring and Evaluation**

C2.1   This section defines the formal quality assurance regulations required for the annual monitoring and evaluation of all programmes leading to University awards and credit- rated short course provision. *With the exception of credit-rated short course provision and agreed programmes offered in collaboration with other institutions, the Continuous Enhancement Planning process is followed. For agreed collaborative provision and credit-rated short course provision, the Annual Monitoring and Evaluation Report process is followed.*

C2.2   The Continuous Enhancement Planning (CEP) Process

C2.2.1   The Continuous Enhancement Planning process outputs are:

   i   a 'live' action plan (the CEP action plan) owned by the Programme Team, and located within the University's CEP database;

   ii   Programme Leader and Programme Team engagement with specified School or Department enhancement activities;

   iii   for degree and higher apprenticeship programmes, a relevant section of the action plan will form the basis for the School level Self-Assessment Report and Quality Improvement Plan that are required for Ofsted.

C2.2.3   The regulations seek to reflect a risk-based approach and to maintain a self-critical academic community supporting programme teams in their continual efforts to maintain academic standards, to improve the quality of learning opportunities and to enhance the student experience by an ongoing, evidence informed monitoring process, with effective oversight at School and University level.

C2.2.4   Each Programme Committee is required to agree a CEP action plan on an ongoing basis. The CEP action plan will be a standing item on the Programme Committee agenda. The ownership of the action plan is with the Programme Team and with the agreement of the Programme Committee, the Programme Leader may add actions as issues arise.

C2.2.5   The maintenance of the CEP action plan is the responsibility of the Programme Leader, on behalf of the Programme Committee. The Programme Leader (or nominee) must attend and engage in specified enhancement activities organised by the School and add any agreed actions to the programme's CEP action plan.

C2.2.6   The Programme Leader must consult the University-generated metric summary data after each specified data release point and where a particular data set is rated red for the programme against the relevant benchmark, an action must be initiated within six weeks of the data release point.

C2.2.7   The Programme Leader must develop an action point in the CEP action plan for all recommendations made by an External Examiner in their Annual Report (not just those in section 8 and 9 of the report).

1st September 2022

C2.2.8 Associate Deans of School (Academic Quality Assurance) are responsible for:

i ensuring that School enhancement activities take place that meet the requirements of the CEP process by giving consideration to how programme CEP action plans might adopt (i) good practice and (ii) reflect School- and Department-wide enhancement actions and the University's strategic direction. They will invite the appropriate Associate Director of Academic Quality Assurance and the LTIC Learning and Teaching Specialist and monitor the engagement of Programme Leaders and programme teams; and

ii maintaining oversight of all the School's CEP action plans and signing off completed actions in the CEP database. Associate Deans (AQA) will (a) check that data sets rated red from Tableau, External Examiner Reports, SVQs and qualitative student feedback that requires an action have been included in the CEP action plan and that an action has been initiated within an appropriate timescale, (b) check actions agreed as part of enhancement activities have been included, (c) work with Associate Deans (L&T), Subject /Associate Heads and other academic managers as prescribed by the School, to advise programme teams on the appropriateness of the actions and the response times, and to evaluate the impact of actions; and

iii ensuring that External Examiners receive a snapshot of the CEP action plan along with the response to the External Examiner report; and

iv working with their Associate Director of Academic Quality Assurance and LTIC Learning and Teaching Specialist to develop and deliver workshops, training, and resources to support programme teams as required; and

v submitting an annual report on Academic Standards and Quality to ASAC and ESEC, which includes a summary of the key issues arising from the School's CEP action plans (see further UPR AS 17 C4.3).

C2.2.9 The Associate Dean of School (AQA), the Associate Dean of School (L&T) and the Associate Director from CAQA will all have access to comment on the CEP action plan database, but the Associate Dean of School (AQA) will be responsible for signing off when the actions are satisfactorily completed.

C2.2.10 The appropriate Associate Director of Academic Quality Assurance will take a risk-based approach to sampling CEP action plans and review School-wide student performance data. They will report to the final School Academic Committee on (a) areas of good practice (b) areas for improvement of particular note or that are common across programmes and on (c) any support that is recommended for Programme Teams and on (d) how the delivery of the support has been shared between the Associate Director of Academic Quality Assurance, the LTIC Learning and Teaching Specialist, and the Associate Deans of School (AQA) and (L&T).

C2.2.11 The School Academic Committee may:

i require a review of a programme or subject area; or

ii report immediately to the DAQA if academic standards are considered to be at risk.

