

Outcomes of the Consultation on the Draft Quality Enhancement Review Handbook (Wales)

QAA consulted on a revised method handbook for Quality Enhancement Review (QER) from 15 May to 9 June 2023. QER is designed to meet the requirements for regulated providers in Wales to undergo regular external quality review in line with the Quality Assessment Framework (QAF) for Wales and HEFCW's requirements.

The process of updating the QER Handbook has involved working with the sector in Wales through stakeholder workshops, institutional liaison meetings with providers, oversight by an external advisory group and engagement with sector groups. External consultation represented the final stage in the refinement of the review method handbook. QAA received a total of seven consultation responses: six from higher education providers and one from a sector representative body.

Summary

QAA thanks respondents to the consultation for their helpful and considered comments which have been invaluable in finalising the Handbook. Notable edits to the Handbook include:

- further refinement and clarification of the interim monitoring and follow-up processes
- strengthening of QAA's Welsh language commitment
- the review and refinement of definitions
- the addition of a statement on equality, diversity and inclusion.

Other contributions have, in the most part, resulted in minor edits clarifying the meaning of terms and operation of the method, and improving the focus, consistency and accuracy of the approach throughout the document. As well as helping to finalise the Handbook, many comments are also helpful for QAA's preparation for training reviewers and Lead Student Representatives (LSRs), and will contribute to the update of the Student Guide for QAA Reviews in Wales.

Responses touched on concerns regarding several aspects in the implementation of the review method. These concerns included:

- availability of appropriate evidence for providers early in the review cycle
- the amount of change in quality assurance practice that would distinguish between a confirming and appraising approach
- how the approach to enhancement would ensure parity between providers at different points in the review cycle
- the appropriate selection of evidence within the limits on the size of the evidence base.

QAA will provide further opportunities for all parties to engage and work together to address these concerns through a series of workshops during the first half of 2023-24. These workshops will aim to build a common understanding and agreement in these key parts of

the review process so it is implemented consistently from the start of the review cycle. Further details will be provided in due course.

Finally, QAA thanks everyone who has contributed to the development of the revised QER method and Handbook. The new approach focused on working in partnership with stakeholders and has involved evaluations, workshops, meetings, an advisory group and consultation. QAA is grateful to the commitment of the sector to the review.

Consultation responses and outcomes

Enhancement

5) Does the overall approach provide a sufficient focus on quality enhancement?

| Yes | 5 | No | 0 | Not sure | 2 |
|-----|---|----|---|----------|---|
| | | | | | |

6) For the purposes of the QER review method, enhancement is defined as 'using evidence to plan, implement and evaluate deliberate steps intended to improve the student learning experience'. Will this definition of enhancement provide a working basis for this review?

| Yes | 7 | No | 0 | Not sure | 0 |
|-----|---|----|---|----------|---|
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Comments

Respondents noted the definition of enhancement is unchanged from the previous method which helps to provide continuity. Comments on the approach included that the focus on the provider's strategic approach to quality enhancement should improve the balance between the assurance and enhancement functions of the review method compared to the previous cycle. The refinement of enhancement statements (planning, implementation and evaluation) allowing acknowledgement of the maturity of enhancement activities, is considered a helpful improvement by one respondent. Another response considered that the decision not to include a judgement on enhancement might cause reviewers to focus more on assurance, particularly if there have been significant changes to quality arrangements that required appraisal rather than confirmation.

A number of respondents commented either generally or specifically on some areas of the Handbook where they considered there needed to be greater consistency or greater focus on quality enhancement. Several statements in the Handbook were considered process rather than output driven or mismatches to the intention to be output driven. Another area of comment was the potential conflation of broader work of the sector on enhancement with the QER approach focused on institutional priorities. One final point raised by one respondent was that those providers reviewed at the start of the cycle may have less evidence of the evaluation stage than those later in the cycle.

