UNIVERSITY OF SURREY

Code of practice for the enhancement of taught provision

Academic year 2026/27

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Introduction

1. This *Code of practice for academic provision enhancement: taught programmes* applies to all taught and Degree Apprenticeship programmes at the University of Surrey, its Associated/ Accredited (UK) and Validated/Franchised (Transnational (TNE)) Institutions, which lead to the University of Surrey's degree awards and credits as described in the *Regulations for taught programmes* and the *Regulations for the foundation year*.

2. The University of Surrey enhancement processes are based on the Sector-Agreed Principles, as described in the Quality Assurance Agency (QAA) *UK Quality Code for Higher Education 2024*.

3. The *Code of practice for academic enhancement provision* establishes a holistic approach to maintaining academic standards and enhancing student experience and outcomes across all University of Surrey degree-awarding programmes. It introduces a tiered, risk-based model of engagement at subject and programme level, underpinned by clear guiding principles: data-informed decision-making, collaboration and support, transparency and consistency, respect for disciplinary diversity, and partnership with students.

Overview

4. This *Code of practice* integrates three key areas of academic provision: student experience, continuation/completion/attainment, and progression/graduate outcomes, with the institutional oversight from the University Education Committee (UEC) and School and programme-level ownership through Continuous Enhancement Plans (CEPs), which are regularly reviewed by the Boards of Studies and Associate Heads, Education (AHE).

5. This *Code of practice* is based on existing data-driven enhancement processes, using a core data set (including national student surveys, continuation, completion, graduate outcomes, awarding gaps and internal performance indicators) to inform three levels of enhancement:

    - **Continuous Enhancement Review** – ongoing analysis and reflection with the main focus on internal and external benchmarks, identifying risk and plan of action; the process is designed for all academic programmes of study, with the outcomes of the review analysis reported annually to the University Education Committee;
    - **Enhancement Support** – designed for subjects/programmes with emerging identified risks against internal or external benchmarks, with centrally-supported enhancement; and
    - **Periodic review** – designed for areas of sustained underperformance or high regulatory risk, a cyclical "deep dive" review to identify enhancement opportunities, with University-level oversight.

6. This holistic approach is designed to ensure that resources and expertise are targeted where they will have the greatest impact, while providing stronger evidence of improvement in student experience and outcomes, clearer ownership of enhancement at subject and programme level, and joined-up assurance against Office for Students (OfS), Teaching Excellence Framework (TEF) and Access and Participation Plan (APP) requirements.

Purpose

7. The purpose of this *Code of practice* is to bring all enhancement activity under a single, coherent framework that:

- Improves student experience and outcomes across all academic programmes leading to the University of Surrey award;
- Aligns with OfS/TEF/APP requirements in a holistic way;
- Uses data intelligently (not punitively) to target support where it will have most impact;
- Embeds continuous, programme/subject/School-owned enhancement process flow with clear Faculty/University-level oversight, rather than sporadic fixes and isolated actions;
- Integrates better with wider risk-based quality assurance and enhancement, and the University Education Strategy towards Vision 2041.

Key principles

8. The University of Surrey enhancement of taught provision process is:

- Committed to an exceptional student experience and education, fostering a transformative and inclusive learning environment.
- Data-informed, not data-driven, drawing upon quantitative and qualitative evidence, interpreted thoughtfully in context.
- Collaborative and developmental, prioritising support over sanction, with a shared focus on learning, enhancement, and continuous improvement.
- Transparent and consistent, underpinned by clear expectations, defined processes and, and agreed timelines across the institution.
- Action-oriented and impact-focused, ensuring every intervention is linked to specific, measurable, and meaningful outcomes.
- Respectful of disciplinary diversity, operating within a common institutional framework that is responsive to local contexts.
- Student-partnered, working with students as partners in interpreting evidence, co-designing actions, and evaluating impact.

Data-informed approach

9. The enhancement of taught provision process is based on the following three integrated strands:

- Student Experience (National Student Survey (NSS), Postgraduate Taught Experience Survey (PTES), internal surveys, Module & Programme Evaluation Surveys:
  - Focus: teaching, assessment & feedback, academic support, learning resources, organisation, student voice.
  - Outputs: subject/programme-level self-evaluation, priority themes, action plans and communication plans.
- Continuation, Completion & Attainment:
  - Focus: progression, withdrawal, completion, good degree rates, success and progression for underrepresented groups and awarding gaps.
  - Outputs: risk-based flagging, targeted progression/attainment plans, embedded into programme and school Continuous Enhancement Plans (CEP) and alignment with the Access and Participation Plan (APP).
- Progression & Graduate Outcomes
  - Focus: placement and Professional Training Year (PTY) experience, employability, graduate outcomes (GO), engagement with careers.
  - Outputs: progression enhancement plans, integration of careers and curriculum, monitoring of GO-related KPIs.

Institutional Oversight

10. The University Education Committee and its sub-committees are responsible for the institutional oversight of the academic provision enhancement process. Each strand (see p.9 above) may also have associated working groups (for example, Student Success Group and ILE group, Employability Steering Group, etc.). Specific actions, linked directly to Subject/programme-level CEPs, are monitored through Boards of Studies and Faculty Education Committees.

Part A: Continuous Enhancement Review

Definitions

11. ***Continuous Enhancement Review (CER)*** – is the continuous, systematic, and risk-based review process that assures and enhances the quality of taught programmes. Continuous enhancement review takes place throughout the academic year, as metrics and feedback become available. CER consists of two elements: a Continuous Enhancement Plan (CEP), and the Annual Programme Enhancement Review (APER).

12. ***Continuous Enhancement Plan (CEP)*** – is a single rolling action plan for each programme which is regularly maintained by the Programme Leader/Head of Discipline. The CEPs should clarify if the Foundation Year provision is integrated into the CEP for a relevant degree programme, or if a separate action plan is being maintained by the Foundation Year Programme Leader. **N.B**. In cases where the data range used for the CEP for an individual programme was flagged "at risk" (for example, low/declined rates of student continuation, progression, attainment gaps, etc), the Programme Leader/Head of Discipline is required to liaise with the Associate Head of School, Education (AHE). These risks will subsequently be considered by the Faculty senior education and executive leadership committees and groups, as outlined in Flowchart 1.

13. ***Continuous Enhancement Plan (CEP) for Academic Partner Institutions*** – where partner institutions deliver programmes of study that lead to the University of Surrey awards, including through Accredited and Validated/Franchised agreements, the Programme Leader/Head of Discipline is responsible for regularly maintaining a single rolling action plan for these respective programmes. **N.B**. In cases where the data range used for the CEP for an individual programme was flagged "at risk" (for example, low/declined rates of student continuation, progression, attainment gaps, etc), the Programme Leader/Head of Discipline is required to liaise with the Link Tutor (where appliable) and/or Head of School/Department. These risks subsequently will be considered by the executive leadership committees and groups, as outlined in Flowchart 2. Please see paragraph 46 below for key requirements and data sources for CEPs for Academic Partner Institutions (APIs).

14. ***Annual Programme Enhancement Review (APER)*** – is a reflective annual report, produced by the AHE for a group of programmes in their School. The annual report should highlight key themes, issues, and identified risks, and also areas of good practice for wider dissemination across the University.

15. ***Annual Programme Enhancement Review (APER) for Academic Partner Institutions*** – where partner institutions deliver programmes of study that lead that lead to the University of Surrey awards, they should provide a reflective annual report that cover all those respective programmes. The annual report should highlight key themes, issues and identified risks, and also areas of good practice for wider dissemination across the University and its Academic Partner Institutions (where applicable). Further information for APER reports for Academic Partner Institutions (APIs) is covered in paragraph 47 below. An overview of the consideration and approval of the Academic Partner Institutions' continuous enhancement review outcomes is attached in Appendix 2.

16. ***Access and participation plan (APP):*** – "Access and participation plans set out how higher education providers will improve equality of opportunity for students from disadvantaged backgrounds to access, succeed in, and progress from higher education." (OfS 2022[1])

Purpose, aims and scope of the continuous enhancement review process

17. The continuous enhancement review is a key element of the University's academic quality processes in supporting improvement of the quality of the taught programmes offered by the University.

