Chapter 3
Monitoring and Review

Updated October 2023

Contents

INTRODUCTION

This chapter describes the overarching processes that the University adopts to ensure the continuing standards and quality of its academic provision the University – **Annual Monitoring, Curriculum Review** and **Internal Audit**.

The University recognises that effective, risk-based monitoring and action planning activity takes place on an ongoing basis and is not limited to annual processes. The University therefore employs a continuous Monitoring Framework (see Figure 1) to ensure the continuing standards and quality of its academic provision. The processes described below form part of this overarching framework and fully aligned with the Quality and Standards Conditions B1 to B5 of the Office for Students' (OfS) Regulatory Framework for Higher Education in England, which includes the mandatory Sector Recognised Standards[1]. Processes are informed by the Framework for Programme Reviews: ensuring the value of courses (Universities UK, 2022).

Annual Monitoring is the capstone process through which the University ensures the continuing standards and quality by taking a holistic look at performance data at a fixed point each year and identifying any emerging trends. The annual monitoring process considers comprehensive quantitative and qualitative evidence on programme performance and the students' academic experience and alerts the Academic Quality Enhancement Committee (AQEC) - and through it, the Academic Board - to any internal or external factors that could place academic provision, including academic partnerships, at risk.

It also enables the identification of good practice for wider dissemination within the University for the purpose of quality enhancement[2]. Outputs from departmental annual monitoring are used to inform the University's academic planning[3] and budget-setting processes.

Curriculum review is five-yearly review of an academic department's taught degrees at both programme and module-level (or year of study if non-modular). The purpose of Curriculum Review is to establish that the curriculum is being actively refreshed and remains up-to-date and coherent; and to confirm that each programme's award title, aims and learning outcomes remain valid and achievable. Successful curriculum review confers continuing approval of the programmes until the next scheduled review.

The purpose and process of **Internal Review** varies according to particular requirements and may *risk-focused*, or *enhancement-focused*, as required.

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[1] The '*Framework for Higher Education Qualifications*' (QAA 2014) as adopted by the OfS.
[2] See Chapter 1.
[3] See Chapter 4

Planning cycle:	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb
Key Reporting Milestones		• Spring Planning Overview report from each faculty to AQEC [quality enhancement] and APC [academic development / business planning]			• Annual Monitoring Update Report to Academic Board. • Annual Retention Report and Institutional Action Plan to Academic Board.		• Report on programmes closed in the previous academic cycle to APC.		• External Examiner Report & Response Overview to EESC.	• Academic Malpractice and Degree Outcomes Data (AQEC) • Autumn Monitoring Overview Report (AQEC) • Academic Assurance Report (Academic Board) • Annual report on degree outcomes (Academic Board).		• Academic Assurance Report to Governors
Principle Institutional Monitoring and Review Functions [process owner]	*Spring Planning [Faculty]*	*Budget Setting [Finance]*					*Autumn Monitoring & Enhancement [GQASC]*					
Faculty/Department Action Plan Updates			• APP - gap analysis	• Progression Metric - Graduate Outcomes analysis	• NSS - analysis		• Continuation and completion data				• In-year retention analysis	
Institutional Steering Group			• APP Steering Group	• Student Outcomes Steering Group	• Student Experience Steering Group		• Student Outcomes Steering Group					
Local Programme Monitoring	In-year withdrawals, Student attendance (Qwickly), Module modifications log updates,											
		• Student Voice Survey (course & modules)					• Review of module curriculum (expiry). • Programme Responses to external examiners.		• Student Voice Survey (course)	• Student Voice Survey (modules)		
Ad hoc enhancement, intervention and review.[1]	Development Enquiry (Enhancement); Thematic Support Panel (Targeted Intervention and Support); Risk Assessment Meeting (Risk Mitigation)											
Fixed Point Potential Triggers (surveillance)	• HESA Non-continuation data	• Student Voice Survey (course & modules)	• OIA Annual Complaints Statement	• Academic Development Plans • Hot modules • Graduate Outcomes	• NSS	• External Examiner comments	• Continuation • Completion • Overall Module Pass rates		• Student Voice Survey (course)	• Academic Malpractice • Degree Outcomes • Student Voice Survey (modules)	• HESA Degree Outcomes analysis	
Ongoing potential Triggers (surveillance)	OfS Notification, Student Complaints (Serious), Withdrawal rates, Changes to Subject-Benchmark-Statements / PSRB requirements / Sector-recognised Standards.											

