Prifysgol Wrecsam Wrexham University

Continuous Monitoring and Enhancement Procedure

2023/24

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1. Introduction

1.1 As a key element of the University's Enhancement Framework, Continuous Programme Monitoring and Enhancement (CME) is 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 and identify and take actions to continuously enhance the quality and standards of the provision at the appropriate time in the year. The heart of the process is to be able to demonstrate that the University has a self-critical and transparent approach to quality and standards within each Faculty, and operating within and across each University programme.

2. Principles and Purpose

2.1 The QAA Quality Code, Advice and Guidance <u>Monitoring and Evaluation</u> which underpins and informs Wrexham University's model for continuous programme monitoring, states that:

"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."

- 2.2 In line with the principles set out in the Enhancement Framework, Wrexham University's continuous programme monitoring and enhancement process aims to:
 - i. Provide evidence that the standards and quality of academic provision are being continuously monitored, maintained and enhanced.
 - ii. Engage a range of stakeholders in the exercise, particularly students, collaborative partners, employers and other key stakeholders.
 - iii. Promote rigorous, critical self-evaluation of provision by programme leaders and other academic staff, with timely responses to issues/areas for improvement.
 - iv. Resolve actions and make enhancements in the earliest opportunity.
 - v. Contribute to effective quality management within academic faculties and programme teams by a live, evidenced informed monitoring process.
 - vi. Facilitate the identification and dissemination of good practice.
- vii. Promote dialogue between academic faculties and other parts of the institution.
- viii. Allow programme, subject, faculty and institutional oversight to identify and develop strategic improvement initiatives.
- ix. Secure the accountability of academic faculties to Academic Board through the Learning and Teaching Quality Committee (LTQC).



- 2.3 Continuous programme monitoring and enhancement 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.
- 2.4 Programme teams are asked to consider and analyse evidence from a wide range of sources as and when they become available, including:
 - i. Module evaluation reports.
 - ii. External Examiners' reports and team responses to reports.
 - iii. PSRB (Professional, Statutory and Regulatory Bodies) reports.
 - iv. Student statistics (including recruitment, retention, progression and achievement).
 - v. 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.
 - vi. Outcomes of quality assurance exercises such as programme validation and periodic review, including any panel recommendations.
- vii. Feedback from employers and other stakeholders.
- viii. Issues arising from collaborative arrangements.
- 2.5 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.
- 2.6 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 APSC and LTQC.

3. CME Process Overview

- 3.1 As shown in the diagram below, the Continuous Monitoring and Enhancement (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. Action Plan will be reviewed and updated for the next academic year by programme teams.

Figure 1: CME Process Overview

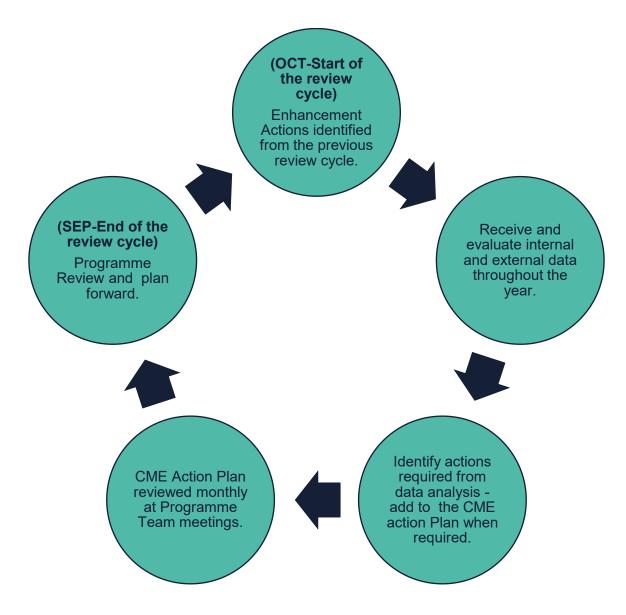




Figure 2: Indicative timeline for CME process

Sept-Oct

- Finalise the monitoring review of the previous review cycle.
- Start the continuous monitoring and enhancement process for the current year.
- Review the last review cycle by FBoS, APSC and LTQC.
- Carry over outstanding actions from the last review cycle to the new review cycle.

Nov-Dec

• Review, analyse and update action plan based on SVF data and programme datasets of previous year (retention, progression and academic standards).