18. The main function of the continuous enhancement review process is to monitor risks and provide regular checks on ongoing learning, teaching, and assessment provision at an operational level, identifying and tracking actions that will further enhance the quality of provision.

19. The continuous enhancement review process enables the University to reflect on:

    - The student experience and existing learning opportunities;
    - Achieved academic standards and student outcomes.

20. The effectiveness of the continuous enhancement review process is ensured by following up on identified risks and recommendations for appropriate actions in the Continuous Enhancement Plan (CEP), with the provision of clear roles, responsibilities, and reporting processes for all members of staff involved. As a result, effective and prompt follow-up of CEP actions will protect the interests of current students and ensure identified staff and resource development needs are addressed. The discussion and follow-up of CEP actions should be documented in the Minutes at each Board of Studies.

21. The continuous enhancement review process covers all taught provision including the foundation year, undergraduate, and postgraduate taught programmes leading to a University award or stand-alone credit and offered by the University of Surrey and its partner institutions (in the UK and overseas).

22. The University may have centrally initiated action plans, e.g. NSS action plans. In these cases, there will likely be faculty versions which are then disseminated to the school and down to programmes. The resulting actions are recorded on the subject/programme cluster CEPs.

23. The Associate Head of School, Education is required to produce a separate APER report for undergraduate programmes and postgraduate taught programmes. Foundation year Programme Leads are required to produce a separate APER for foundation year programmes (please see separate reporting template on the QAD central SharePoint site).

24. All permanently or temporarily closed programmes must undertake continuous enhancement review during the process of teaching out, including during the final year of the programme(s). The continuous enhancement review should focus on maintaining academic standards and the student learning experience, and on how identified issues and recommendations are, and have been, addressed and followed up.

[1] Office for Students (2022). *Access and participation plans - Office for Students*. [online] Officeforstudents.org.uk. Available at: https://www.officeforstudents.org.uk/for-providers/equality-of-opportunity/access-and-participation-plans/ [Accessed 21 Aug. 2026].

25. In cases of a review process for a joint honours or major/minor programme, the school responsible for the programme should produce the report. The report must consider input from all schools to reflect students' experience across the modules and the programme.

26. An overview of the consideration and approval of the continuous enhancement review outcomes is attached in Appendix 1.

Procedure overview

Maintain Action Plans

27. Each programme maintains a Continuous Enhancement Plan (CEP) on an ongoing basis, throughout the academic year. The Programme Leader updates the CEP regularly in response to new data, external examiners' comments, or student feedback. As a minimum, all the CEPs are reviewed twice per year for consideration at each meeting of the relevant Board of Studies. The programme team, Chair of the Board of Studies, and Associate Head of School, Education are responsible for ensuring this consideration takes place regularly.

Produce Annual Enhancement Report

28. APERs are produced once a year by the Associate Head of School, Education. APERs should also undergo faculty-level scrutiny. Associate Deans, Education shall meet regularly (twice annually as a minimum) with their Pro-Vice-Chancellor, Executive Dean, Pro-Vice-Chancellor, Education, Director of Academic Performance, Quality and Governance and/or Chief Student Officer, as appropriate, to discuss and respond to identified risks within the APER reports and support timely dissemination and implementation of best practice across Faculties. It is the responsibility of the Associate Dean, Education to ensure that these discussions take place and executive level staff are kept informed of the CER process and its outcomes. AHEs will be invited to contribute to these discussions. APER reports are also discussed and approved by Faculty Education Committee (FEC).

Submission of Overview of Annual Programme Review Reports to Faculty Education Committee

29. The Faculty Associate Dean, Education presents a summary of Faculty APERs to the University Education Committee (UEC), including any recommendations, for approval.

30. Reference points for consideration as part of the ongoing development of the CEP and APERs include:

    - Discussions at Boards of Examiners prompted by module marks and degree outcomes data;
    - The Power BI dashboards provided by Strategic Planning and the Directorate of Academic Performance, Quality and Governance, which include statistics on student surveys, progression, continuation, degree outcomes, and employment outcomes;
    - Annual external examiners' reports and module comments;
    - Outcomes from academic governance structures where risks have been identified.

31. The templates for the individual CEPs, APERs, Faculty overview reports, and associate institutes' Annual Review Reports are available from a central Quality Assurance Documentation (QAD) SharePoint site. Staff members can also access additional resources, including ongoing CEPs and individual APER reports for previous

years, from the QAD SharePoint site. Submission and storage of documentation is to be managed through this SharePoint site to facilitate appropriate oversight of the process.

Roles and responsibilities

32. Where programme(s) to be reviewed are delivered through an academic partnership, there should be appropriate representatives of all partners contributing to the continuous enhancement review.

33. Where student or partner representatives are present at the Board of Studies meetings that consider CEPs, the meeting agenda may include a Reserved Business section for any discussions to be attended by staff members only.

34. The University defines roles and responsibilities of various members of staff, organisational bodies, and committees involved in initiating and managing the continuous enhancement review process, as described in Table 1 below:

Table 1: Continuous enhancement review process: a summary of roles and responsibilities

Role	Responsibilities
Head of Academic Policy and Governance (APG)	• Provide support and guidance to relevant academic members of staff involved in the process, including staff in Associated and Accredited Institutions (AIs); • To evaluate the outputs of continuous enhancement review process.
Academic Quality Services (AQS)	• To advise and assist with the creation of new CEPs; • To facilitate uploads of individual CEPs, APERs, and Faculty overview reports to the QAD SharePoint site and to be responsible for the ongoing maintenance of this site; • Ensure Boards of Studies are appropriately reviewing CEPs.
Strategic Planning / Director of Academic Performance, Quality and Governance (APQG)	• To provide a core dataset to inform continuous enhancement review for undergraduate and postgraduate programmes; • To facilitate the creation of dashboards in Power BI to assist AHEs and Programme Leaders.
Programme Leader / Head of Discipline	• To regularly maintain the Continuous Enhancement Plan for their programme and report any staffing changes to AQS; • To review data made available throughout the academic year, such as that produced by the Strategic Planning, module marks, and degree outcomes data; • To consider feedback from students, external examiners, and key meetings such as Boards of Examiners; • To produce actions to deal with risks identified and update the Continuous Enhancement Plan (CEP) accordingly; • To present the Continuous Enhancement Plan (CEP) at each Board of Studies Meeting; • To liaise with the AHE if a risk against a key performance indicator or external examiner comments is identified.

Secretary of Board of Studies / Board of Studies meeting	• Ensure that Continuous Enhancement Plans (CEPs) for all programmes are included on the agenda for every Board of Studies; • Record Continuous Enhancement Plan (CEP) discussions within the minutes, including follow-up action taken, recommendations, and examples of good practice, as appropriate; • The minutes must reflect the outcome(s) of any discussions.
Chair of Board of Studies / Board of Studies meeting	• To monitor and discuss the Continuous Enhancement Plans (CEPs) and assure that risks have been appropriately monitored and actioned; • To agree recommendations; • To monitor progress of actions identified within the Continuous Enhancement Plans (CEPs); • To ensure discussions of APERs and CEPs are recorded appropriately in the minutes.
Associate Head of School, Education **(This function is covered by the Head of HE for Academic Partner Institutions in UK / TNE, Including Associated and Accredited Institutions (AIs))**	• To produce an APER report for their School annually; • To consider with the Head of School any risks identified and flagged by Programme Leaders, addressing any risks identified; • To disseminate key communications, deadlines, and reminders to their Schools; • To identify themes and issues of School-wide concerns; • To provide regular updates to the Associate Dean, Education on identified risks through the Continuous Enhancement Review process; • To support implementation of actions identified within the Continuous Enhancement Plans (CEPs) and APERs.
Head of School	• To consider with the Associate Head of School, Education any risks identified by Programme Leaders/Heads of Discipline; • To support academic Schools to engage with any actions or recommendations arising from the Continuous Enhancement Review process.
Faculty Education Committee (FEC) **(Joint Academic Management Board for Academic Partner Institutions in UK / TNE)**	• To ensure that APERs are included on the agenda and any discussions are captured within the minutes; • Capture both good practices and areas for enhancement, particularly in common themed areas and ensure that support is appropriately actioned; • To consider all APER reports for approval.
Associate Dean, Education	• To review Continuous Enhancement Plans (CEPs) and APER reports to identify themes and issues of Faculty-wide concern; • To facilitate discussions at the Faculty Education Committee; • To ensure that copies of all relevant APER reports are uploaded to the QAD central SharePoint site, maintained by the Directorate of APQG;