Figure 1: University Monitoring Framework

THE UNIVERSITY MONITORING FRAMEWORK

The University's Monitoring Framework is based on the premise that:

- Staff at all levels of the Institution are responsible and accountable for maintaining standards and enhancing the quality of students' learning opportunities.
- Shared responsibility and accountability require frank and open exchanges between departments, Faculties, support services and the University (Directorate).
- The processes by which both opportunities and threats to standards and quality are defined, identified and assessed should draw fully on a range of expertise and experience from within and outwith the University's executive and deliberative structures

Key features of the Monitoring Framework (see Figure 2) are that it is:

- **Evidence-based** – a feature of the Monitoring Framework is a new data dashboard, designed to enable academic departments to engage with key performance indicators for Academic Quality and Standards on an ongoing basis. The dashboard brings together various sources of quantitative data including module pass rates; internal progression,[4] retention,[5] and withdrawal data, degree outcomes,[6] the National Student Survey (NSS), Graduate Outcomes,[7] and OfS B3 Data. The Monitoring Framework also draws upon a range of qualitative data sources including staff and student feedback (e.g. module leader reports, Student Pulse Surveys, minutes of Programme Boards and Student-Staff Consultative Fora (SSCFs)[8] and other evidence of feedback as appropriate); reports of external examiners[9] and Professional Statutory and Regulatory Bodies (PSRBs).
- **Risk-based**[10] - drawing upon the experience and expertise of staff and other stakeholders[11] to identify and evaluate potential opportunities and threats, and to propose targeted and proportionate actions to *mitigate* risk. In helping AQEC to form a view about a department's ability and capacity to manage risk, Monitoring plays an important part in confirming confidence in the University's managers and staff.

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[4] The **Internal Progression Rate** is the % of students who 'pass' the year and are eligible to progress to the following year, or who have completed the programme (if they are finalists). Any students who do not have a result yet because they have interrupted, or are referred or deferred, are excluded from the calculation.

[5] The **Internal Retention Rate** is the % of students registered on the programme who returned to the University the following academic year (however briefly), including those who are repeating the year, interrupting or transferring to another programme. This measure is not meaningful for finalists so it is only calculated for non-finalists.

[6] **Internal Completion** is where a student has finished a programme of study and been awarded a university qualification.

[7] Graduate Outcomes Progression Rate is the proportion of graduates in professional employment, further study, or who are retired, travelling, or caring. www.graduateoutcomes.ac.uk.
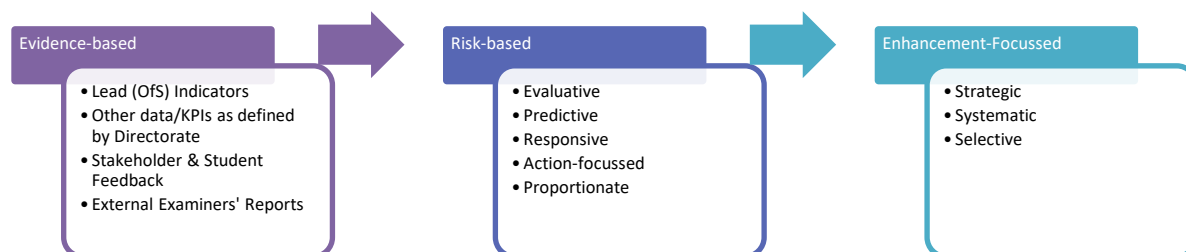
[8] See Chapter 6.

[9] See Chapter 2.

[10] For a more detailed description of the University's approach to academic risk management see Chapter 1.

[11] Who may include: relevant academic and professional communities; external examiners; regulatory bodies; collaborative partners; employers; service users and carers; and graduate alumni.

- **Enhancement-focused[12]** – enabling the systematic identification and evaluation of good practice that is suitable for general dissemination for the purpose of enhancing quality across the Institution.

Figure 2: Key Features of the University's Monitoring Framework

Evidence-based	Risk-based	Enhancement-Focussed
• Lead (OfS) Indicators • Other data/KPIs as defined by Directorate • Stakeholder & Student Feedback • External Examiners' Reports	• Evaluative • Predictive • Responsive • Action-focussed • Proportionate	• Strategic • Systematic • Selective

ANNUAL MONITORING

The Annual Monitoring process described in this chapter is focused primarily on academic departments, however the engagement of Faculties and academic-related professional support services enables full and holistic consideration of issues affecting academic standards and quality at Institutional level; for example, outputs from Annual Monitoring can be used to inform Directorate decisions on academic strategy and resources. The minuted discussions of Faculty Boards (or their sub-committees) and AQEC help assure staff and students that issues raised by them during Annual Monitoring have received appropriate consideration.

