

# Continuous Monitoring and Enhancement Procedure

2025/26

## Contents

1	Purpose of the Procedure .....	2
2	Defining Principles .....	3
3	CME Process Overview.....	3
	<i>Figure 1: CME Review Process</i> .....	5
	<i>Figure 2: Indicative timeline for CME process</i> .....	6
4	CME Review Structure.....	7
	<i>Figure 3: CME Review Structure</i> .....	7
4.1	Module Review .....	7
4.2	Programme Review .....	7
4.3	Subject Level Review.....	8
4.4	Faculty Review.....	9
4.5	Institutional Review .....	10
5	Accessibility .....	10
	<i>Figure 4: CME Process Workflow</i> .....	11

## 1 Purpose of the Procedure

1.1 This procedure sets out Wrexham University's approach to quality assurance and continual improvement of the quality of learning opportunities for students. It is designed to provide assurance regarding the quality and standards of academic programmes leading to sharing good practice, and to enable programme teams to respond to data in real time, identify and take actions to continuously enhance the quality and standards of the provision at the appropriate time in the year.

1.2 This approach is informed by the QAA Quality code, Advice and Guidance [Monitoring and Evaluation](#), which states:

*“Monitoring and evaluation of higher education is an essential process within providers, forming a fundamental part of the academic cycle. It can, and should, look at all aspects of the higher education experience. All higher education providers are involved in course monitoring and review processes as these enable providers to consider how learning opportunities for students may be improved.”*

1.3 The Continuous Monitoring and Enhancement (CME) procedure enables Wrexham University to:

- Provide evidence that the standards and quality of academic provision are being continuously monitored, maintained and enhanced.
- Engage a range of stakeholders in the exercise, particularly students, collaborative partners, employers and other key stakeholders.
- Promote rigorous, critical self-evaluation of provision by programme leaders and other academic staff, with timely responses to issues/areas for improvement.
- Support the development of Welsh medium provision and explore opportunities to actively promote Welsh Language, culture and heritage through the curriculum.
- Resolve actions and make enhancements in the earliest opportunity.
- Contribute to effective quality management within academic faculties and programme teams by a live, evidenced informed monitoring process.
- Facilitate the identification and dissemination of good practice.
- Promote dialogue between academic faculties and other parts of the institution.
- Allow programme, subject, faculty and institutional oversight to identify and develop strategic improvement initiatives.
- Secure the accountability of academic faculties to Academic Board through the Quality and Standards Committee (QSC).

## 2 Defining Principles

2.1 CME is a key process through which academic faculties ensure that timely and appropriate action is being taken at local level in order to maintain and enhance the standards and quality of the provision (delivered both on campus and in partner organisations) for which they are responsible.

2.2 Programme teams are asked to consider and analyse evidence from a wide range of sources as and when they become available, including:

- Module Evaluation and Moderation records (MEMR) forms.
- External Examiners' reports and team responses to reports.
- PSRB (Professional, Statutory and Regulatory Bodies) reports.
- Student statistics (including recruitment, retention, progression and achievement).
- Feedback from students, including National Student Survey results, student evaluation of module questionnaire (SEM), student voice forums (SVFs), and recommendations made as a result of an investigation of any formal student complaints.
- Outcomes of quality assurance exercises such as programme validation and revalidation, including any panel recommendations.
- Feedback from employers and other stakeholders.
- Issues arising from collaborative arrangements.

2.3 The programme action plan is the focal point for the programme team to monitor the health of the programme, informed by relevant data when they are available. Programme Teams are responsible for the programme action plan and have it reviewed and discussed at monthly programme team meetings, with programme leaders driving the review process.

2.4 Each programme monitoring and enhancement report will be finalised at the end of academic year by the Programme Leader for subject level review and faculty scrutiny, which provides opportunities for sharing good practice and identifying common themes and issues to be escalated to the University via the Quality and Standards Committee (QSC).