	• To produce an overview report for the Faculty that includes recommendations, identified risks, follow-up actions, and examples of best practice for the attention of the University; • To report on any collaborative activity within the Faculty, including: what activity there is, student numbers, and whether there are any areas of good practice or concerns and how they are being resolved; • Present their Faculty overview report to UEC for approval.
Pro-Vice Chancellor, Education / Pro-Vice-Chancellors, Executive Deans / Chief Student Officer (CSO) / Director of Academic Performance, Quality and Governance	• To support academic Schools to engage with any actions or recommendations arising from the Continuous Enhancement Review process.
University Education Committee (UEC) ***(This function is covered by the Academic Partnerships Subcommittee for Academic Partner Institutions in UK / TNE, Including Associated and Accredited Institutions (AIs))***	• To identify risks and recommend where further action needs to be taken; • To consider and approve proposals for changes to the *Code of practice for continuous enhancement review*, including CEP, APER, Faculty overview reports; • To consider the outcomes of the continuous enhancement review process report, including its appendices (Faculty overview reports) with particular focus on: o serious issues, risks and concerns o follow-up recommendations o any further actions required, where applicable o examples of good practice for dissemination across the University o collaborative activity.
Surrey Institute of Education (SIoE)	• To produce CEPs/APERs for the relevant programmes within SIoE; • To identify and support the implementation of best practice, as agreed with the Head of Academic Policy and Governance and Associate Deans, Education; • To support the development of CEPs within Schools and Faculties as agreed with Directorate of APQG or Associate Deans, Education.

Timescale for the Continuous Enhancement Review (CER) process

35. As noted above, Continuous Enhancement Plans (CEPs) are updated on a regular basis throughout the academic year and discussed at each Board of Studies meeting (in line with the annual schedule for the relevant Boards).

36. An Annual Programme Enhancement Review (APER) report is produced once a year for a group of programmes within a School. A separate report is required for a different level of study, e.g. a foundation year, undergraduate programmes, postgraduate taught programmes.

37. All APERs must be considered and approved by the Faculty Education Committee; they must be approved before the end of the academic year in which the report is being written.

38. Faculty Overview of APER reports must be considered and approved by UEC in November - early December, following the end of the academic year in which the annual Overview report (Faculty APER) is being written.

Further guidance

Evidence-based approach

39. The continuous enhancement review process is action-focused and is based on various sources of evidence. Programme teams must use a range of qualitative and quantitative data to evaluate the success of their programme, including the Power Business Intelligence (Power BI) tool, feedback from external examiners, students, and staff.

40. The continuous enhancement review data, provided by Strategic Planning and the Directorate of Academic Performance, Quality and Governance, is updated throughout the year as new data become available to the University. This facilitates timely consideration within Continuous Enhancement Plans (CEPs). The data includes methods of flagging areas where potential risks have been identified. These should be the primary focus for discussion and planning appropriate actions.

41. In addition, the following evidence should be used for informing the CEP and the APER (the list is not exhaustive):

    i. module outcomes data and outcomes from discussions held during Boards of Examiners;

    ii. external examiners' annual reports on the previous academic year along with Board of Studies/programme team responses to external examiners. In cases where the external examiners' reports have not been received, reference should be made to any comments made by external examiners either in writing or during the Board of Examiners' meeting (as recorded in minutes);

    iii. student feedback on individual modules and programmes, gathered via internal mechanisms, for example, Programme Evaluation Questionnaire (PEQs), Staff/Student Liaison Committee meetings, focus groups, discussions at Board of Studies meetings;

    iv. student feedback gathered via external mechanisms, such as quantitative and qualitative data from National Student Survey (NSS), Postgraduate Taught Experience Survey (PTES), and any other external surveys, as applicable;

    v. staff feedback, gathered via internal surveys and questionnaires, or via School and Faculty meetings, where possible;

    vi. relevant programme specifications (approved via the University standard validation procedure);

    vii. employability outcomes data;

    viii. league table data, in relation to key competitors;

    ix. any other information relevant to the programme(s) for that year, including Professional, Statutory and Regulatory Body (PSRB) accreditation where applicable;

    x. Information on active collaborations.

Structure and format of the School/Institute Annual Programme Enhancement Review (APER) report

42. The APER reporting templates are available for downloading from the QAD SharePoint site and should be used as appropriate.

43. The APER report should include a list of any programme(s) reviewed. The programme title(s) should be unabbreviated and make it clear how the Foundation pathways and provision are included. The main sections of the APER report include the following areas:

    - Overview of actions taken during the previous year (as recorded in the Continuous Enhancement Plan);
    - Brief commentary on evidence and data trends including risks identified;
    - Summary of actions to be taken forward over the next year;
    - Identification of good practice;
    - Areas for consideration at School, Faculty, or University levels related to learning and teaching;
    - Collaborative activity – what activity there is, student numbers, and if there are any areas of good practice/concern and how this is being resolved.

Faculty overview of Annual Programme Enhancement Review (APER) reports

44. Faculty overview reports should be prepared using the standard template, which is available to download from the QAD SharePoint site. The report template includes the following sections:

    - Overview of actions taken within the Faculty during the academic year;
    - Summary of themes from the APERs within the Faculty;
    - Commentary on evidence and data trends including risks identified, including identification of ongoing risks e.g. concerning progression, awards, and feedback;
    - Summary of key quality enhancement activities/practice in the Faculty;
    - Identification of good practice;
    - Areas for consideration at University level in relation to learning and teaching;
    - Overview of Academic Partnership/Collaborative Provision within the Faculty during the academic year
    - Appendix: Faculty-level action plan to support overall education strategy and/or general areas of need (actions and good practice log in Excel).

45. A summary of strategic learning and teaching issues and risks for the University's attention may include significant issues regarding the learning facilities such as Library and IT resources, central teaching spaces, laboratory spaces, or timetabling.

46. A list of current programmes and associated individual Schools' Continuous Enhancement Review (CER) reports should be included in the Faculty overview (as an appendix).

Outcomes of the continuous enhancement review process

Identifying and disseminating best practice

47. One of the important outcomes of the continuous enhancement review process is identification and dissemination of best practice. Therefore, programme teams should also focus on evaluating and highlighting areas of good practice in all areas related to the provision of student learning opportunities.

Follow-up actions

48. The Continuous Enhancement Plans (CEP) should include any actions discussed and approved during the Board of Studies meeting and the timeframe within which these actions should be completed. The actions taken because of the continuous enhancement review process should be considered throughout the year, with the CEP updated regarding progress ahead of each Board of Studies meeting.

Feedback on the continuous enhancement review process

49. The outcomes of the continuous enhancement review must be fed back to members of staff, students, and all those involved in the process. The Faculty overviews are considered by the University Education Committee and, following this consideration at institutional level, the Associate Deans, Education (ADEs) should report on the outcomes to students and members of staff either through Faculty Education Committee, Board of Studies or Staff/Student Liaison Committee meetings as an annual standing item.

Publishing the Annual Programme Enhancement Review (APER) reports and Continuous Enhancement Plans (CEPs)

50. Continuous enhancement review (CER) documentation, including CEPs and APER reports, are published on the QAD SharePoint site and available to members of staff to be downloaded at any time (University username and password required).