Response

To respond to these comments and concerns, QAA has reviewed the Handbook to ensure there is appropriate mention of quality enhancement and a balance between enhancement and assurance in the text. Overall, QAA is satisfied with the text and has reviewed the Handbook to ensure wording is more appropriately expressed in output terms by making a number of minor edits to provide consistency throughout. Throughout the development of the Handbook, QAA has been mindful of the sector's feedback on the separation between the focus of the review of the provider's strategic approach to enhancement versus involvement in broader enhancement work, and is confident that the concern is now fully addressed with a review of the text. The focus of the review on the provider's strategic approach through its own priorities is hoped to minimise the potential of disadvantaging providers that are reviewed earlier in the cycle. The point regarding availability of evidence regarding evaluation of enhancement activity for providers early in the cycle is acknowledged as a genuine potential concern, which QAA plans to address through activity to prepare for the introduction of the review in the forthcoming academic year for all key participants.

7) Does the approach to reviewing quality enhancement through enhancement priorities chosen by the provider allow the review to explore the provider's strategic approach to enhancement effectively?

| Yes | 5 | No | 0 | Not sure | 2 |
|-----|---|----|---|----------|---|
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Comments

Several respondents commented that the opportunity for providers to choose enhancement priorities to exemplify their strategic approach to enhancement was helpful in several ways: it gave flexibility, accommodated the particular needs of different providers and allowed more focused discussion with the review team. This approach to reviewing quality enhancement through enhancement priorities was considered to allow sufficient evidence for the review team to produce a statement. A respondent expanded that enhancement priorities should also help the review team to understand how a provider takes account of student feedback and uses evidence to plan, implement and evidence enhancements to the student experience. One respondent suggested that there should be a degree of flexibility in the approach as providers may have one all-encompassing enhancement priority on which they would wish to focus.

Further considerations raised by respondents included how it would be useful to consider how the method would provide a more holistic and broader assessment of the provider's quality enhancement culture rather than assessing a number of projects (enhancement priorities). Related to this, two respondents commented on allowing the opportunity for providers to provide a short contextual statement within the self-analysis, rather than solely relying on case studies, to allow them to explain how the enhancement priorities fit within their wider enhancement framework.

One respondent considered the effectiveness of the approach in relation to quality enhancement; the potential for adding value from the provider's perspective will be dependent on the experience and training of peer review panels, otherwise review panels will confirm what the provider already knows.

Finally, one response noted the use of the phrase 'peer engagement' as part of defining an enhancement priority (Annex 1) as ambiguous.

Response

The purpose of the quality enhancement element of the review is to provide an overall statement on the provider's strategic approach to quality enhancement. This is intended to be an overall statement of the provider's approach which has been demonstrated through the enhancement priorities put forward for the review. Review teams will need to evaluate these priorities within the broader context of the provider's approach. To emphasise this

point, the report heading for the enhancement section has been amended to 'Statement(s) on the provider's strategic approach to enhancement' rather than statements on the provider's approach to enhancement priorities (Annex 7). While, overall, QAA considers the Handbook to encapsulate this holistic evaluation, it will be essential for review teams to contextualise their enquiries within the wider practices of the provider, a point which needs reinforcing in reviewer training and guidance.

QAA supports the inclusion of a short contextual statement within the self-analysis to give case studies greater context in relation to the provider's enhancement framework and this point has been strengthened within the relevant section on the Self-Analysis.

Throughout the period of evaluating and developing the review method, there has been a consistent message from providers about gaining added value from the review process with regard to their approach to quality enhancement through greater and more meaningful peer dialogue. The focus on the strategic approach to enhancement and steps to provide greater focus on enhancement during the Review Visit is hoped to provide a structure that will help to enable this. QAA will also address this point through the selection and appointment of appropriately qualified reviewers and through reviewer training.

Finally, the wording of the definition of an enhancement priority (Annex 1) has been reviewed and amended by taking out reference to peer engagement to eliminate what was considered as potentially ambiguous. Acknowledgement has been included in Section 3 that some enhancement priorities will be wide-ranging and may encompass a number of related initiatives.