C2.2.12 Academic Registry is responsible for updating the programme and programme leader information in the CEP database and for arranging access for relevant staff.

C2.2.13 Schools will comply with any additional or alternative programme annual monitoring requirements of any PSRB, accreditation or funding body.

C2.2.14 Schools will have in place a risk-based process for module evaluation which addresses:

(i) student performance data; and

(ii) student feedback; and

(iii) External Examiner feedback; and ensures that

(iv)   any agreed programme level actions are incorporated into the delivery of the module.

C2.2.15 Each School has responsibility to set up at least one School- or Department-wide enhancement activity per academic year requiring Programme Leaders and programme teams to attend to:

i   share good practice, including actions that have led to improved data outcomes; and

ii   develop further their CEP action plan to reflect (i) School- and Department-wide enhancement actions; and (ii) the University's strategic direction.

C2.2.16 Schools will determine the timing and number of enhancement activities to be held in the School each year, whether such activities are held at School or Department level and effective ways to integrate the action plan enhancement activities into existing activities (e.g. Away Days, Learning and Teaching events).

C2.3   The Annual Monitoring and Evaluation Report (AMER) process

C2.3.1   The regulations seek to maintain a self-critical academic community, in which individual members of staff are committed to the ongoing appraisal of their teaching, learning and assessment methods and to the dissemination of good practice.

C2.3.2   The following sections are applicable to credit-bearing short courses and to *agreed* programmes offered in collaboration with other institutions.

C2.3.3   Each Programme Committee is required to agree and submit an Annual Monitoring and Evaluation Report on the operation of the programme during the previous Academic Year.

C2.3.4   For the purposes of annual monitoring of credit-rated short course activity, each School is required to prepare and submit an Annual Short Course Monitoring Report (ASCMR). If a School's short course activity is sufficiently large and complex then it may decide that more than one annual report is appropriate.

C2.3.5   Guidance on the completion and templates for *AMERs* and ASCMRs is available on the Centre for Academic Quality website. AMERs and ASCMRs must comply with and use the University templates.

C2.3.6   The preparation of the AMER is the responsibility of the Programme Leader (or equivalent), on behalf of the Programme Committee. The preparation of the ASCMR is the responsibility of the Dean of School (or nominee).

C2.3.7   AMERs and ASCMRs should be completed by a date agreed by the ADoS(AQA). The ADoS(AQA) may also agree AMER completion dates for programmes that do not conform to the normal academic calendar.

C2.3.8   The SAC or, where established, a working group of the SAC, will approve procedures for the consideration of AMERs and ASCMRs.

C2.3.9   Following discussion and agreement by the Programme Committee, the AMER will be presented for consideration in accordance with the University's procedures, as soon as possible after the end of the academic session to which it relates. ASCMRs are discussed and agreed by the relevant academic School/Department, prior to consideration by the SAC or, where established, a working group of the SAC.

C2.3.10 An action plan will be maintained for each programme AMER and ASCMR and will be reviewed and further developed during the School's and/or Programme Committee's monitoring of the full report.

C2.3.11 All AMERs and ASCMRs will be considered by the SAC or, where established, by a working group of the SAC, which may:

i   approve the AMER or ASCMR;

ii   refer the AMER back to the Programme Committee;

iii	refer the AMER or ASCMR back to the ADoS(AQA) or Dean of School;
iv	require a review of a programme or discipline;
v	report immediately to the DAQA if academic standards are considered to be at risk.

C2.3.12 The ADoS(AQA) is required to submit an annual report on Academic Standards and Quality to ASAC, which includes a summary of the key issues arising from the School's AMERs and ASCMRs. The Annual School Report to ASAC is described further in section C4.

C2.3.13 The Student Administration Service Manager *or Assistant Registrar (Collaborative Partnerships),* where relevant is responsible for sending approved AMERs ASCMRs to Programme, Module and Short Course External Examiners (as appropriate).

C2.4   Annual monitoring and evaluation of Collaborative Provision

C2.4.1 The above procedures *(see section C2.3)* will apply unless otherwise specified in Memoranda of Agreement or it is agreed that the CEP process will be followed. *The Collaborative Partnership Leader will be present at the SAC Working Group that considers the AMER, and representatives of Partner Organisations are invited to be present during discussion of the AMERs and ASCMRs and appropriate feedback on the discussion will be provided to the Programme Committee in the Partner Organisation.*

C2.4.2 In cases where a programme is taught in the HHEC reference should be made to the Consortium Quality Handbook.