Academic partnership provision: Continuous Enhancement Plan (CEP) and Annual Programme Enhancement Review report (APER) for Associated/Accredited and Validated/Franchised Institutions

51. The continuous enhancement review process is a risk-based and action-focused process that is supported by various sources of evidence. The University expects all relevant programme teams at Academic Partner Institutions to use a range of qualitative and quantitative data to evaluate the success of their programme, including the student outcomes datahttps://obi.surrey.ac.uk/analytics/, feedback from external examiners, students, and staff.

52. Data analysis includes methods of flagging areas where potential risks have been identified. These perceived/identified risks should be the primary focus for discussion and planning appropriate actions during the Continuous Enhancement Planning (CEP) stage.

53. The Continuous Enhancement Plans (CEP) should include any actions discussed and approved during the Board of Examiners and Board of Studies meetings and the timeframe within which these actions should be completed. The actions taken because of the continuous enhancement review process should be considered throughout the year, with the CEP updated regarding progress ahead of each Board of Studies meeting. In addition, the following evidence should be used for informing the CEP and the APER (the list is not exhaustive):

    i. module outcomes data and outcomes from discussions held during Boards of Examiners;

ii. external examiners' annual reports on the previous academic year along with Board of Studies/programme team responses to external examiners. In cases where the external examiners' reports have not been received, reference should be made to any comments made by external examiners either in writing or during the Board of Examiners' meeting (as recorded in minutes);

iii. where applicable, Link Tutor(s) annual report on the previous academic year along with Board of Studies/programme team responses to the Link Tutor(s);

iv. student feedback gathered via internal mechanisms on individual modules and programmes, and via external mechanisms, such as quantitative and qualitative data (for example, from National Student Survey (NSS), Postgraduate Taught Experience Survey (PTES), and any other external surveys, where applicable);

v. relevant programme specifications (approved via the University standard validation procedure);

vi. employability outcomes data and, where applicable, league table data, etc.;

vii. any other information relevant to the programme(s) for that year, including Professional, Statutory and Regulatory Body (PSRB) accreditation, where applicable;

54. Academic Partner Institutions, delivering Surrey-validated programmes in the UK and abroad (TNE) and offering programmes leading to awards of the University of Surrey, are expected to submit an annual programme enhancement review report to the University by the end of November each year. The report should confirm that the Institution has appropriate procedures in place to ensure high academic standards and enhancement processes, which are subject to continuous evaluation and review. The report should be self-critical, based on facts arising from the operation of programmes leading to awards of the University of Surrey, and have been subject to an approval process within the Institution. The report should be approved and signed by the Principal, their nominee (a member of senior management team) and, where relevant, the Joint Academic Management Board/Committee.

55. The Academic Partner Institutions' Annual Programme Enhancement Review Reports should include the following attachments:

- A list of Surrey-validated programmes;
- Educational Oversight: a process analysis (where applicable).

56. The Academic Partner Institutions' Annual Reports should be prepared using the standard template. This will be available on the University website and on request from the Directorate of Academic Performance, Quality and Governance, University of Surrey. The report includes the following sections:

i. institutional academic governance structure for Surrey-validated programmes or programmes leading to the University award/credit: includes organogram(s) of quality assurance committees and key personnel to provide an overview of the Institution's quality assurance framework with, if appropriate, a commentary on significant changes;

ii. a review of progress regarding the previous year's action plan, devised to address issues arising from the previous year's annual review report to the University from reports, reports from external examiners, and reports from external accrediting bodies;

iii. academic provision: include a list of newly validated programmes and existing provision with their next periodic review date;

iv. analysis of data against the Office for Students' conditions of registration B3 (Student Outcomes) and B4 (Assessment and awards). Please also include a summary of comments and recommendations from external examiners' reports. A detailed set of statistical information for the relevant year should be attached to the report in a table format.;

v. student satisfaction and feedback, including NSS score results (where applicable), and any other quantitative and qualitative data related to student satisfaction and student engagement;

vi. active student placement arrangements linked to validated Surrey programmes;

vii. a brief summary of the number and outcome of cases presented through the appeals, complaints, and grievance procedure of the Associated Institution;

viii. a summary of issues arising from quality assurance and enhancement processes, in the form of an action plan, to be addressed by the institution and/or at programme(s) level or for the attention of the University;

ix. a list of newly validated programmes and existing provision with their next periodic review date;

x. educational Oversight procedures.

57. An electronic copy of the Academic Partner Institutions' Annual Report with appendices should be submitted to the Directorate of Academic Performance, Quality and Governance, University of Surrey (regulations@surrey.ac.uk) by no later than 30th November each year.

Part B: Academic Enhancement Support

58. Academic Enhancement Support is currently available only to the University of Surrey's own programmes delivered in Guildford, UK. To assure high-quality academic standards and enhance the academic offer at its partner institutions, the University of Surrey continues to maintain the CER and Periodic Enhancement review processes. All academic partners are also strongly encouraged to have their own academic enhancement support processes, as part of the overall academic provision enhancement.

59. The Academic Enhancement Support is a support mechanism for those academic programmes/disciplines which were identified as having “emerging” or “mixed” student outcomes risks against the University KPIs/external benchmarks. Surrey Institute of Education (SIoE) and the Directorate of Academic Performance, Quality and Governance (DAPQG) provide the support centrally throughout the academic year. It is a participatory process with strong team ownership, supported by the School, the Faculty, and the University.

60. The reasons for inclusion in the process are usually, but not confined to, flagging of short-term or long-term performance against either internal or external experience and outcome metrics which impact upon OfS’ B3 conditions of registration, TEF, APP, and PSRB accreditations.

61. SIoE and Strategic Planning and Performance teams’ role is to facilitate the process, focusing on enhancement while exploring the programme’s contextual situation and surrounding data. This collaborative approach enables the production of recommendations and the follow-up actions that are decided and owned by programme teams, with central support as requested. It consists of:

    - Facilitated review meeting with an enhancement partner.
    - Use of the structured self-assessment tools
    - Understanding the story behind the scores
    - Root cause exploration (curriculum, assessment, workload, communication, engagement).
    - Alignment of perception vs intention; communication and expectation management
    - Co-developed action plan with clear owners, timescales and success indicators
    - Follow-up checkpoints (e.g. 3 and 9 months).

Data and Feedback Review

62. By the end of September, following the release of key data sets, the Pro-Vice-Chancellor Education (PVCE), the Director of Academic Performance, Quality and Governance (APQG) and the Head of SIoE (or representatives) will undertake a detailed review of data pertaining to the whole taught curriculum, including subjects and programmes. A holistic review of these flagged risk areas is then used to identify key subjects and programme clusters that may warrant enhancement support.

63. Following the data analysis exercise, the PVC, Education will discuss and agree the proposed flagged areas with the PVC Executive Deans of Faculties and Associate Deans Education (ADEs).

Initial Programme Team Meeting

64. In September-early October, the Director of Academic Performance, Quality and Governance and the Director of the SIoE (or their representatives) will meet with key members of the programme team for an initial meeting, including:

    - ADE

- Head of School
- AHE
- Programme Director(s)
- Other key programme team members (e.g., Senior Personal Tutors, Year Leads, Exams Officer, etc.)

65. Before the first meeting, the teams are requested to use the structured self-assessment tool.

66. The first meeting itself will take the form of an introductory conversation; the process is designed to be supportive and focused on enhancement. For that reason, it is important to give the programme team the chance to raise their concerns and provide relevant context to understand the story behind the scores and explore root causes (curriculum, assessment, workload, communication, engagement).

67. The discussion will include (the list is not exhaustive):

- The data review
- The context surrounding key issues
- Actions taken in previous NSS cycles, reflecting on what worked and what was unsuccessful
- Alignment of perception vs intention; communication and expectation management
- Co-developed action plan with clear owners, timescales and success indicators:
  - Potential immediate and longer-term actions
  - Plans for review of documentation samples (assessment briefs and feedback)
- Milestones and timescales (see Appendix 3)

68. Agreed actions that emanate from this conversation will form the basis of the Enhancement Support Action Plan.

Student Engagement

69. In September-October, it is recommended that programme leaders share with students the immediate actions they are taking to respond to identified risks (student feedback, student outcomes/EE reports/PSRBs, as appropriate) during Welcome and Returners Week's talks.