8) Will the approach to enhancement ensure parity between providers reviewed at different points in the review cycle?

| Yes | 1 | No | 0 | Not sure | 6 |
|-----|---|----|---|----------|---|
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Comments

While one respondent commented that the approach of contextualising each review would ensure parity between providers, most providers were unsure about whether the approach to enhancement will ensure parity between providers at different points in the cycle. One provider considered that providers reviewed in the early part of the review cycle will form a test case of the new method.

Two respondents raised the potential impact of external factors at different points in the review cycle on ensuring parity - specifically developments in relation to the UK Quality Code for Higher Education (the Quality Code), changes to the baseline regulatory requirements, and changes introduced by the newly established Commission for Tertiary Education and Research (CTER). These changes could impact on the QAF for Wales and consequently the judgement criteria used in QER. Any changes would require clear communication with providers if, and when, these changes would impact the judgement criteria.

Another area where respondents were concerned about the impact on providers scheduled earlier in the cycle, was related to the evidence base. For instance, the availability of some evidence trails and live documentation, and whether there would need to be an element of either retrofitting some of the expected documents or the provision of additional contextual statements to existing statements in order to satisfy the evidence base criteria. One respondent commented that providers would need support so they felt confident in providing a slimmed down evidence base.

Respondents also identified timing as a factor that could impact the parity of providers undergoing review at different points in the cycle. For instance, how different timings of reviews would allow providers later in the cycle to benefit from having more time to evaluate the impact of the review on other providers. Another comment was made on the differences between the scheduling of the provider's own cycle of strategic review and the QER; and the need for consistent review of evidence for reviewers to understand the different contexts of providers and to ensure parity of process and outcomes between providers. One further comment in relation to the timing of reviews, related to the need for consistency in review outcomes over the cycle, otherwise irrelevant conclusions and comparisons may be drawn. In relation to these matters, the importance of reviewer training was stressed by several respondents.

Ensuring parity of outcomes between providers was also considered challenging when the nature and range of meetings at a Review Visit will depend on the individual provider's identified enhancement priorities and the extent of significant changes to the provider's approach to quality assurance. It could result in much less focus on quality enhancement for some providers.

One respondent was supportive of a sector-wide enhancement theme for a fallow year, which is not included in the Handbook. While recognising it posed challenges for parity of treatment for providers before and after the fallow year, the provider thought this could have been overcome and the opportunity for enhancement themes to extend beyond Wales and include Scotland and Northern Ireland.

Response

In relation to the impact of external changes on the review method, QAA is committed to clear communication with the sector on any planned changes. It is envisaged that there would need to be a consultation for any major changes to the review process and/or review outcomes. Furthermore, providers could expect at least 12 months to take account of new or revised reference points (this is now stated in the Handbook).

QAA is considering how to address comments relating to the availability and suitability of evidence required for the revised approach at the start of the cycle. It may require further contextual explanations as suggested, which could be accommodated within the *contextual evidence* part of the evidence base - an additional element of the evidence base designed for this purpose following feedback from providers. QAA plans to have events and workshops in the forthcoming academic year to discuss the evidence base which will address these concerns. This could include how providers may consider ongoing support for each other during the review cycle.

In respect of other concerns regarding the impact of timing on the parity of reviews, the review's intended objective is to focus on the context of the provider as an autonomous body which should mitigate this risk along with reviewer training. The latter includes the consistency in outcomes, including the statement on the provider's strategic approach.

QAA did not include details about the fallow year or sector-wide enhancement themes; the feedback from the sector considered this to complicate the focus of the review. However, QAA does intend to work with the sector to consider in more detail how joint quality activity across Wales and beyond may be achieved, particularly with a view to activity during a fallow year. However, the Handbook has been updated to accommodate the definition of what is an enhancement priority in QER - to acknowledge that providers may already be involved in enhancement work through partnership with other providers (this could be outside Wales).