While fixed-point Annual Monitoring provides a clear focus for identifying and resolving risks, monitoring itself is continuous[13]. To this end, all staff are made aware of their responsibility to alert managers to any issues affecting standards and quality that require the immediate attention of the Directorate, PVC Deans of Faculty, the Governance, Quality Assurance and Student Casework unit, AQEC or other relevant Academic Board committees.

Monitoring of modules[14] and programmes

Academic departments are responsible for the detailed evaluation of module performance and holistic consideration of issues affecting standards and quality at programme level. Faculties have oversight of module and programme monitoring occurring within departments[15] - **as a minimum**, this considers:

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[12] For further details of the University's approach to quality enhancement see Chapter 1.

[13] For example, programme performance data is made available to academic departments via Tableau and AQEC receives updates on progress against departments' Quality Enhancement Plans during the academic year, typically through the receipt of Faculty quality committee minutes.

[14] Programmes in Health, Social Care and Medicine that follow a non-modular structure consider this evidence as it relates to each Year of Study.

[15] See Chapter 1.

- Module first-time and overall pass rates[16];
- Student Voice Survey data[17] and module and programme evaluations;
- Retention, progression and degree outcomes data disaggregated by relevant protected characteristics, where appropriate[18];
- External examiner reports and programme teams' responses[19]
- Any instances of malpractice and/or complaints.

Departmental Annual Monitoring

Departmental Annual Monitoring is informed by programme-level monitoring and assesses an academic department's ability and capacity to manage risk associated with academic standards and the quality of students' learning opportunities. The annual monitoring process at department level is managed centrally by the Governance, Quality Assurance and Student Casework unit and consists of an Annual Monitoring Enhancement Report for all departments listed in Table 1 below:

Table 1: Departmental Planning Units (updated October 2022)

Faculty	Planning Unit	
Faculty of Arts and Sciences	1. Business School 2. Department of Biology 3. Department of Computer Science[20] 4. Department of English and Creative Arts 5. Department of History, Geography and Social Sciences 6. Department of Psychology 7. Department of Sport and Physical Activity 8. Language Centre 9. School of Law, Criminology and Policing	
Faculty of Health Social Care and Medicine[21]	School of Nursing & Midwifery	1. Department of Adult Nursing and Primary Care 2. Department of Mental Health and Learning Disabilities Nursing 3. Department of Women's & Children's Healthcare

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[16] The first-time pass rate includes students who have passed a module in their first attempt at the final assessment point.

[17] See Chapter 6.

[18] https://www.equalityhumanrights.com/en/equality-act/protected-characteristics.

[19] External examiners confirm that the standards set at validation meet or exceed national threshold (pass) standards and are comparable with similar provision of other UK higher education providers - See Chapter 2.

[20] Note: A new Unit for Engineering is expected in 2024. Engineering provision is currently house in Computer Science.

[21] During the 2023-24 Academic year, the Faculty will be monitored at School level.

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Faculty	Planning Unit	
	School of Allied Health, Social Work & Wellbeing.	1. Department of Social Work and Wellbeing 2. Department of Allied Health Professions
	Medical School	1. Department of Undergraduate Medicine 2. Department of Postgraduate Medical Education
Faculty of Education	1. Department of Early Years Education 2. Department of Primary and Childhood Education 3. Department of Secondary and Further Education	

A factual **Annual Monitoring Report** (AMR) summarising the Department's performance during the previous academic year is prepared in partnership with the Head of Department and a representative from the Strategic Planning and Policy Unit (SPPU).

In confirming that standards remain secure, the AMR will consider:
- academic and professional benchmarking;
- alignment with sector-recognised standards.
- PSRB Reports (where applicable and available)
- external examiners' reports.

In assessing indicators of quality the report reviews data against Key Performance Indicators[22] for:
- Enrolments;
- A list of Programme modifications undertaken in the preceding year;
- Instances of academic malpractice and student complaints;
- Student academic outcomes (e.g., module pass rates (first-time and overall), progression, retention and degree outcomes);
- Student support – National student survey, Student Services data and internal survey data;
- Student satisfaction – National Student Survey and internal survey data; and,
- Graduate Outcomes – employment, highly skilled employment or further study.

In assessing departments' ability and capacity to manage risk, the report considers:

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[22] Key Performance Indicators are defined by the Office for Students as well as the University's Directorate (senior management team).