Jan-Feb

- Conduct module evaluation of Semester 1 modules.
- Review SEMs, EE feedback and module leader evaluation and identify good practices/areas for enhancement.
- · Review action plan and update where necessary.

Mar-May

• Review action plan and update where necessary (with reference to SVF data and recruitment/admissions data).

Jun-Jul

- Conduct module evaluation of Semester 2 modules.
- Review action plan and update where necessary (module evaluation, recruitment/admissions data, EE module feedback and annual reports for UG provision).

Aug

 Review action plan and update where necessary with reference to NSS data where available.

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- Review and consolidate the action plan (EE report and programme team response).
- Semester 3 module evaluation if applicable.
- Submit the end of year CME report for Subject Level Review.
- Subject level review meetings.

Sept-Oct

- Faculty Board of Studies scruitiny and Faculty overview.
- APSC and LTQC review, disseminate good practices.
- · Start next cycle.



- 3.4 The Continuous Monitoring and Enhancement (CME) Action Plan and the CME end of year report are live documents 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	Recruitment/admissio	Available to	Routine report
	ns report	Admission Tutors	from Oct for UG
			Full time
			programmes and
			from Feb for PG or
			Part time
			programmes
Programme	Periodic	held by	Throughout the
development,	review/validation	Programme teams	year
delivery and	recommendations	held by	July for UG report;
assessment	External Examiner	Programme teams	Sept for PG report
	feedback;	SVF minutes on	SVF-Oct/Nov,
	Student	Student Portal;	Mar/Apr; SEM-end
	feedback(SVF, SEM,	SME results on	of semester; NSS-
	NSS);	Moodle; NSS	July
	Module evaluation	results are	End of each
	record	available via	semester
		circulation/teams	
		site	
		Programme teams	
		site	
Retention/pro	Key programme	CME Teams site	mid-November
gression/Aca	performance	programme teams	End of each
demic	indicators;	site	semester
Standards	Module Evaluation		



CME Section	Data Source	Location	Timing
External	External Examiner	held by	end of Jul-UG
Feedback	report	programme teams	report; Sept-PG
	Employer/Placement	Industrial Liaison	report or extended
	provider feedback	group meeting	academic year
	PSRB reports (if	minutes or informal	delivery
	applicable)	feedback held by	as and when
	QAA review panel	programme teams	as and when
		held by	as and when
		programme teams	
		held by	
		programme teams	
Student	SVF minutes	available on	SVF-Oct/Nov,
Feedback	SEM qualitative	students portal	Mar/Apr
	results	available on	end of semester
	NSS results	Moodle	July
	Recommendations	available on CME	as and when
	from students formal	teams site	
	complaint cases	held by	
		programme teams	
Learning	staff feedback	Held by	As and when
resources	student feedback	programme teams	
Employability	Graduate outcome	available on CME	August
	data	teams site	As and when
	Employer/EE	held by	As and when
	feedback	programme teams	
	Student feedback	held by	
		programme teams	
Research	module	Programme teams	End of each
informed	evaluation/internal	site	semester
curriculum	feedback		



4. CME Review Structure

Figure 3: CME Review Structure



4.1 Module Review

i. 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**

- i. 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 to Faculty Board of Studies.
- ii. 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.
- iii. Programme Leaders based in partner organisations are responsible for compiling 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 status, and any actions required from WU.

4.3 Subject Level Review

- i. The purposes of subject level review meetings are:
 - a. 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.
 - b. 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.
 - c. To promote internal debate of the key issues relating to the quality and standards of the provision, including the identification of good practice.



- ii. The subject level review meeting minutes should include:
 - a. 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).
 - b. Confirmation that the reports have been accepted and authorised as presented.
 - c. Detail of any that are to be revised and resubmitted.
 - d. A discussion of any common themes across the subject area that emerged at the meeting.
 - e. The key issues raised in discussion and what action is to be taken by the programme teams.
 - f. The key issues that programme teams wish to highlight to the Faculty Board for further discussion/action.
 - g. Examples of good practice that the Faculty may wish to disseminate and share.
 - h. Issues or concerns in relation to the academic standards of the provision.
 - i. Issues or concerns in relation to the quality of learning opportunities as discussed in panel meetings or indicated by supporting data evidence.
- iii. It is the responsibility of each subject Associate Dean or other nominated individual to ensure that all reports are authorised for submission to the Faculty Annual Programme Monitoring Board for review and oversight of each subject area scrutiny process and outcomes.
- iv. Faculty Deans are asked to ensure that an opportunity for a holistic overview of CMEs across the full Faculty is provided. Faculty Boards should be scheduled in October for the purpose of reviewing the subject level meeting outcomes of the scrutiny of individual CMEs.
- v. Collaborative partnerships will have the opportunity to contribute to the board meetings via the Academic Link and the Partnerships Quality Manager.
- vi. The Associate Deans or nominated individual are responsible for co-ordinating the scheduling and undertaking of subject level review meetings and to ensure all CMEs are authorised for submission to Quality and Regulation in preparation for the Faculty Board of Studies.