Confirming versus appraisal of baseline requirements

9) Does the revised review process enable confirmation of practice where there is continuing or little change in practice between reviews?

| Yes | 5 | No | 0 | Not sure | 2 |
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Comments

One respondent welcomed the development that the review provided scope for baseline requirements to be confirmed by the review team at the end of the First Team Meeting, therefore enabling greater focus and discussion on quality enhancement during the Review Visit. Similarly, several respondents acknowledged that the Handbook was clear that where there is little or no change in quality arrangements, the primary focus will be on confirming not appraising practice. For one respondent, the onus was on the provider to ensure the Self-Analysis provides reviewers with sufficient understanding of the provider's continuing approach to managing academic standards and quality of provision. Furthermore, review teams should recognise that, over a five-year period, there will be a degree of change to practice as providers continually enhance their practice and respond to external factors.

One respondent queried the implication that confirmation of quality assurance practices alone is sufficient to satisfy baseline requirements and that clarification of enhancement-related lines of enquiry could then lead to recommendations and areas of ongoing development.

Half of the responses referenced the definitions for confirming and appraising contained in Annex 1, and how review teams should only need to reappraise fundamental change. Several comments were made about how the definition of confirmation could be made clearer and how it would be helpful to provide examples of acceptable evidence.

Response

QAA welcomes that the majority (five respondents) considered that the revised review process would enable confirmation of practice where there is continuing or little change in practice between reviews.

QAA recognises that quality assurance and enhancement are interrelated practices, and that enhancement activity will be informed through quality assurance practices and engagement of students. This is acknowledged in Section 2 and referenced in other key sections of the Handbook (for example, Self-Analysis). QAA agrees that clarification of enhancementrelated lines of enquiry could inform the review team's recommendations. The potential to improve and enhance the learning opportunities has been incorporated within the definition of a recommendation (Annex 1) and builds on feedback from the workshops and other discussions.

For the response to the comments on the definitions for confirming and appraising, please see Question 10 which was asked specially in relation to Annex 1.

10) The review is based on the confirmation of existing practice where possible and more detailed appraisal of evidence where there have been changes or risks identified to the management of provision. The terms (re)confirmation and (re)appraisal are defined in Annex 1. Are the definitions for confirming and appraisal/reappraisal (Annex 1) helpful?

| Yes | 3 | No | 1 | Not sure | 3 |
|-----|---|----|---|----------|---|
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Comments

Two responses found the definitions clear/helpful while a further two responses only found the definition of appraisal appropriate. Responses focused on two challenges: the likelihood and impact of change between reviews, and what is meant by a fundamental change to delineate between the confirming and appraising.

The potential for changes in practice between reviews was thought to be considerable due to changes in the regulatory environment and requirements, as well as providers continuously improving and enhancing their practices. This context was considered to diminish the scope for confirming practice and, as a result, review teams would be required to appraise far more than anticipated.

Although the section in the Handbook on supporting evidence was considered to provide helpful guidance on appraisal for one respondent, examples or illustrations of reappraisal would be considered helpful by a number of respondents. Another take on this was for much greater clarity on what constitutes a fundamental change as this is potentially open to interpretation. Furthermore, a response considered the definition of confirmation as too narrow and should be defined as the converse of reappraisal - that is, there has not been a fundamental change.

Other comments included a request for the Handbook to consistently state 'reconfirming' rather than 'confirming' and clarity on the consequences of reappraisal as opposed to confirmation in terms of process.

Response

QAA acknowledges the ongoing challenge of changes to the regulatory environment and their impact on providers' processes and practices. Nevertheless, QAA hopes the approach employed by the review process which distinguishes between practices that can be confirmed as continuing and effective, versus practices that require greater scrutiny, is still of overall benefit. QAA considers the understanding of what constitutes fundamental changes versus minor changes for the purposes of differentiating between the two approaches, as fundamental to the overall success of the review approach. QAA will work with both providers and reviewers to explore and build a common understanding of what this means through events and workshops over the forthcoming academic year. For reasons of ensuring parity throughout the review cycle, this is considered an important piece of work. This collaborative approach is hoped to be of more value than providing further explanation/examples in the Handbook which may be of limited use when considered other areas.