- The content of the department's 'strategic-level' Quality Enhancement (action) Plan, separated by programme as necessary, based on *the department's* evaluation[23] of the above indicators of Quality.
- A progress update on the previous actions.

Affirmation of Standards and Quality

Annual Monitoring Enhancement Reports contain a judgement on threshold Standards and Quality[24] as well as the Department's ability to manage associated risks. Reports are required to affirm, based on consideration of the evidence, that the Department is able to manage its responsibilities in relation to the ongoing conditions for Quality (B1 – B4) and Standards (B5), as follows:

Table 1: The ongoing conditions for Quality (B1 – B4 & B6) and Standards (B5)

B1	The provider must ensure that the students registered on each higher education course receive a high-quality academic experience. A high-quality academic experience includes but is not limited to ensuring that each higher education course: 1. is up-to-date; 2. provides educational challenge; 3. is coherent; 4. is effectively delivered; and 5. requires students to develop relevant skills.
B2	The provider must take all reasonable steps to ensure: 1. students registered on a higher education course receive resources and support to ensure: a. a high quality academic experience for those students; and b. those students succeeding in and beyond higher education; and, 2. effective engagement with students to ensure: a. a high quality academic experience for those students; and b. those students succeed in and beyond higher education.
B3	The provider must deliver successful outcomes for all of its students, which are recognised and valued by employers, and/or enable further study.
B4	The provider must ensure that: 1. students are assessed effectively; 2. each assessment is valid and reliable; 3. academic regulations are designed to ensure that relevant awards are credible; 4. academic regulations are designed to ensure effective assessment of technical proficiency in the English language in a manner that appropriately reflects the level and content of the course; and 5. relevant awards granted to students are credible at the point of being granted and when compared to those granted previously.
B5	The provider must ensure that, in respect of any relevant awards granted to students who complete a higher education course provided by, or on behalf of, the provider

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[23] Heads of Department are provided with detailed datasets disaggregated by relevant protected characteristics to enable a full evaluation of their portfolio.

[24] I.e., whether programmes have met or not met the national Expectations for Standards and Quality as set out in the OfS's Regulatory Framework.

	(whether or not the provider is the awarding body):
	1. any standards set appropriately reflect any applicable sector-recognised standards; and
	2. awards are only granted to students whose knowledge and skills appropriately reflect any applicable sector-recognised standards.

Data Review Meeting

Data Review Meetings provide departments with the opportunity to review and discuss the Tableau data informing the AMR process, to check the accuracy and interpretation of the data prior to report template being populated. Convened by GQASC, Data Review Meetings are Chaired by a representative from the SPPU with the Head of Department, Department Administration Manager and a GQASC representative[25] in attendance.

It is expected that Head of Department, and Departmental Administrator, review the Tableau areas indicated in the brief, in advance, and come to the meeting with any questions and data discrepancies noted. The department is required to identify a note-taker, normally the Department Administration Manager[26], to record all actions that emerge from the meeting.

The data reviewed at the meeting will give an indication of the current data state informing the monitoring process. It is important to note that the data which informs the production of the AMR report may differ slightly depending on the day the data is extracted. The AMR report will indicate the date it refers to.

Annual Monitoring Enhancement Meeting

Annual Monitoring Enhancement Meetings[27] provide an opportunity for the Head of Department to discuss their AMR with their Pro Vice-Chancellor Dean of Faculty (or appropriately experienced senior representative) and a member of the GQASC team. Meetings are conducted in the spirit of appreciative enquiry, tailored to the needs of the department as determined by the evidence. Departments are required to identify a note-taker, normally the Department Administration Manager[28], to record all actions that emerge from the meeting.

Based on the evidence presented and the discussions with the Head of Department, at the end of the meeting, the Faculty is required to affirm that the department is compliant with Conditions B1-B4 (Quality) and B5 (Standards). The Pro Vice-Chancellor Dean of Faculty is asked to make one of the following **confidence judgements** regarding the Department's ability to manage its quality assurance responsibilities:

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[25] Typically, an Academic Quality and Standards Manager, who is there to advise on process and any matters relating to quality and standards.

[26] The department may wish to bring an additional administrator to take notes.

[27] Convened by GQASC and are typically 2 hours in duration and are held face to face on campus.

[28] The department may wish to bring an additional administrator to take notes.

No significant issues identified in the evidence presented, and I am supportive of the enhancement activities identified by the Department.	Some areas highlighted for improvement and additional actions have been identified.	Significant issues identified within the evidence considered and there are concerns regarding the Department's action planning.