4.4 Faculty Review

i. Deans of Faculty are responsible for ensuring that CMEs are satisfactorily produced for all provision delivered by the Faculty, and for authorising CMEs for submission to APSC. 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 APSC.



- ii. Faculty Boards are responsible for internal debate of the key issues relating to the quality and standards of the provision, including the identification of good practice; identifying actions that are to be carried out at Faculty level and actions to be referred upwards to the Learning and Teaching Quality Committee; identifying common themes; being assured that all CMEs for the Academic Faculty have been produced and that action plans cover the key issues and are of the required standard to be submitted to APSC for scrutiny; identifying any points from action plans from the previous year that have not been closed down; reviewing updated action plans. The Board is responsible for confirming acceptance of CMEs at the Faculty Board CMEs meeting.
- iii. The purposes of Faculty Board CMEs meetings are:
 - a. To allow staff to contribute to the overview of Faculty CMEs and action plans.
 - b. To promote internal debate of the key issues relating to the quality and standards of the provision, including the identification of good practice.
 - c. For Faculties to identify actions to be referred upwards to the Learning and Teaching Quality Committee.
 - d. For Faculty Deans to be satisfied that all CMEs have been produced and that action plans cover the key issues and are of the required standard to be submitted to the APSC. Should any CMEs be revised as a result of the meeting, the Associate Dean or nominated individual will be responsible for ensuring that the final version is approved by the Faculty Dean and submitted to Quality and Regulation and Academic Programmes Sub Committee (APSC).
- iv. The Faculty Board CME meeting minutes should include:
 - a. Confirmation that all programmes have been considered through the CME process and details of any outstanding reports and what action is being taken to ensure they undergo subject level and scrutiny.
 - b. Confirmation that the outcomes of subject level reviews have been accepted and authorised as presented.
 - c. Detail of any reports that are to be revised and resubmitted, and the mechanism agreed for the revised CME to undergo Faculty-level scrutiny.
 - d. The key issues / common themes raised in discussion and what action is to be taken by the programme and Faculty teams.
 - e. The key issues that Faculty teams wish to highlight to the Learning and Teaching Quality Committee for further discussion/action.
 - f. Examples of good practice that the Learning and Teaching Quality Committee may wish to disseminate and share.
- v. Associate Deans or nominated individuals are responsible for ensuring that any CMEs not submitted to the Faculty Annual Programme Monitoring Board are subsequently received and are subjected to Faculty review / APSC review.



4.5 Institutional Review

- i. Academic Programmes Sub-Committee (APSC) is responsible for scrutinising CME overview reports; for monitoring the implementation of action plans; for identifying any further actions that need to be taken forward by the Academic Faculties; for identifying actions to be taken at institutional level; for identifying examples of good practice and recurring issues of concern; for being assured that the CME procedure has been carried out satisfactorily.
- ii. Learning and Teaching Quality Committee (LTQC) confirms that the continuous programme monitoring and enhancement process is complete, instigates action at University level, and refers examples of good practice for further development/dissemination and addresses recurring issues of common concern. It identifies any issues of concern regarding a specific subject area, programme or group of programmes. It also agrees actions to disseminate good practice, to enhance learning and teaching and the student experience; and to address issues of common concern.
- iii. The Quality and Regulation team manages and monitors the effectiveness of the CME process, provides support for programme leaders, and the secretariat for APSC and Faculty Boards. With the Chair of APSC, the Quality and Regulation Manager produces the overview report for the Learning and Teaching Quality Committee that identifies key themes to be addressed in the following year's continuous programme monitoring and enhancement cycle.



Figure 4: CME Process Workflow