To address feedback on the definition of confirmation, QAA has added 'area of ongoing development' to the definition as well as elaborating that the process of confirming allows reconfirmation of continuing and effective practice. The later edit distinguishes between the practice of confirming and the outcome of reconfirming. Similarly, a distinction between

appraisal and reappraisal has been made where reappraisal is applied to a change in approach or process since the last review.

11) Are there any elements to the review process that need to be strengthened in order that a review can focus on confirming versus appraising as appropriate?

| Y | es | 2 | No | 3 | Not sure | 2 |
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Comments

Comments, which were relatively few, related to the confirming element of the review process; the need for a clear and improved definition; and the importance that this was fully explained at reviewer training so that a greater focus on enhancement was achieved as this intention was not achieved in the previous cycle. A clear definition was considered crucial if review teams were to be able to reconfirm baseline requirements at the First Team Meeting and to reduce the risk of teams reappraising minor changes during the Review Visit. One respondent commented that it was difficult to predict without seeing how the revised processes work in practice.

Response

See response to Question 10.

Documentation

12) Does the length of the self-analysis and limit on the number of items of supporting evidence give providers sufficient opportunity to demonstrate and confirm their approach to managing their provision?

| Yes | 3 | No | 1 | Not sure | 3 |
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Comments

Comments covered a range of positions on the length of the self-analysis and number of items of evidence. One respondent welcomed the length of the self-analysis (SA) and considered that the enhancement culture of the provider could be articulated within 20 pages. It was also commented that specifying the length of the SA should improve comparability between reviews and encourage greater discipline and focus on what analysis and evidence is provided. A further respondent considered that both the shorter SA and 100 documents should be sufficient evidence for the review team to reach the required judgements. Two respondents considered the limits on SA and items of evidence should be adequate for most providers, although it may be necessary to exceed the nominal limit if the provider wishes to provide additional context or context for an area that has previously been under question. One respondent welcomed the shorter limit but noted the dramatic reduction compared to previous reviews which may push providers to finding alternative means to provide information. One respondent considered the limit on the SA too short if the provider had fully developed enhancement priorities (demonstrating planning, implementation and evaluation) or had a particular reason for a quality assurance / quality enhancement focus on a certain area.

Response

QAA notes that some providers are more confident about working within the parameters proposed for the evidence base. An important element of achieving comparability between reviews will be a provider's ability to work to these.

During the development of the revised method, QAA took on board feedback and concerns from providers about whether they had sufficient opportunity to provide contextual information and for this reason included a separate category for this type of information, which is separate to the 100 items of supporting evidence. This should help to address some of the concerns about supplying additional context.

As part of the preparations for implementation of the revised review method, QAA intends to bring providers and reviewers together to come to a shared understanding about particular aspects of the review. As mentioned in our responses to Questions 8 and 10, QAA intends to hold workshops for providers and reviewers. Due to the close connection between the confirming and appraising aspects of the review process as well as the evidence base, these workshops will also consider what constitutes appropriate items of evidence. QAA will also provide guidance to reviewers and QAA Officers on the evidence expectations through training.

13) The evidence base is made up of several elements: supporting evidence, contextual information and information shared by HEFCW. Is this structure helpful to providers in preparing their evidence base for their review?

| Yes6No0Not sure1 | |
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Comments

Four respondents commented on the information shared by HEFCW. Two of these respondents said it would be helpful in the interests of transparency for the information to be made available to the provider at the same time that HEFCW shares its documents with QAA. Two respondents asked for clarification on whether HEFCW will be providing further contextual information to support the review process and, if so, when this will be made available to providers.

Two respondents commented that the structure and limit on the number of items of evidence was helpful. Further detailed comments included the need for the review team to be mindful of the limit on providers when making further evidence requests following the First Team Meeting and to explain clearly and justify their requests. Requests for additional documents during the Review Visit should only be made in exceptional circumstances.