70. Each subject /programme team, selected for the Enhancement Support process, should ensure ongoing consultation with students. This could take the form of a questionnaire supported by SIoE, mid-module reviews, or, where there is sufficient student buy-in, focus groups on specific elements of interest.

Enhancement Support Action Plan

71. Facilitators' consultations with students, any other activities undertaken during the year and any associated actions are indicative only. Subject/programme teams own the actions and are responsible for implementing them during the year, under the leadership of the ADE, AHE, and Programme Leader.

72. All agreed planned actions will be located within the standard Continuous Enhancement Plan (CEP) for the subject/ programme(s), with clear identification that they are part of this process. The report will include a link to the CEP. The actions can then be tracked as part of this process and in the standard fashion for all CEPs at the Board of Studies, etc.

Support / Review

73. Any areas of support identified in the initial meeting should be coordinated by the ADE and AHE. SIoE should facilitate the areas of support and/or provide guidance appropriately.

Progress Review

74. It is expected that the key progress reviews with CEP's actions will be discussed at the Board of Studies as follows:

Mid-Year review

- At the end of Semester 1, in January/February, the ADE of the faculty will meet with the AHE and any key members of the team to discuss progress to date, any additional actions that might be needed, and any additional support, etc. Progress should be noted in the standard CEP.

End-of-year review

- To close the feedback loop, a final meeting with the programme leader and/or team would normally take place in May to review the process and finalise the actions.

Roles and responsibilities

75. The University defines roles and responsibilities of various members of staff, organisational bodies, and committees involved in initiating and managing the Enhancement Support process, as described in Table 2 below:

Table 2: Enhancement Support process: a summary of roles and responsibilities:

Role	Responsibilities
Strategic Planning / Director of Academic Performance, Quality and Governance (APQG)/ Head of SIoE	• To provide a core dataset to inform the Enhancement Support review for Surrey's undergraduate and postgraduate taught programmes; • To facilitate the process, focusing on enhancement while exploring the programme's contextual situation and surrounding data
Pro-Vice Chancellor, Education	• To undertake a detailed review of data pertaining to the whole taught curriculum, including subjects and programmes; • To discuss the proposed flagged areas with the PVC Executive Deans of Faculties and Associate Deans Education (ADEs) • To encourage and support Faculties/Schools' engagement with actions and recommendations arising from the process.
Pro-Vice-Chancellors, Executive Deans	To discuss and agree the proposed flagged areas with the PVC, Education and Associate Deans Education (ADEs)
Associate Dean, Education (ADE)	• To review the proposed flagged areas, as agreed with the PVC, Education and to identify themes and issues of Faculty-wide concern; • To facilitate discussions at the Faculty Education Committee; • To ensure that all relevant CEP status reports (from flagged areas) are maintained and reviewed regularly;

	• To facilitate Mid-Year and End-of-Year reviews together with the AHE and any key members of the programme team. At the Mid-Year review, to discuss progress to date, any additional actions that might be needed, and any additional support, etc. In May, to meet with the programme leader and/or team to review the process and finalise the actions;
Associate Head of School, Education (AHE)	• To work closely with the ADE and the Head of School on the identified risks, follow-up actions and recommendations; • To support implementation of agreed actions within the Continuous Enhancement Plans (CEPs). • To disseminate key communications, deadlines, and reminders to their Schools; • To identify themes and issues of School-wide concerns; • To provide regular updates to the Associate Dean, Education on identified risks through the Continuous Enhancement Plan updates process.
Head of School	• To consider with the Associate Head of School, Education any risks identified by Programme Leaders/Heads of Discipline addressing any risks identified; • To support academic Schools to engage with any actions or recommendations arising from the Enhancement Support process.
Programme Leader / Head of Discipline	• To produce actions to deal with flagged risks and monitor their implementation progress (with central support, where requested); • To review potential for additional actions and/or support (where needed); • To run consultations with students: ○ During Welcome/ Returners Week to share with students the immediate actions in response to identified risks (student feedback, student outcomes/EE reports/PSRBs, as appropriate) ○ • To regularly maintain the Continuous Enhancement Plan for their programme/discipline area and record any progress status on the agreed actions, with a particular focus on the Enhancement Support plan of actions; • To review data made available throughout the academic year, such as that produced by the Strategic Planning, module marks, and degree outcomes data; • To consider feedback from students, external examiners, and key meetings such as Boards of Examiners; • To present the Continuous Enhancement Plan (CEP) with clear identification of the flagged risk areas at each Board of Studies Meeting.
Surrey Institute of Education (SIoE)	• To identify and support the implementation of best practice, as agreed with the Head of Academic Policy and Governance and Associate Deans, Education; • To provide CPD activities for staff as relevant.

Part C. Periodic Review

Purpose and principles

76. The principal aims of the periodic review process are to:

- Focus resources and scrutiny to areas of high risk to academic standards, student experience and outcomes;
- Integrate the programme review cycle more clearly within the enhancement, monitoring, modification and institutional planning processes, described in Parts A and B of this *Code of practice*.
- Maintain clear oversight and quality assurance mechanisms for Senate, Council, the Office for Students (OfS) and Professional Statutory and Regulatory Bodies (PSRBs) to ensure that the University of Surrey's academic provision remains current, credible and sustainable.

77. The periodic review process is underpinned by the following principles:

i. **Proportionality** – intensity and frequency of review is aligned to risk indicators and material change.

ii. **Continuous enhancement** – annual monitoring, data review and action planning remain the primary enhancement mechanisms (see Parts A & B of this Code pf practice), and the risk-based periodic review process is reserved for discipline areas/programmes requiring deeper scrutiny or areas of known high risk.

iii. **Coherence** – the model aligns with curriculum design initiatives, validation, modification, PSRB review and partner oversight.

iv. **Transparency** – criteria, triggers, timelines and outcomes are clearly defined and communicated.

Scope

78. The risk-based periodic review applies to:

- All taught undergraduate and postgraduate programmes leading to a University of Surrey award, including those delivered with partners or at a distance.
- Academic partners/Associated Institutions where Surrey retains awarding responsibilities (for its award and credit).

79. Periodic review will normally be undertaken for a coherent subject group of programmes to ensure comparability and efficiency, taking into account PSRB drivers, but risk may be assessed at the individual programme level.

Risk-based triggers for periodic review

80. Transnational education (TNE) and UK academic partnership provision is always subject to periodic review, regardless of the identified risks.

81. A programme/ a group of cognate programmes/ subject area will normally be considered for periodic review where any of the following factors persist for at least **two consecutive academic years:**

- Sustained poor recruitment and/or market viability[2]:

[2] This is where a subject, programme cluster, or programme is to be kept as part of Surrey's curriculum offer – the alternative is programme suspension or withdrawal, which is covered in the *Code of practice for programme lifecycle processes*.

  - Under-recruitment against approved viable threshold (may differ for different subjects and resource requirements), repeated suspension of recruitment (see Code of practice for programme lifecycle – section on suspension of programmes), or material adverse financial performance;
  - Number projected to decline, or continued significant decline (over an agreed timeframe, e.g., 4/5 years).
- Student experience concerns:
  - Adverse trends or performance below agreed institutional/subject thresholds in:
  - Internal evaluation questionnaires or other student voice mechanisms;
  - National Student Survey (NSS) or Postgraduate Taught Experience Survey (PTES);
  - Evidence of systemic issues from complaints, appeals or external examiner reports.
- Student outcomes concerns:
  - Progression, completion or award rates, including percentage of good degrees, below benchmark expectations, internal lead indicator KPIs, or OfS condition of registration B3 thresholds;
  - Graduate outcomes (e.g. highly skilled employment, further study) significantly below benchmarks or OfS B3 thresholds or internal lead indicator thresholds;
  - Differential attainment or outcomes concerns (e.g. unexplained persistent awarding gaps).
- External risk indicators:
  - Adverse PSRB reports, conditions, loss of accreditation or significant recommendations;
  - Regulatory requirements (OfS reportable events, CMA/consumer law issues);
  - Issues raised in internal audit or external review.