C2.4.3 For the purposes of annual monitoring of credit-rated short course activity in externally-accredited partners, each partner is required to prepare and submit an Annual Short Course Monitoring Report ~~(ASCMR)~~. If a partner's short course activity is sufficiently large and complex, then the School may decide that more than one annual report is appropriate.

~~ii   The Collaborative Partnership Leader will be present, and representatives of Partner Organisations are invited to be present during discussion of the AMERs and appropriate feedback on the discussion will be provided to the Programme Committee in the Partner Organisation.~~

~~iii   In cases where a programme taught in the University is also delivered in a Partner Organisation, there will be a separate AMER for the University programme and for the Partner programme. These will be considered separately through the School's annual monitoring and review procedures. The Partner Organisation's signed-off programme AMER, together with the minutes of the SAC discussion on the AMER or, where established, those of a working group of the SAC, will be routinely copied by the Student Administration Service Manager to the Programme Leader in the Partner Organisation.~~

~~iv   In cases where a programme is taught in the HHEC reference should be made to the Consortium Quality Handbook.~~

~~v   For the purposes of annual monitoring of credit-rated short course activity in externally-accredited partners, each partner is required to prepare and submit an Annual Short Course Monitoring Report (ASCMR). If a partner's short course activity is sufficiently large and complex, then the School may decide that more than one annual report is appropriate.~~

2. Partner re-approval

The Academic Development Committee (ADC) formally re-approves collaborative partnerships through (i) formal Committee re-approval every 6 years (following appropriate due diligence) and (ii) re-approval of the legal agreement (again, following appropriate due diligence). It has been agreed that these two processes should be aligned. The following changes to UPR AS17, section D3.5 have been therefore approved:

D3.5   Re-approval of a Partnership

D3.5.1   Approval of a Partner Organisation will *typically* be for a maximum period of six (**6**) years*, and in parallel with renewal of the legal agreement*. Towards the end of this period, AS (in consultation with the School, the International Advisory Board *Operational Group* (IAB *Ops)* or UK Collaborative Provision Advisory Group (UKCPAG), as appropriate, with Legal Services and the Director of Academic Quality Assurance) will initiate a formal review, including *appropriate due diligence* (see section *D3.5.2, ii*). The aim will be to re-confirm that the Partner Organisation continues to meet the criteria for partnership. The review and re-approval of a Partner Organisation may take place alongside validation or revalidation of one or more programmes. *The refreshing of due diligence checks may also take place midway through a contract with a Partner Organisation which exceeds six (6) years. The Collaborative Partner Assurance Group may also consider and advise ADC in relation to any issues identified as a result of due diligence exercises.*

D3.5.2   The process of re-approval is as follows.

   i   The *International Advisory Board Operational Group (IAB Ops) or UK Collaborative Provision Advisory Group (UKCPAG), as appropriate,* will be invited to confirm, in principle that the partnership should continue, through submission of form *ADC2d*.

   ii   The extent of *associated due diligence* could include:

      a   an Institutional Audit, undertaken *by AS* with the *re*-validation;

      b   Financial *due diligence* (initiated by AS) through the scrutiny by a senior University finance officer of the most recent set of audited accounts of the Partner Organisation who provides a written professional opinion;

      c   *Legal due diligence, through the scrutiny by a senior University Solicitor of the Partner Organisation's legal, governance and regulatory documentation, who (if requested) provides a written professional opinion;*

      d   a review of the *legal* agreement with a new document to be signed by both parties in the event of re-approval;

      e   for partners with large and cross-School provision, the most recent Quality Liaison Manager's Annual Report.

   iii   The identified information will then be considered by ADC *which shall decide whether re*-approval will be formally granted *or not, and* subject to any conditions that must be met. Any associated re-validation of the programme will be conditional upon the conditions for partner re-approval being met.

D3.5.3   The validation status of programmes offered in collaboration with an approved partner is dependent upon continuing approval of the partnership and not vice versa, see <u>section</u> D10.

3. Apprenticeship Policy: quality assurance and guidance for apprenticeship Programmes

The University approved a new UPR (UPR AS17, Appendix I) for the quality monitoring and review of its Apprenticeship provision 2021.It defines the internal quality assurance and compliance arrangements for all apprenticeships delivered by the University of Hertfordshire as a Lead Provider or through a partner organisation via a subcontract arrangement. For 2022/23, the UPR has been amended to clarify:
- The Initial Needs Assessment process for new Apprentices; and
- The professional development of staff delivering apprenticeship training.