It is suggested that QAA needs to help providers feel confident to work within the limits of evidence base and that they only submit what they judge to be absolutely necessary.

Response

QAA has discussed requests from respondents that documents provided by HEFCW are also shared with the provider. Any further contextual information provided by HEFCW to support the review will have already been shared with the provider or is otherwise available to the provider, or is in the public domain.

When review teams make further evidence requests, QAA acknowledges that the reviewers and QAA Officer should only request evidence if it is absolutely necessary - paragraph 84 of

the Handbook says that the QAA Officer will scrutinise all requests for additional evidence. We have added to the text that reviewers will specify why they have made the request. QAA agrees with the comment that evidence requests during the Review Visit should only be made in exceptional circumstances - we state in paragraph 96 of the Handbook that such requests are to be kept at a minimum.

Finally, QAA hopes that through its workshops next year it will help providers build their confidence in working with the structure and limits of the evidence base.

Student engagement

14) Does the revised review process enable students to be partners in the process?

| Yes | 7 | No | 0 | Not sure | 0 |
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Comments

All respondents agreed that the revised review process would enable students to be partners in the review process. One respondent commented that many concerns raised before about student input - the value of student submissions, the quality and/or completeness of student feedback from meetings and weight given to these contributions - did not appear to be considered. On the other hand, another response welcomed the evident role of students as partners in the process and welcomed the advent of joint staff and student meetings with the review team to discuss engagement in enhancement activities. One response included comments from the Students' Union at the provider, providing some useful feedback to QAA on both what to incorporate in training for Lead Student Representatives (LSRs) and in the update to the Student Guide for QAA Reviews in Wales.

Response

QAA will take account of the feedback in preparations for LSR training and revision of the Student Guide. Concerns raised about the value and contribution of some of the student input will also inform reviewer training. No amendments are thought necessary to the Handbook.

Outcomes of the review

15) The outcomes of QER include validation by the review team of actions being undertaken by a provider to improve the effectiveness of particular quality procedures and practices. To reflect that these are areas of ongoing improvement, the term has been changed from 'affirmations' to 'areas for further development' (see Annex 1). Is this clarification in terminology helpful?

| Yes | 5 | No | 2 | Not sure | 0 |
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Comments

The clarification of terminology was considered helpful although there were mixed views about the replacement of 'affirmations' with 'areas for further development'. Most respondents preferred the term 'affirmation'. What came through the comments was the preference for the term to acknowledge that it was action being taken by the provider to address a weakness that it had identified itself. References to affirmations were identified by

respondents as still existing in a number of places in the text. One suggestion was for a more positive connotation by calling them 'areas of ongoing improvement'.

Response

QAA has reviewed and updated the text to ensure the terminology is consistent. The suggestion for 'ongoing development' in place of 'further development' has been adopted and is considered to take account of other comments about reflecting the proactive nature of these actions being taken by providers. The definition has also been reviewed and a minor revision made to reflect the feedback.

Follow-up process

16) Do you have any comments on the interim monitoring process?

| Yes | 7 | No | 0 | Not sure | 0 |
|-----|---|----|---|----------|---|
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17) Are the arrangements for follow-up for different review outcomes clearly explained? Are there any areas that need further explanation?

| Yes | 5 | No | 2 | Not sure | 0 |
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Comments

Two responses focused on whether there was value in having a follow-up process for providers with positive outcomes compared to the previous arrangements of publishing and updating an action plan. One response considered the interim monitoring process as an extra burden on the provider considering it was not currently subject to monitoring activities. The value of the process was also questioned in relation to HEFCW's quality assessment functions - annual assurance statements required of the governing body and the triennial visit. It is suggested that the process should only come into play as part of the follow-up process for outcomes with conditions.

Another comment in relation to the interim monitoring processes was concerned with the lack of clarity on the size and shape of the reports - both the short update report produced by the provider and short report from the outcome of interim monitoring. One respondent commented that interim monitoring should not extend beyond matters raised in the action plan. Finally, a suggestion was made to consider an action plan template so there is consistency in reporting.