82. Periodic review is also required where**:**
    - Significant change has occurred since validation or last major review, including:
      - Major restructuring of the programme or award portfolio;
      - Substantial change in delivery model (e.g. campus move, extensive online/blended redesign, changes in placement model);
      - Relocation of responsibility between Schools/Faculties or partner sites.
    - A programme is designated by the Vice-Chancellor, PVC, Education, PVC, Faculty Executive Dean, Head of School, or by the University Education Committee as requiring review, for example, on strategic or reputational grounds and competitor landscape.

Governance

83. Senate, through UEC, is responsible for oversight of the risk-based periodic review. Integration with the Continuous Enhancement Review and Enhancement Support (Parts A & B of this *Code of practice*) ensures a comprehensive approach to monitoring academic provision performance and enhancement and identifies risks/concerns that may trigger periodic review more efficiently.

84. Academic Quality Services, Directorate of AQPG are responsible for the scheduling and running periodic review events and for record keeping.

Frequency

85. The following timescales apply to frequency of review:

- High-risk programmes and all TNE/partnership provision: normally at least once every five years, or more frequently where required by PSRB/regulatory obligations or contractual agreement (commonly after first two years of a new partnership).
- Other programmes: reviewed selectively, based on the cumulative risk profile, clustering with other provisions where appropriate as noted above in 'Triggers'.

Overview

86. Periodic review is the process by which the University assures itself that existing provisions and practices within all subjects and programme groupings continue to be relevant, current, and meet their stated aims and objectives. The periodic enhancement process operates at the subject-level/programme grouping level, and all taught programmes within a subject or grouping are expected to go through the process at the same time. Postgraduate research programmes with taught elements are considered as part of the periodic enhancement process, and both the postgraduate taught provision and research provision with taught elements should be completed at the same time as the rest of the subject. However, at Surrey campuses, it is possible to only review undergraduate or postgraduate separately, dependent upon risk profile

87. When reviewing programmes, teams are expected to ensure that their programmes will continue to meet internal and external reference points. These include (the list is not exhaustive):

- University strategy (and supporting strategies);
- University *Regulations*;
- Relevant *Codes of practice*;
- Framework for Higher Education Qualifications in England, Wales and Northern Ireland (FHEQ);
- Relevant subject benchmark statements;
- Relevant PSRB requirements.

88. The periodic enhancement process is made up of three substages: initial checks, the periodic enhancement event, and post-event activity (see Table 5 below for the process timescales).

89. When a programme is accredited by a Professional, Statutory, or Regulatory Body (PSRB), the PSRB guidance in the COP for programme lifecycle should be referred to and complied with.

Initial checks

90. The initial checks exercise is designed to assess compliance to ensure that the provision under review is in line with the University's *Regulations*, *Codes of practice*, and policies in addition to any external requirements. Academic Quality Services leads the initial checks process, which normally takes place early in semester one of an academic year.

91. All forms and guidance for the initial checks substage of the periodic enhancement can be downloaded from the Academic Quality Services webpages, or can be sourced from QCM by Academic Quality Services, where applicable. The applicable forms will need to be completed and submitted to Academic Quality Services to be reviewed ahead of the periodic enhancement event:

- Programme specification template (sourced from QCM).
- Approved and proposed modifications from the past two academic years (sourced from QCM).
- Most recent Professional, Statutory or Regulatory Body (PSRB) report – if applicable.
- Self-evaluation narrative template (completed by the subject /programme cluster lead).
- External assessor nomination form (completed by the subject /programme cluster lead).
- Equality Impact Assessment – located on the Equality, Diversity and Inclusion page under Toolkits, Training and Resources on Surreynet (please refer to the Code of practice for inclusive education and Eduhub[3] for further guidance).

92. The initial checks process will concentrate on the following areas:

- Programme structures and curriculum
- Assessment and feedback
- Quality assurance
- PSRB accreditation – any exemptions to the regulations that have not been approved will need to be submitted to the Regulations sub-committee (RSC), then to the University Education Committee (UEC) and Senate for approval.

93. Further information can be found within the compliance checks report template, which is completed by Academic Quality Services.

94. The initial checks process requires approval from the Academic Quality Services representative for the process to be signed off as complete. There are three possible outcomes of the initial checks exercise:

- Compliant – the programme(s) can continue to the periodic enhancement event stage.
- Compliant with conditions/corrections – the programme team must complete any conditions/corrections and have them approved by Academic Quality Services before the programme(s) can progress to the periodic enhancement event stage.
- Non-compliant – it is expected that this would only be the case in exceptional circumstances. The relevant Associate Dean, Education would be informed to consider an appropriate course of action for existing provision.

Periodic enhancement event

95. The periodic enhancement event is designed to provide a forum to consider the provision under review in a peer-led discussion focusing on innovation and plans for the future to include:

- Strategic aims and objectives of the subject area/ School
- Performance and viability
- Learning and teaching
- Assessment and feedback
- Student experience

96. A periodic enhancement event will take place over one day, which could be in person or held virtually. The panel will be appointed by Academic Quality Services and consist of:

[3] Inclusivity resources on EduHub: https://surreyac.sharepoint.com/sites/EduHub/SitePages/Inclusivity.aspx

- A Chair
- An internal member
- An external member(s) (academic expert from similar Higher Education Institution (HEI) and in addition an industry expert where relevant)
- A student member
- The event co-ordinator (from Academic Quality Services).

97. For further information on areas the periodic enhancement event will focus on, the self-evaluation document template can be referred to.

98. The outcome of the periodic enhancement event can include conditions and recommendations. These should be designed to be helpful to the School/ Subject to improve the provision and inform their practice. If conditions are set, they will need to be met before the process can be signed off as complete. All panel members should consider the conditions/recommendations and confirm if these have been satisfactorily met. If there are exceptional circumstances whereby the whole panel are unable to complete this action, then as a minimum the Chair and the external assessor can complete this on behalf of the panel.

99. The implementation of recommendations should be monitored through the continuous enhancement review process.

100. Should the panel have concerns that cannot be addressed satisfactorily through recommendations and conditions, the panel can agree not to re-approve. The panel will provide feedback to inform a resubmission. The panel will indicate a timeline for the reconsideration of the proposals at a second event, with advice from Academic Quality Services.

Post-event activity

101. Periodic Enhancements allow for any amendments to be made through the QCM system, so any updates are automatically published on the public catalogue and relevant marketing pages.

102. A confirmation email containing the finalised report will be sent to the quality systems group, the relevant academic staff from the School, and the panel following the sign off of the periodic enhancement event by the panel. The PAUG tracker is updated at this stage.

103. All relevant documentation will be uploaded to the Quality Assurance Documentation (QAD) SharePoint site.

Table 5: Timescales – periodic review[4]

Process Stages Context	Periodic Enhancement
Initial checks: Undertake initial checks and complete first draft of compliance checks report	8 – 12 weeks (Semester 1)
Academic Quality Services meet with Programme proposer to finalise documentation	
Periodic Enhancement Event: Paperwork sent to the panel for review	6 – 9 weeks (Late semester 1/early semester 2) This should be completed by the end of March ahead of the modification deadline in April

[4] These timeframes are used for guidance purposes and may be subject to change, depending on the risk level, etc.

Academic Quality Services update compliance checklist based on the panels' feedback and circulate documentation to the panel	2 weeks
The event	1 day
Programme Team respond to conditions and recommendations	2 weeks
Panel/Chair confirm that responses to conditions/recommendations have been addressed and where applicable documents updated accordingly	2 weeks
Post event activity: Complete event report/Set up new modules/Complete the confirmation email	2-3 weeks
Complete the process no later than the end of April, before the start of the following academic year. This is to allow sufficient time for the programme(s) changes to be completed and for awareness to be raised among prospective students.	