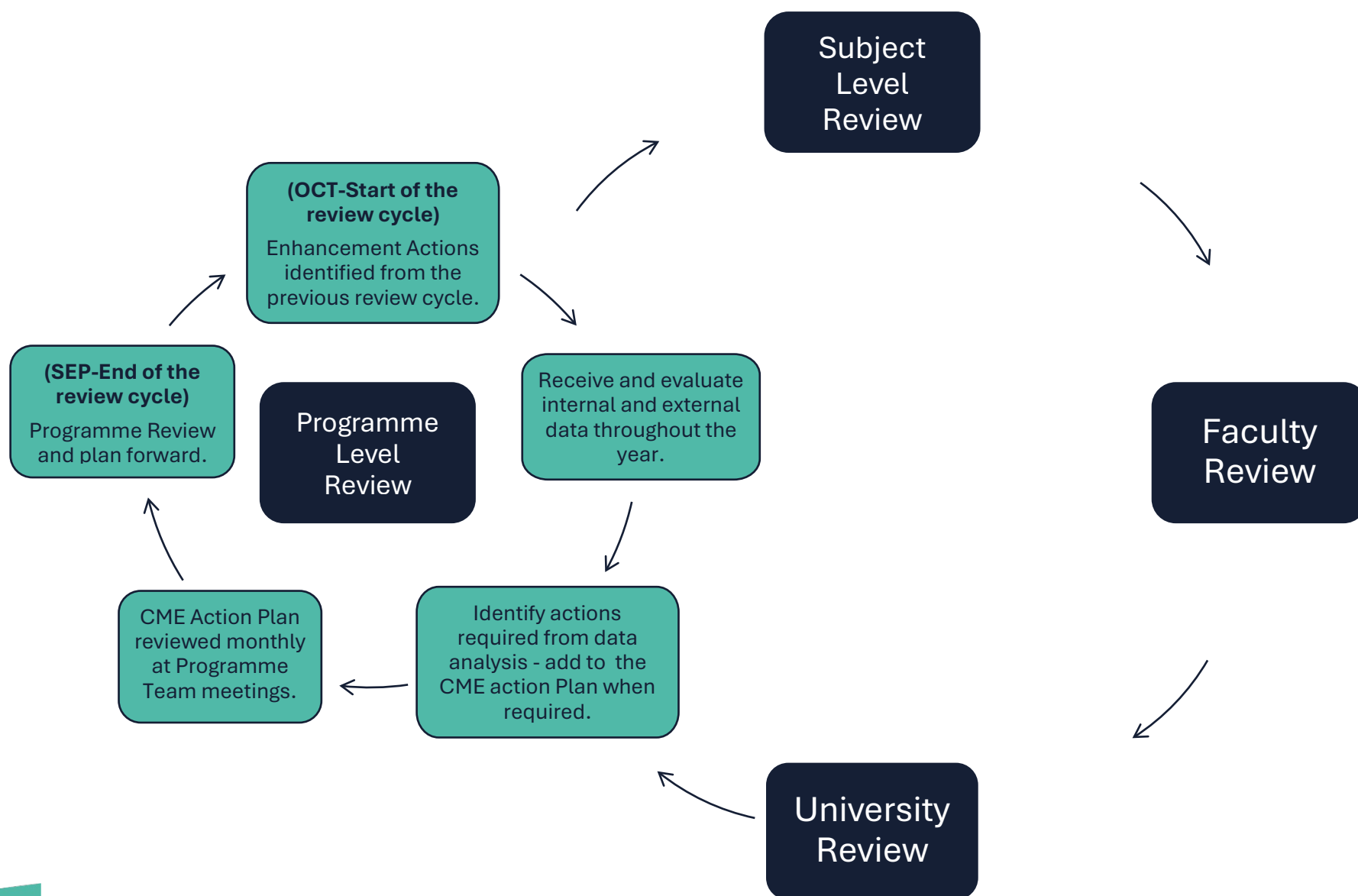
## 3 CME Process Overview

3.1 As shown in the diagram below, the CME process is a 'live', evidence informed process with ongoing reflections from programme teams and actions identified and resolved at the earliest opportunity. The key feature and benefit of CME is that programme teams are able to respond to evidence and feedback as and when the need arises so that enhancement actions can be taken on a timely fashion.