No separate comments were made in relation to the second question.

Response

QAA has added the reasons for introducing a more formal follow-up of action plans to the Handbook. This includes the assurance it provides to HEFCW as the Educational Oversight Body for providers in Wales as well as compliance against ESG Part 2 for external quality assurance (Standard 2.3), which requires agencies to have a consistent follow-up process for considering the action taken by the institution. In relation to the comments on perceived burden of the process, QAA considers that the process for interim monitoring could normally be undertaken within a liaison meeting rather than a separate and formal interim monitoring visit, which better reflects the design of the overall external quality assurance process.

QAA has also reviewed and revised the text of Section 6 of the Handbook to explain more effectively the common elements of action planning and the follow-up process.

QAA plans to produce further guidance on the interim monitoring process, particularly with respect to expectations regarding length of reports and scope for an action plan template and will involve providers in these discussions. QAA agrees with the comment and principle that interim monitoring should not extend beyond matters raised in the action plan.

Review Report

18) Is the proposed content of the Review Report (Annex 7) a useful basis for provider's preparation for the review?

| Yes | 7 | No | 0 | Not sure | 0 |
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19) Will the proposed content of the report provide information that will be useful to the provider, the sector and other stakeholders?

| Yes 6 No 0 Not sure 1 |
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Comments

There were two comments for both questions. In relation to the proposed content of the Review Report as a basis for the provider's preparation, Annex 7 was considered a useful guide while another considered the word count, which is equally split between assurance and enhancement, as not aligning with the greater focus on enhancement. One query was raised about an explicit reference to supporting Welsh language within the section on the 'implementation stage' of enhancement priorities rather than it being woven throughout the enhancement priorities. One response considered that there was a mismatch between the focus of the review on the student learning experience on the one hand and a focus on the extent to which students are involved in enhancement on the other.

One respondent asked that the timeliness of overview/thematic reports from the full cycle to be improved.

Response

QAA agrees that reference to the Welsh language within the section on the provider's strategic approach should not be confined to the subsection on the implementation stage and the text has been modified. In relation to the report headings, it is reported above (Question 7) that the wording of the heading to Section 3 has been modified to focus on the overall strategic approach to enhancement rather than enhancement priorities.

In relation to the comment on the mismatch in the method between the student learning experience and student engagement in enhancement as the focus of the review, QAA would comment that student engagement in enhancement is one component of the statement of the provider's approach to enhancement - a requirement of the method. Student engagement, individually and collectively, is a common practice of the Quality Code. Having considered this point, QAA did not consider it necessary to make further amendments.

QAA acknowledges the feedback on the timeliness of thematic reporting process. A suite of thematic reports is in preparation for the first cycle of QER for publication in the autumn term.

Welsh language and equality, diversity and inclusion

20) How could the review process / Handbook be changed to have positive effects on opportunities to use Welsh language?

21) How could the review process / Handbook be changed to have positive effects on treating the Welsh language no less favourably than the English language?

Comments

Respondents confirmed that the Handbook with the inclusion of Annex 3 (Welsh language) makes sufficient provision for contributions to the review process to be made in either Welsh or English. The main issue, raised by two respondents, is the recruitment and availability of sufficient reviewers able to conduct the review through the medium of Welsh.

Response

QAA has undertaken a Welsh language impact analysis of the draft handbook. Additions to the Handbook include how to raise complaints regarding QAA's compliance with the Welsh language standards and addressing a number of areas to have a more positive effect on treating the Welsh language no less favourably than the English language; for instance, making the draft Review Report available to the provider in both languages. QAA operates a number of routine processes, such as collecting and recording language preferences, which are now detailed in the relevant sections of the Handbook.

QAA has a number of Welsh speakers in its reviewer pool and will be looking to strengthen this aspect of reviewer pool through recruitment opportunities in the near future.