Judgements are reached by triangulating external examiner reports and responses, PSRB reports (where available) and 'contextualised' performance data. Beyond threshold, comparisons are made between programme performance data and appropriate benchmarks. Any data which falls below benchmark is contextualised and commented upon by the Head of Department and actions are formally recorded in a Quality Enhancement Plan (below). Faculties are required to ensure that any actions emerging from the meeting have been met prior to the paperwork being signed off by the PVC Dean of Faculty[29].

Quality Enhancement Plans
The Quality Enhancement Plan (QEP) is divided into two sections:

1. Agreed actions in response to indicators of Standards and Quality (performance data); and
2. A summary of good practice linked to evidenced improvements/ exemplary performance against Institutional benchmarks.

In part 1 of the QEP, Heads of Department state concisely what is being done and / or will be done to improve performance (in the spirit of SMART action planning). This means that actions are linked directly to programmes or areas where performance has fallen below the benchmark set by the University. Actions are set at an appropriate, departmental level and need not contain operational details.

The QEP acknowledges that each Department is required to produce a separate Access & Participation Plan, a Retention Action Plan, and an NSS Action Plan earlier in the University's Monitoring Framework cycle. While departments are not required to duplicate actions between plans, it is expected that Heads of Department will provide brief updates on the actions in the body of the AMR where appropriate.

Part 2 of the QEP provides a summary of specific features of good practice with the potential for wider dissemination across departments and/ or Faculties. Good practice citations are linked to external examiners' reports, previous validation and/ or review reports, evidenced improvements in performance data between academic years or programmes/ subject areas which show exemplary performance against Institutional benchmarks.
Faculties consider if the issues raised by the data have been addressed sufficiently within the report and in the QEP. Where this is deemed not to be the case, reports and / or plans are

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[29] Or nominated alternate.

referred back for further work. Completed reports (including the QEP) are submitted to the GQASC for 'in principle' approval. Final approval is granted by AQEC[30].

Part 1 of the QEP is considered a live document which can be updated by departments at any time during the academic year when data becomes available, or progress has been made. Faculties monitor progress against the actions contained within part 1 of the QEP. Faculties receive updated plans for discussion, exploring where updates have not been provided or if updates require more detail. All progress updates are expected to be completed by the end of the academic year. The Governance, Quality Assurance and Student Casework unit (GQASC) uses the final versions of the QEPs as part of the evidence for the next Annual Monitoring round.

GQASC produces an overview document which highlights key themes from departmental annual monitoring. As well as providing the basis of discussion by AQEC[31], this overview also informs production of the University Annual Monitoring Update Report (below).

Faculty Monitoring of Non-Credit Bearing Provision

It is expected that all non-credit bearing provision is monitored by Faculties as part of continuous monitoring, implementing their own processes to monitoring such provision which is detailed in their respective Faculty Quality Statement. This information will be drawn upon as part of the annual monitoring round each Autumn, to review the status of such provision.

Detailed guidance on the approval of non-credit bearing provision is outlined in Chapter 4 of this Handbook.

Annual Monitoring for PSRBs

Programmes that are regulated by Professional Statutory and Regulatory Bodies (PSRBs) may be required to submit external monitoring reports to meet their specific requirements. These will normally be received for approval by Faculty Boards (or their committees) but should be referred for additional consideration by AQEC where any issues requiring University level attention are identified.

For further details on the annual monitoring process, please contact the Governance, Quality Assurance and Student Casework unit. For specific queries on the quantitative data used, please contact the SPPU.

Annual Review of Academic Partnerships

Edge Hill University develops academic partnerships with a wide range of third-party organisations, from UK-based employers, colleges and awarding bodies to overseas higher education providers, for the delivery of modules or programmes leading to the award of

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[30] Normally at the February meeting.
[31] At its February meeting.

University credit or qualifications; or the provision of student learning opportunities including work placements, international exchanges and arrangements for entry with advanced standing (articulation). The Annual Review of Academic Partnerships operates in conjunction with Departmental Annual Monitoring but is a separate process reflecting the level of risk associated with partnership working. Full details are provided elsewhere in this Handbook[32], however for partnerships in Category C and above including Higher and Degree Apprenticeships this entails the completion of an **Annual Review Form** at the start of each new academic year for any provision delivered in the previous academic year. This is usually completed by the Academic Partnership Liaison Tutor with support and input from the Faculty Partnership Lead, and supporting evidence includes external examiner reports, retention and other performance data, and student feedback. Annual Review may also revisit current programme Delivery Plans, due diligence, online marketing materials and staffing arrangements. Completed forms receive Faculty-level scrutiny and approval[33] prior to their submission to AQEC[34], which:

- assesses, on the basis of the evidence provided, the ability and capacity of the partner organisation (working with the University) to identify and manage academic risk;
- provides feedback to Faculties, departments and partners or, where necessary and appropriate, requests additional information from them; and
- considers any additional scrutiny and/ or support for a partner or host University department that may be indicated by the Annual Review Form or other relevant evidence.