Table 6: Roles and responsibilities – periodic enhancement

Role	Responsibility
Programme team	• Attend a planning meeting with Academic Quality Services to agree dates and discuss the various stages of the periodic enhancement process • Complete the required forms • Be available for meetings with the Academic Quality Services representative during the initial checks process • Attend and present at the periodic enhancement event and answer any questions the panel may have • Keep key stakeholders informed of the progress/outcomes of the process • Complete any conditions/recommendations from the initial checks and periodic enhancement event
Academic Quality Services	• Hold a planning meeting and set dates for the periodic enhancement process • Lead on and complete the initial checks process • Coordinate the periodic enhancement event, including: securing panel members, setting the event date, circulating documentation, etc • Attend the periodic enhancement event and produce a brief summary report of discussions and outcomes • Chase the outcomes of any conditions/recommendations given by the panel • Publish finalised documentation

Chair of the /periodic enhancement event	The Chair is a senior member of University staff who has experience of the periodic enhancement process. The Chair must be from a different School to that of the programme/School under consideration, and normally from a different Faculty (this will be assessed on a case by case basis) *Before the event the Chair is expected to:* • Inform the event coordinator, in advance, if they have any issues or concerns and resolve any queries regarding the proposal or the event before the event date • Work with the event coordinator to discuss the agenda • Read the documentation and prepare discussion points/questions for the private panel meetings, consultation with the programme team and, for a periodic enhancement event, meeting with students *During the event the Chair is expected to:* • Chair the meeting and cover the agreed agenda • Ensure that members of the panel, academic staff and students can contribute to the discussion and further explore themes with the programme team, and students in enhancement events • Within the initial meeting, provide a brief overview of the University's processes and its outcomes, noting which areas need to be covered, using the University's *Codes of practice* as guidance • Ensure that the external assessorunderstands the process • Clarify and enable the role of any PSRB representative(s) • Ensure that the event runs smoothly and to time • Identify and record areas of good practice • In conjunction with the event coordinator, compile any commendations and recommendations identified by the panel and ensure that they are clear and achievable. Conditions are only to be set in exceptional circumstances • Feedback the outcomes to the programme team at the conclusion of the event *After the event the Chair is expected to:* • Approve the brief report compiled by the event coordinator summarising the outcomes and key areas of discussion • If conditions are set, work with the event coordinator to approve their completion • Review the response to any recommendations set by the panel
Internal panel member of the periodic enhancement event	Internal panel members must be from a different School to that of the programme/School under consideration, and normally from a different Faculty (this will be assessed on a case by case basis) and must be a member of staff at the University of Surrey (usually an academic member of staff)

	Before the event the internal panel member is expected to: - Read the documentation and prepare discussion points/questions for the private panel meetings, meeting with the programme team and meeting with students - Highlight any issues to the event coordinator, that need to be dealt with prior to the periodic enhancement event *During the event the internal panel member is expected to:* - Advise the University as to whether the programme(s) threshold standards are comparable with other programmes within the University and the FHEQ - Discuss with the programme team how the learning, teaching and assessment opportunities have been enhanced - Discuss their findings and conclusions with the panel - Help identify any areas of good practice *After the event the internal panel member is expected to:* - Advise on any corrections that need to be made to the event summary report - If necessary, work with the Chair and event coordinator to approve any conditions. Conditions should only be set in exceptional circumstances

External panel member of the periodic enhancement event	One or more external panel member (s) will be appointed from comparable higher education institutions (and where applicable from a PSRB or industry)
	
	Before the event the external assessor is expected to:
	
	- Read the documentation and prepare discussion points/questions for the private panel meetings, meet with the programme team and consult with students. Focus should be given on the below:
	  - Examine the content and the curriculum to determine whether it is appropriate for the subject area and comparable to similar programmes offered at other HEIs
	  - Review the programme and module learning outcomes and consider whether they are: set at the correct level, reflect the content, and clearly demonstrate progression
	  - Review the assessment strategy and the individual assessment methods to ensure that they are appropriate for the subject area and the level
	  - Determine the viability of the programme in light of current trends within the subject area and industry
	  - Provide any suggestions for improvements or examples of good practice which could be adopted
	  - Highlight any issues to the event coordinator, that need to be dealt with prior to the periodic enhancement event

	During the event the external assessor is expected to: - Provide independent subject expertise and/or professional experience - Advise the University whether the threshold standards as expressed in the learning outcomes meet the expectations of the FHEQ, relevant subject benchmarks and, where applicable, PSRB/external body requirements - Advise the University whether the delivery and assessment methods of the learning resources (including, where applicable, in professional practice) support students in achieving and demonstrating the learning outcomes and allow the outcomes to be demonstrated by students *After the event, the external assessor is expected to:* - Advise on any corrections that need to be made to the event summary report - If necessary, work with the Chair and event coordinator to approve any conditions. Conditions should only be set in exceptional circumstances
Student panel member of the periodic enhancement event	The student panel member will be appointed from a pool of trained reviewers (who are nominated by the University of Surrey Students' Union, USSU). These would be from a different school to that of the programme/School under consideration, and normally from a different Faculty (this will be assessed on a case-by-case basis) The student member will normally have experience of being a student representative for a programme or hold a post within the USSU (excluding anyone who has served on a complaint or appeal panel for the programme under review). The principal role of the student reviewer will be to bring to the process the student perspective. The student reviewer may explore any themes (as a non-subject specialist) they wish that impact on the student learning experience Key areas of discussion and consideration for the student reviewer will include, but not be limited to: - The arrangements made for the student voice to be heard – examples can include the student rep system, tutorials, surveys, etc. - Whether issues raised through the student voice have been considered and responded to - Whether student feedback received via the NSS, PTES, Module Evaluation Questionnaires (MEQs) and student representation has been considered and responded to - The information available to students in support of their studies is accurate, complete, and effective - The arrangements for supporting students to progress and achieve, including personal tutoring - The learning opportunities and resources provided to students to achieve the intended learning outcomes

	Before the event the student reviewer is expected to: - Read the documentation and note any areas which may need further investigation during the /periodic enhancement event *During the event the student reviewer is expected to:* - Contribute to the discussions of the private panel meetings - Highlight any areas that were not clear in the documentation, which need further investigation in the meetings with the programme team and students - Ask questions that arise and are pertinent to the discussion during the event *After the event the student reviewer is expected to:* - Advise on any corrections that need to be made to the event summary report - If necessary, work with the Chair and event coordinator to approve any conditions. Conditions should only be set in exceptional circumstances
Event coordinator of the periodic review	*Before the event the event coordinator is expected to:* • Read the documentation and prepare discussion points/questions for the private panel meetings, consultation with the programme team and, for an enhancement event, meeting with students *During the event the event coordinator is expected to:* • Provide information and advice on the University's *Regulations* and the relevant *Codes of practice* • Keep a formal record of the event's key discussions and outcomes • Contribute to discussions where applicable • Assist in the formulation of the outcomes *After the event the event coordinator is expected to:* • Write a brief summary report of key discussions and outcomes from the event • Circulate the final report to the panel and programme team • If conditions are set, work with the Chair and, if applicable, the panel to approve the conditions. Conditions should only be set in exceptional circumstances • Review the response to any recommendations set by the panel • Circulate to the panel to confirm that a satisfactory response to the conditions/recommendations has been provided

Appendix 1: Continuous Enhancement Review Process consideration and review

Data provided by Planning/ PowerBI:

Continuous Enhancement Plans (CEPs)

Programme CER Dashboard

- Statistics on student surveys, incl MEQ/ NSS/PTES, etc
- Continuation data
- Degree outcomes
- Graduate employment
- APP targets and planning