22) What impact does the revision of the review process have on improving equality, diversity and inclusion? What further enhancements can be made?

Comments

There were two comments for this question. The respondent did not envisage that the revision of the review process has any detrimental impact on equality, diversity and inclusion (EDI), noting that the Handbook is careful to provide for the inclusion of the diversity of students and commitment to EDI of the reviewer pool. The respondent suggested that consideration should be given to including an annex that consolidates the commitment to EDI in the review in a similar way that QAA's obligations and commitments to Welsh language in the review are set out in Annex 3. The other response considered that there are improvements to the revised process; explicit guidance that the student contribution should aim to represent the view of the breadth and diversity of students and emphasise how QER will explore the extent and effectiveness of partnership work with the full diversity of students.

Response

QAA has considered this suggestion and agrees that an annex would consolidate the commitment to EDI and an annex (see Annex 16) has been added to the published handbook.

Additional comments

23) Are there any other comments you would like to make in relation to the revised Handbook?

Comments

Other comments included:

- The Handbook accords with the proposals made by HEFCW on the revision of the external quality review.
- The lack of acknowledgement in the Handbook to possible impact of sector developments, particularly the implementation of CTER, which will come into play prior to the completion of the review cycle.
- At this stage, a review of the UK Quality Code is unhelpful.
- Two respondents commented on the missed opportunity to support a greater focus on quality enhancement; for one it was the opportunity for a more radical approach to the review method and for the other it was the opportunity to draft a new, shorter and more condensed handbook.
- A reservation about the value of a statement on the provider's strategic approach to enhancement rather than a judgement, and the need for further information about length and detail of the statement. Clarification on whether a negative statement would require follow-up.
- A greater focus on quality enhancement will depend on the role played by QAA officers and the training provided to reviewers.
- The relevance of including policy drivers from the Welsh Government as areas that QER can appraise.
- The preparatory meeting should focus on areas of enhancement and lines of enquiry are not appropriate at this point in the review process.
- The need for clarity on the use of the QAA Quality Mark for the wider sector.

Response

QAA has made a number of amendments to the Handbook as a result of these additional comments. It is agreed that is not appropriate to discuss potential lines of enquiry at the preparatory meeting as these are outcomes of the review team's analysis and discussion at the First Team Meeting. Similarly, the reference to Welsh Government policy drivers has been qualified where appropriate.

In terms of concern that there has been a missed opportunity for a greater focus on enhancement, QAA is satisfied, from its reading of the consultation comments, that the method will provide a sufficient focus on quality enhancement (Question 5) and deliver the requirements set out by HEFCW. While there is certainly scope for a more progressive approach, QAA worked collaboratively with the sector to agree the method.

In relation to acknowledging the establishment of CTER, this has been strengthened in the introduction of the Handbook and that any substantive changes to the review method would be subject to consultation with the sector. While it is anticipated that QER will become part of CTER's approach to external quality review, it is likely that the Handbook will be updated to reference CTER once HEFCW has been dissolved. QAA appreciates that for the purposes of preparing for a review, changes to the baseline regulatory requirements, including the

Quality Code, during the review cycle may be considered undesirable. QAA has been holding detailed and extensive conversations with members and other groups on the <u>future</u> <u>of the Quality Code</u>. Further discussions on the central part of the Quality Code (the Expectations and Core/Common practices) will be held over the summer and subject to consultation in the autumn. QAA's work on the Quality Code is cognisant of how it is used across the UK, especially in nations where it underpins external review arrangements. QAA encourages members in Wales to take part in these discussions. There are opportunities for greater alignment with the European Standards and Guidelines, for instance, which may be considered beneficial when considering international comparability.

QAA agrees with the comment that the delivery of a greater focus on enhancement will depend on the training and support of QAA officers and reviewers. QAA ensures that all officers and reviewers are trained in the method before they conduct a review.

The use of the QAA Quality Mark is detailed in paragraph 127, and the terms and conditions are published on QAA's website. A statement on the purpose of the Quality Mark has been added to this section.

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