GQASC produces an overview document[35] which highlights key themes from annual monitoring of academic partnerships. As well as providing the basis of discussion by AQEC[36], this overview also informs production of the University Annual Monitoring Report (below).

University Annual Monitoring Update Report

The University Annual Monitoring Update Report, which is received by AQEC[37] and approved by the Academic Board[38], provides an update on the actions identified during the monitoring process. Drafted by GQASC on behalf of the PVC (Student Experience) & University Secretary[39], the University AMR highlights issues for attention by the Academic Board, Faculties and professional support services, giving particular emphasis to the longer-term and strategic implications of its assessment of risk in the context of external market and regulatory conditions. The University AMR is a key mechanism in promoting a culture of mutual

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[32] See Chapter 5.
[33] With representatives of partner organisations attending by invitation.
[34] At its February meeting.
[35] Jointly authored by the GQASC and Faculties.
[36] At its February meeting.
[37] At its June meeting.
[38] At its July meeting.
[39] Also the Chair of AQEC.

accountability for the maintenance of standards and enhancement of quality and in so doing addresses the following audiences:

- **Academic departments and academic partner organisations**, which expect to see the broad concerns raised by them through the Annual Monitoring process have been considered and responded to; and
- **AQEC and Academic Board**, which require assurance that the University's academic governance is being managed appropriately.

Academic Assurance Report

The Academic Assurance Report (AAR) is authored by GQASC on behalf of Academic Board and it is informed by the University AMR. It provides supporting evidence of the maintenance of standards and quality for the Board of Governors' annual accountability return to the Office for Students ([40]). The AAR maps current Institutional processes and outcomes to the OfS's General Ongoing Conditions of Registration, specifically Conditions B1-5 for Quality and Standards. A draft AAR is approved by Academic Board[41] with the final version received for consideration by the Board of Governors.

CURRICULUM REVIEW

The purpose of Curriculum Review is to establish that all taught curriculum in a particular department or other cognate grouping of programmes (planning units[42]) is being actively refreshed and remains up-to-date and coherent; and to confirm that each programme's award title, aims and learning outcomes remain valid and achievable. The review process also includes programmes delivered by or with third-party organisations (e.g., academic partners) for the purpose of continuing programme approval, however these are also reviewed individually as part of a separate five-year cycle of partner and delivery re-approval[43].

Curriculum Review is designed to complement existing processes contained within the monitoring framework; and other University processes such as academic planning (see chapter 4). Informed by direct engagement with key internal[44] and external[45] stakeholders, its primary focus is therefore on the evaluation and continuing approval of the curriculum at programme and module-level (or year of study if non-modular). Successful curriculum review confers continuing approval of the programmes and awards until the next scheduled review. Reviews are programmed on a five-year cycle, the schedule and any changes to it being confirmed annually by AQEC (see Table 3 below).

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[40] For more detail on the Office for Students and associated sector regulation see Chapter 1.
[41] At its November meeting.
[42] See Chapter 4.
[43] See Chapter 5.
[44] For example, academic departments (including programme leads) and senior faculty managers.
[45] For example, students, employers, alumni and where applicable, service users and carers.

Reviews are conducted by the **Curriculum Review Group (CRG),** members of which are drawn from the Validation and Audit Standing Panel[46]. Except for representatives from the relevant Faculty's senior management team, who provide the panel with essential contextual information and Faculty knowledge, members of the CRG are independent from the department under review.

Curriculum reviews comprise a combination of desk-based work and focus group activity (led by Academic Quality and Standards Managers from GQASC) and culminate in a short event/meeting. The head of department and programme leaders are invited to attend part of the event. The CRG is responsible to AQEC for reviewing the programme and module/year of study specifications in the context of key pieces of supporting evidence (which will include direct engagement with stakeholders); and with reaffirming the continuing currency of the curriculum for 5 years. Between reviews, existing modification processes, as described in chapter 4 of this handbook, enable established curricula, which is in delivery[47], to be refreshed or otherwise adjusted between formal review points to enhance the learner experience and maintain currency and continued alignment with academic subject benchmarks and professional standards.

