

## 5 ANNUAL QUALITY MONITORING

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### INTRODUCTION

5.1 Annual quality monitoring processes collectively provide a means of assuring the standards and quality of the university's provision, and seek to enhance the quality of the student learning experience. Within a devolved quality management framework, they enable the university to manage quality assurance and enhancement at an institutional level and in line with national expectations. The processes seek to encourage development of a reflective, open and analytical approach, to facilitate managed risk-taking in relation to curriculum development and quality enhancement, and to ensure rapid identification and mitigation of quality assurance issues.

### SCOPE

5.2 The provisions of this section apply to all taught provision offered to registered students, including that validated by SQA, other HEIs and awarding bodies.

### OBJECTIVES

5.3 The objectives of these processes are:

- to ensure that taught provision is delivered in line with the requirements of approval
- to ensure that quality issues relating to curriculum and delivery are identified and acted upon at appropriate levels
- to encourage engagement with institutional and national enhancement themes
- to identify examples of good practice in curriculum and delivery and ensure that these are disseminated
- to enable staff to contribute to the ongoing development and enhancement of provision.

### PRINCIPLES

5.4 Quality monitoring processes are based on the following principles:

- the core of all processes is reflection on the student learning experience and the ongoing enhancement of curriculum and student support
- the cycle includes annual engagements with representatives from all subject networks / departments and all academic partners, conducted by a Quality Monitoring Group (QMG) comprising internal and external membership
- the processes are transparent, with all reports being made available to all staff
- the evidence base for evaluation depends on analysis of key performance indicators (KPIs) derived from a robust dataset
- target and objective setting for subject networks / departments, academic partners and the university enables systematic monitoring and evaluation
- outcomes from annual quality monitoring will feed into subject review
- these processes do not obviate the responsibility of programme teams and academic partners to address emerging quality assurance issues immediately, where this is practicable.

## RESPONSIBILITY

- 5.5
- a. overall responsibility for quality monitoring rests with Quality Assurance and Enhancement Committee (QAEC) acting, subject to other awarding body requirements in respect of their awards, on behalf of Academic Council
  - b. the first line of responsibility for programme monitoring is carried by programme leaders, working in conjunction with all Home Academic Partners (HAPs)
  - c. module leaders are responsible for submitting a self-evaluation document (SED) at the end of the semester of delivery
  - d. programme leaders are responsible for submitting a self-evaluation document (SED) annually on behalf of the programme committee (or equivalent structure)
  - e. in the case of SQA programmes, the named contact at each site of delivery is responsible for submitting a site-specific SED for that programme. Where the programme is formally networked, a single overarching SED from the programme leader should be submitted
  - f. Subject network leaders / department leads are responsible for submitting a SED covering all provision within the area
  - g. QMG will meet with each subject network / department and each academic partner to discuss relevant issues and will report to QAEC and other committees as appropriate.

## QUALITY MONITORING PROCESS

5.6 The annual quality monitoring process and indicative timescales are as follows:

<b>February</b>	Degree module leaders submit semester 1 module-level SEDs to quality monitoring officer and 'lead' programme leader. To be taken to exam boards to inform external examiners.
<b>June</b>	Degree module leaders submit semester 2 module-level SEDs to quality monitoring officer and 'lead' programme leader. To be taken to exam boards to inform external examiners.
<b>August</b>	UHI Principal receives reports from external examiners. UHI Academic Registrar acknowledges receipt of report and advises the programme leader, quality manager, chair of exam board, chair of Academic Partner Quality Committee (APQC) and dean of its availability.
<b>September</b>	Appropriate KPI data available to academic staff via university systems. Programme leader produces programme-level SED (drawing on external examiners' reports, KPI data, feedback from students and staff, and external feedback as appropriate), ensuring that site-specific issues are addressed for networked programmes, and sends SED to quality monitoring officer, subject network leader and quality managers. Similar processes operate for SQA programmes. Faculty sends response to external examiner(s), copied to faculty officer, quality manager and subject network leader (degree programmes only).
<b>October</b>	Subject network leader / department lead sends SN SED to QMG via quality monitoring officer. APQCs consider programme-level SEDs. All module, programme and SN / department SEDs available to all academic staff and quality managers.

<b>November / December</b>	QMG members meet with each subject network leader / department lead and colleagues to discuss issues raised in the SN SED and any other issues brought forward by either party. QMG produces written report of each meeting, to be approved by subject network leader/ department lead.
<b>December</b>	QMG produces overarching document on completion of all dialogue meetings, drawing out common issues and good practice. All reports made available to all staff.
<b>January / February</b>	Internal members of QMG meet with senior representatives (usually the quality manager) from all APs and SNs / departments to discuss issues relating to student support and infrastructure, SN meetings or identified through any other mechanism, and any issues brought forward by the APs. Issues for further action will be considered by QAEC.
<b>February / March</b>	QAEC consider reports and agree specific actions / responsibilities in light of recommendations.

## SELF EVALUATION DOCUMENTS

- 5.7 Detailed guidance and proformas will be made available for each type of self-evaluation document (SED) required within the quality monitoring process and these will be kept under review.
- 5.8 Module / programme / subject network / department self-evaluation documents:
- should focus on issues relating to the curriculum and the student experience and make appropriate reference to the KPI data available via university systems
  - should be reflective / evaluative, while summarising key points concisely
  - should, as far as possible, be drafted in a manner which is inclusive of the teaching team and supporting academic partners (including quality and curriculum management teams)
  - should clearly indicate the locus (eg programme, module, delivery site) of issues of concern or good practice, while avoiding naming individuals
  - will be made available to all staff.

## ANNUAL MEETINGS AND OUTCOMES

### Quality monitoring dialogue meetings

- 5.9 The meetings will be organised and supported by Academic Directorate. At each meeting there will be a minimum of three members of QMG, including at least one external member as well as an officer or representative from Academic Directorate.
- 5.10 The principal documentation required for the meeting will be the SED, although other existing documents may be used.
- 5.11 The meeting will be attended by the subject network leader / department lead plus other staff representatives. Normally, this should not exceed a total of six individuals.
- 5.12 The purpose of the meeting will be to discuss issues raised in the SED and any other issues brought forward by either party. During the meeting, there will be discussion and agreement of QA / QE / curriculum-related targets and objectives for the subject network / department for the next 12 months. There may also be recommendations and actions identified for referral elsewhere, including committees, academic partners and Executive Office.

5.13 A report will be drafted within two weeks of the meeting and sent to the SNL / department lead for comment. Once approved, all reports will be made available to all staff.

5.14 As well as the individual reports, QMG will produce a summary institution-level report, drawing out common issues and good practice, and recommendations for action.

#### **Academic partner meeting**

5.15 The meeting will be attended by all academic partner quality managers, internal members of QMG, and subject network leaders / department leads.

5.16 The purpose of the meeting will be to discuss student experience, support and infrastructure issues identified during the dialogue meetings or through other mechanisms and any issues brought forward by the academic partners.

#### **Institutional overview**

5.17 The summary institution-level report, comprising common issues and good practice, and recommendations for action identified through the quality monitoring process will be considered by QAEC, who will agree lead members of staff to progress each one. There may be recommendations and actions identified for referral elsewhere, including committees, academic partners and Executive Office.

5.18 This summary report, developed and monitored by QAEC, will constitute an annual overview of all reports and outcomes, identifying common issues and themes.

### **EVALUATION OF PROCESS**

5.19 QAEC shall undertake evaluations of the effectiveness of the quality monitoring process at regular intervals.

**QUALITY MONITORING FLOWCHART**