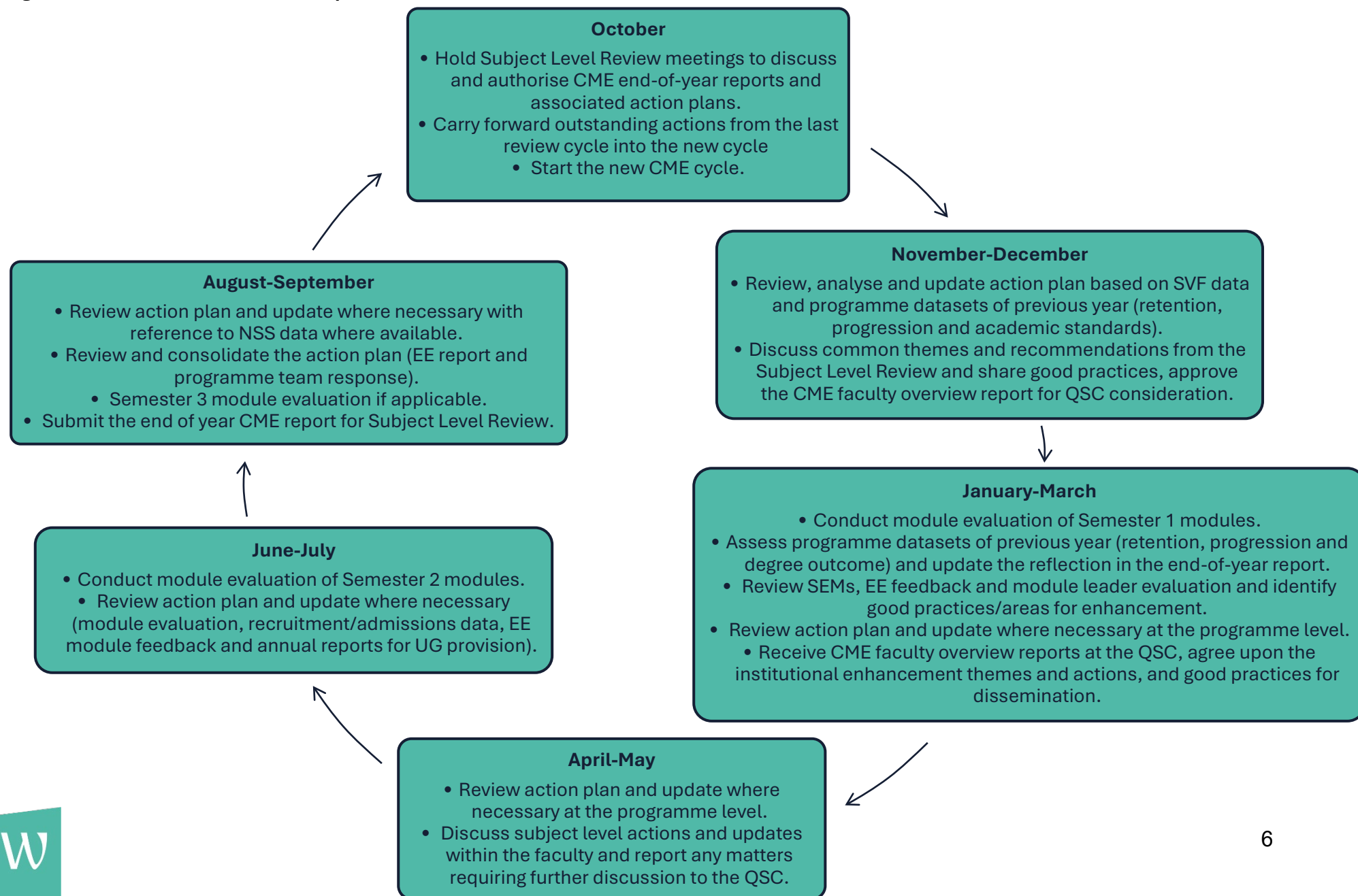
3.2 Enhancement actions identified from previous academic year will be reviewed at monthly programme team meetings and new actions in response to internal or external feedback will be added and reviewed as an ongoing continuous process.