Departments undergoing review are required to evaluate all current modules[48] in advance of the review meetings. On reviewing their modules and/or years of study, departments will submit lists of modules/years of study that:

a) require minor modification,
b) will remain unchanged, and
c) will require archiving on E-VAL.

The CRG will only consider proposals for **minor changes** to modules. More substantial changes to programmes must follow the university's established major modification or revalidation processes (see chapter 4).

The curriculum review process focusses on consideration of the following pieces of evidence:

- External Examiners Reports (previous 5 years) [supplied by GQASC]
- The latest Annual Monitoring Report [supplied by GQASC]
- The latest Academic Planning Report [supplied by the Faculty]
- The latest PSRB report (where relevant)
- Focus Groups with students and employers/alumni [convened by GQASC in liaison with DAMs]
- Current programme and module / year of study specifications [supplied by GQASC]
- Revised draft programme specifications (if required) [supplied by Faculty]

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[46] See Chapter 4, also https://wiki.edgehill.ac.uk/display/agqa/VASP+Membership.
[47] Only exceptionally, will validated programmes be modified prior to their first delivery.
[48] I.e., modules with an 'open' status on E-VAL. Departments receive lists of modules to review directly from GQASC.

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- Revised draft module specifications (if required) [supplied by Faculty]

Curriculum Review reports are received by AQEC where the review panel's recommendations are considered and continued approval of all validated programmes normally confirmed, although individual programmes may be referred to the host Faculty for modification or re-validation before the next student intake.

Departments that have completed a whole portfolio revalidation <u>in the year prior</u> to their scheduled review will be exempt and will not be required to take any further action. Continuing currency will be reaffirmed via the monitoring process in the year that the scheduled review would have ordinarily taken place. **Departments scheduled for whole portfolio revalidation in the <u>same year</u> as their scheduled review** will be exempt unless the revalidation is postponed. If this is the case, the circumstances surrounding the postponement will be considered and either a review will be arranged, or a Departmental Risk Assessment (see below), based on the latest annual monitoring report, will be undertaken to extend approval by one year[49]. Departments who plan to revalidate their entire portfolio the year after their scheduled review will be required to undergo the exercise and use it to inform their portfolio developments.

NOTE: For Departments that have revalidated <u>part</u> of their academic portfolio in the previous year; or, are due to revalidate <u>part</u> of their academic portfolio in the same year as their scheduled review: In these circumstances the scope of the curriculum review will be determined by the number of the programmes that have not received, or not due to receive VASP scrutiny[50]. If a small minority of programmes have not been reviewed, the monitoring process may be used to support continuing programme approval[51]. In all cases, GQASC will liaise with the Faculty to agreed the scope of the review.

In exceptional circumstances, application may be made to AQEC for **deferment of a scheduled Curriculum Review.** This is normally supported by a Departmental Risk Assessment. Reviews may be deferred for one year only.

Programme Transfers between Departments
Where programme transfer between departments creates the risk of individual programmes not being reviewed within a five-year period, the monitoring process, carried out at the next available fixed point, supports continuing programme approval.

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[49] To be determined by GQASC. Final approval of any extension will be by AQEC.
[50] To be determined by GQASC. Final approval of any extension will be by AQEC.
[51] To be determined by GQASC. Final approval of any extension will be by AQEC.

Table 3: 'Edge Hill University Curriculum Review Cycle' (updated October 2023)

Year no. in cycle	Academic Year	Faculty	Unit of review
1	2023-2024	FAS	Edge Hill Language Centre[52]
		FAS	Psychology
		FHSCM	Social Work and Wellbeing
		FHSCM	Allied Health Professions
2	2024-2025	FHSCM	Adult Nursing and Primary Care
		FHSCM	Women's and Children's Health Care
		FHSCM	Mental Health and Learning Disabilities Nursing
3	2025-2026	FAS	English and Creative Arts
		FAS	Sport and Physical Activity
		FOE	Secondary and Further Education
4	2026-2027	FAS	History, Geography and Social Sciences
		FAS	Computer Science
		FAS	Engineering
		FHSCM	Undergraduate Medicine
		FHSCM	Postgraduate Medical Education
		Institution	Taught Degrees Framework[53]
5	2027-2028	FAS	Biology
		FAS	Business School[54]
		FAS	The School of Law, Criminology and Policing
		FOE	Early Years Education
		FOE	Primary and Childhood Education

ONGOING MONITORING AND REVIEW MECHANISMS

In addition to the routine monitoring and review activities described above, the following section describes ongoing surveillance mechanisms designed to gain assurance about how the quality strategy is being implemented at department and / or programme level (see Table 4). These mechanisms are designed to:

- Capture good practice for the purposes of quality enhancement.
- Identify any emerging risks as soon as possible to allow the University to put in place credible improvement plans.
- Provide targeted support to departments and programmes, when required,
- Assess departments' preparedness for inspection.