3.3 A reflective report will be finalised by the end of the academic year highlighting themes, issues and areas of good practice for wider dissemination. The Action Plan will be reviewed and updated for the next academic year by programme teams.

Figure 1: CME Review Process



**Figure 2: Indicative timeline for CME process**



3.4 The Continuous Monitoring and Enhancement (CME) Action Plan is a live document that can be updated throughout the academic year to evaluate performances and record actions to enhance learning and teaching quality and student experiences.

3.5 Programme teams should use the following quantitative and qualitative data as their sources of evidence to inform their CME Action Plan on a continuous basis:

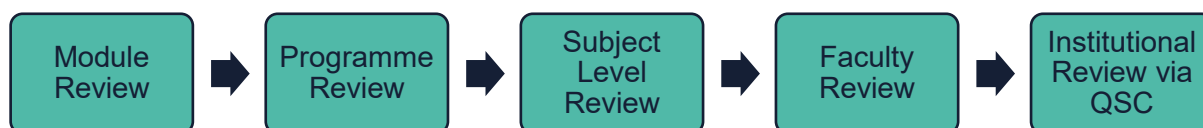
CME Section	Data Source	Location	Timing
Recruitment	<ul style="list-style-type: none"> <li>Recruitment / admissions report.</li> </ul>	<ul style="list-style-type: none"> <li>Available to Admission Tutors.</li> </ul>	<ul style="list-style-type: none"> <li>Routine report from October for UG full time programmes.</li> <li>Routine report from February for PG or part time programmes.</li> </ul>
Programme development, delivery and assessment	<ul style="list-style-type: none"> <li>Re-validation /validation recommendation.</li> <li>External Examiner feedback.</li> <li>Student feedback (SVF, SEM, NSS).</li> <li>MEMR.</li> </ul>	<ul style="list-style-type: none"> <li>Held by Programme teams.</li> <li>Held by Programme teams.</li> <li>SVF minutes on Student Portal; SME results on Moodle; NSS results are available via circulation / Teams site.</li> <li>Programme Teams site.</li> </ul>	<ul style="list-style-type: none"> <li>Throughout the year.</li> <li>July for UG report, Sept for PG report.</li> <li>SVF-Oct/Nov, Mar/Apr; SEM-end of semester; NSS-July.</li> <li>End of each semester.</li> </ul>
Retention / progression / Academic Standards	<ul style="list-style-type: none"> <li>Key programme performance indicators.</li> <li>MEMR.</li> </ul>	<ul style="list-style-type: none"> <li>The Planning and Reporting webpage.</li> <li>Programme Teams site.</li> </ul>	<ul style="list-style-type: none"> <li>Jan/Feb for previous year's datasets.</li> <li>End of each semester.</li> </ul>
External Feedback	<ul style="list-style-type: none"> <li>External Examiner report .</li> <li>Employer/ Placement provider feedback.</li> <li>PSRB reports (if applicable).</li> <li>Quality Assurance Agency (QAA) review panel.</li> </ul>	<ul style="list-style-type: none"> <li>Held by programme teams.</li> <li>Industrial Liaison group meeting minutes or informal feedback held by programme teams.</li> <li>Held by programme teams.</li> </ul>	<ul style="list-style-type: none"> <li>End of Jul-UG report; Sept-PG report or extended academic year delivery.</li> <li>As and when.</li> <li>As and when.</li> <li>As and when.</li> </ul>