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[52] Credit-bearing provision comprises the University Foundation Certificate Arts, Humanities and Social Sciences, the Stem Foundation Year, the level 3 Fastrack programme, and foreign Language Study modules.

[53] Using a variation of the process for Internal Audit – see Quality Management Handbook Chapter 3.

[54] To include the PGCert Teaching in Higher Education

Table 4: Ad-hoc monitoring and review mechanisms

Mechanism	Purpose	Commissioned by:
Internal Audit	**Assurance**: The role of internal audit is to provide independent assurance that the University's risk management, governance and internal control processes are operating effectively. Assignments to review the quality of the University's academic provision and governance arrangements feature throughout the annual Internal Audit Plan. Audit assignments are conducted by the University's Internal Auditors in line with timescales agreed the Audit Committee.	Audit Committee – in liaison with Senior Managers and the University's Internal Auditors
Dip Testing	**Assurance:** The role of Dip Testing is to provide central assurance that the quality strategy is being operationalised as described within the chapters of this handbook at department and / or programme-level. This may also include assessment of how effectively Faculties delegated responsibilities for setting standards and maintaining quality are being executed as defined in their Faculty Quality Statements. The dip-testing process adopted, and the accompanying evidence base, varies according to potential risk. The scope of the exercise and the process adopted are prescribed by GQASC in consultation with AQEC and the relevant Faculty Committee.	GQASC (on a cyclical basis) in liaison with AQEC and Faculty Senior Managers.
Developmental Enquiry	**Enhancement**: Thematic and enhancement-focused by nature, Developmental Enquiries (DEs) explore specific aspects of the learner experience; recent DEs have focused on cross-Faculty approaches to managing placement-based learning, the joint honours student experience and developing students' assessment literacy. Written and oral evidence is taken from key Institutional stakeholders and the report, which is normally received by LTC, contains recommendations for development as well as highlighting good practice for wider dissemination. LTC decides upon any action to be taken in response to the report's recommendations and progress is monitored through separate update	Learning and Teaching Committee

Mechanism	Purpose	Commissioned by:
	reports, the timing and frequency of which are determined by the committee. Developmental Enquiries are serviced by GQASC. Timescales are agreed by LTC.	
Thematic Support Panel	**Targeted support**: Thematic Support Panels may be convened to provide a rapid response to an emerging issue or when a department or collection of departments require external support to deal with a strategic challenge. Panels are designed to be supportive, and solution focussed – with external expertise brought in to share relevant experience and provide 'critical friend' challenge. Panels will normally be comprised of at least two individuals that are external to the department(s), who will meet with the Head(s) of Department and relevant staff in a roundtable discussion setting. Membership will be based on the area of weakness being considered, for example - support to boost graduate level employment would likely include the Head of Careers. Panel membership and timescales will be set by the body commissioning the panel. Actions from the meeting will be recorded by the academic department. Where multiple departments are involved, each department will record the actions that are relevant to them.	Directorate (either directly, or at the request of the relevant Head of Department) or Learning and Teaching Committee
Risk Assessment Meeting	**Risk mitigation**: A Risk Assessment Meeting may be convened at very short notice and enables a rapid response to a specific presenting issue, incident or set of circumstances, for example an adverse external examiner's report. An Institutional panel chaired by a senior manager is convened and considers written and oral evidence with a report submitted to AQEC and the Directorate within two to six weeks of commissioning. Risk Assessment meetings are normally serviced by GQASC.	
Risk Assessment	**Risk mitigation**: Departmental Risk Assessments normally comprise the department's most recent	

Mechanism	Purpose	Commissioned by:
Report [desk-based]	Annual Monitoring Report and updated QEP, accompanied by the reporting officer's summary estimation of net risk. Whether or not academic provision is deemed to be at risk depends on the interaction between the internal or external threats to which it is exposed and its owner's capacity to manage these, resulting in an evaluation of net risk; thus, a department operating in a high-risk environment may be assigned a rating of medium or even low net risk based on its perceived ability to manage those risks. Departmental Risk Assessment Reports are a useful tool for confirming the continuing academic health of a department or programme, enabling swift conclusions to be drawn and any immediate support needs identified. Risk Assessment Reports are conducted by GQASC. Timescales are set by AQEC.	