CME Section	Data Source	Location	Timing
		<ul style="list-style-type: none"> <li>Held by programme teams.</li> </ul>	
Student Feedback	<ul style="list-style-type: none"> <li>SVF minutes.</li> <li>SEM qualitative results.</li> <li>NSS results.</li> <li>Recommendations from students' formal complaint cases.</li> </ul>	<ul style="list-style-type: none"> <li>Available on the students portal.</li> <li>Available on Moodle.</li> <li>Available on the Planning and Reporting webpage.</li> <li>Held by programme teams.</li> </ul>	<ul style="list-style-type: none"> <li>SVF-Oct/Nov, Mar/Apr.</li> <li>End of semester.</li> <li>July.</li> <li>As and when.</li> </ul>
Learning resources	<ul style="list-style-type: none"> <li>Staff feedback.</li> <li>Student feedback.</li> </ul>	<ul style="list-style-type: none"> <li>Held by programme teams.</li> </ul>	<ul style="list-style-type: none"> <li>As and when.</li> </ul>
Employability	<ul style="list-style-type: none"> <li>Graduate outcome data or other employability related data.</li> <li>Employer/EE feedback.</li> <li>Student feedback.</li> </ul>	<ul style="list-style-type: none"> <li>Available on the Planning and Reporting webpage.</li> <li>Held by programme teams.</li> <li>Held by programme teams.</li> </ul>	<ul style="list-style-type: none"> <li>August.</li> <li>As and when.</li> <li>As and when.</li> </ul>
Research informed curriculum	<ul style="list-style-type: none"> <li>MEMR/internal feedback.</li> </ul>	<ul style="list-style-type: none"> <li>Programme Team's site.</li> </ul>	<ul style="list-style-type: none"> <li>End of each semester.</li> </ul>

## 4 CME Review Structure

**Figure 3: CME Review Structure**



### 4.1 Module Review

4.1.1 At Module Level, Module Leaders are responsible for identifying strengths or issues related to the module content, learning and teaching methods, and assessment strategy. Module leaders will complete the module evaluation based on students' performances and complete the action plan on a continuous basis when required.

### 4.2 Programme Review

4.2.1 **Programme Leaders** are responsible for working with module leaders to complete the CME action plan and the end-of-year report, discussing and reviewing the action plan at monthly programme team meetings, following up the enhancement actions according to the set timeline and flagging faculty or institution wide issues through subject level meetings or by reporting them to the Associate Dean for further consideration by the Faculty or the University.

4.2.2 **Academic Links** are responsible for supporting staff in partner organisations in reviewing and tracking action plans on continuous basis and completing the end-of-year CME report for programmes that are delivered collaboratively.

4.2.3 **Programme Leaders based in partner organisations** are responsible for compiling the CME action plan and the end-of-year report and sending to the Academic Link at Wrexham University for consideration alongside “home” programmes. Partner providers will be expected to run their own programme team meetings and keep Academic Links updated with the progress of key issues and action statuses, and any actions required from WU.

### 4.3 **Subject Level Review**

4.3.1 The purposes of subject level review meetings are:

- To ensure that there is self-critical and focussed attention to all aspects of programme operation and delivery, the academic standards of the provision, and the quality of learning opportunities available to students.
- To ensure that there has been appropriately rigorous consideration of all aspects of programme performance as evidenced by the data provided to support the CME process.
- To promote internal debate of the key issues relating to the quality and standards of the provision, including the identification of good practice.

4.3.2 The subject level review meeting minutes should include:

- The titles of the programme for which reports have been received (and also which reports are missing and what action is being taken to ensure they are produced and the mechanism for them to undergo Faculty-level scrutiny).
- Confirmation that the reports have been accepted and authorised as presented.
- Detail of any that are to be revised and resubmitted.
- A discussion of any common themes across the subject area that emerged at the meeting.
- The key issues raised in discussion and what action is to be taken by the programme teams.
- The key issues that programme teams wish to highlight to the Faculty for further discussion/action.
- Examples of good practice that the Faculty may wish to disseminate and share.
- Issues or concerns in relation to the academic standards of the provision.

- Issues or concerns in relation to the quality of learning opportunities as discussed in panel meetings or indicated by supporting data evidence.

4.3.3 The Quality and Regulations Team will organise and minute subject level review meetings.

4.3.4 The Associate Dean for each subject, or their nominated representatives (such as Principal Lecturers or Subject Leads) is responsible for reviewing and approving CME reports within their subject area. They are also responsible for ensuring that action plans are regularly reviewed and updated, and complete the mid-year subject-level CME action plan review, confirming compliance and highlighting any issues or good practices.

4.3.5 Faculty Deans are asked to ensure that an opportunity for a holistic overview of CMEs across the full Faculty is provided.

4.3.6 Collaborative partnerships will have the opportunity to contribute to the subject level review meetings and faculty CME review via the Academic Link and the Partnerships Quality Manager.

4.3.7 The Associate Deans or nominated representatives are responsible for coordinating and conducting subject level review meetings, ensuring that all required amendments arising from the subject level reviews are completed and all reports are approved within the review cycle.

#### 4.4 Faculty Review

4.4.1 Deans of Faculty are responsible for ensuring that CMEs are satisfactorily produced for all provision delivered by the Faculty. They are also responsible for ensuring that appropriate action is being taken at programme and subject level to maintain and enhance the quality of provision, and for ensuring that actions outside the control of subject teams is identified and referred to the QSC.

4.4.2 The Faculty Leadership Team is responsible for considering key issues relating to the quality and standards of the provision, including:

- Identifying examples of good practice and sharing them across teams.
- Agreeing actions that are to be carried out at Faculty level and actions to be referred upwards to the QSC.
- Identifying common themes arising from the review.
- Being assured that all CMEs for the Faculty have been completed and that action plans effectively address the key issues.
- Reviewing and Monitoring action plan updates.
- Ensuring that any CMEs not submitted are subsequently received and approved by the Associate Dean or nominated representatives (Principal Lecturers or Subject Leads).

4.4.3 As part of the ongoing process, the CME action plan is reviewed at the programme level, and any emerging issues are reported to the Faculty for consideration and, where necessary, further escalation to the QSC.

4.4.4 The Faculty will submit the CME Faculty Overview report to the QSC following subject and faculty reviews, highlighting common themes and recommendations. They will also complete a CME mid-year subject level review to confirm that all programme teams are regularly reviewing and updating their action plans, with any significant issues or good practices highlighted to the QSC.

#### **4.5 Institutional Review**

4.5.1 Upon receiving the Faculty CME overview reports, QSC confirms that the continuous programme monitoring and enhancement process is complete, compile a plan of institutional level actions identified with the Faculty CME overview reports based on the key themes and recurring issues, and refers examples of good practice for further development/dissemination.

4.5.2 The Quality and Regulation team manages and monitors the effectiveness of the CME process, provides support for programme leaders, and acts as secretary for QSC. With the Chair of QSC, the Quality and Regulation Manager identifies key themes to be addressed in the following year's continuous programme monitoring and enhancement cycle. At the end of each CME cycle, the institutional level action plan will be reported to QSC who will monitor the actions to completion and shared with Faculty to inform planning for the next CME cycle.

### **5 Accessibility**

5.1 Wrexham University strives to be a supportive and trauma-informed university in the design and operation of all our processes and procedures. If you need adjustments to access this procedure or have any other comments to make on the accessibility, wording or any part of this procedure, please do email us on [quality@wrexham.ac.uk](mailto:quality@wrexham.ac.uk).

Figure 4: CME Process Workflow