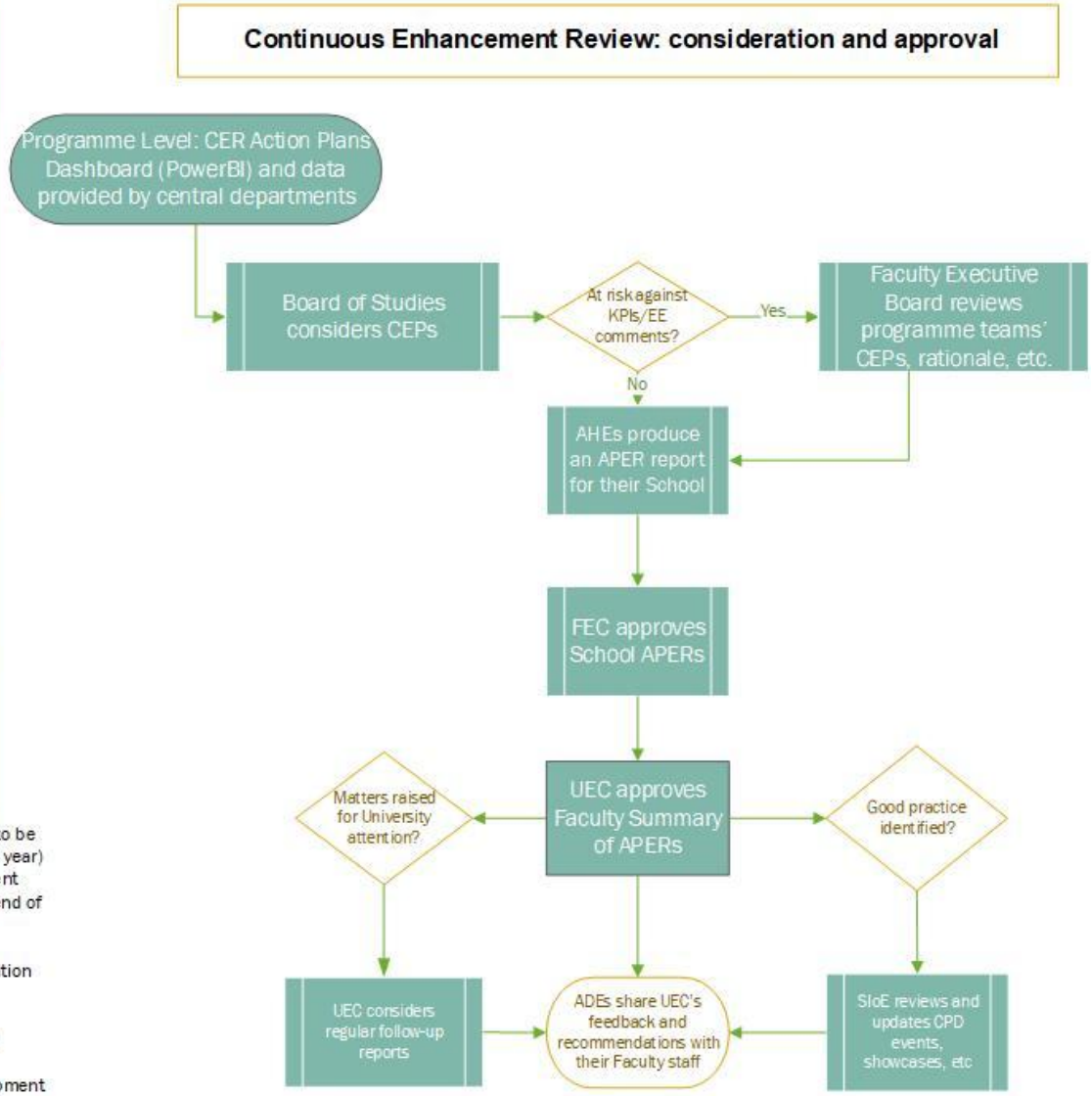
Data provided by central departments, SIoE, etc:

Continuous Enhancement Plans (CEPs)

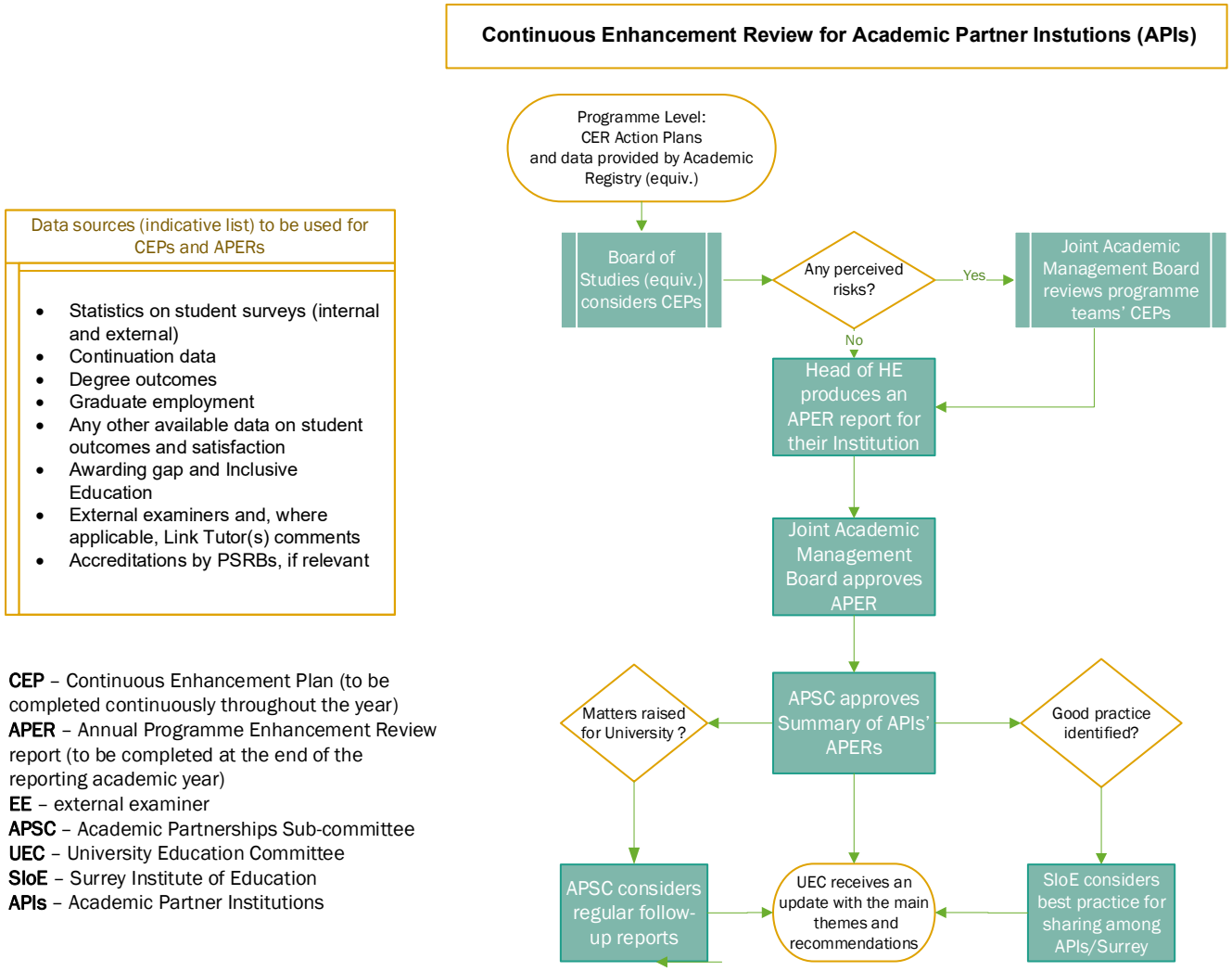
Programme Action Plans

- Awarding gap and Inclusive Education
- External examiners comments
- Student Voice feedback
- Surrey Enhancement programmes where risks were identified
- Academic partnership provision

CEP – Continuous Enhancement Plan (to be completed continuously throughout the year)
APER – Annual Programme Enhancement Review report (to be completed at the end of the reporting academic year)
ADE – Associate Dean, Education
AHE – Associate Head of School, Education
EE – external examiner
FEC – Faculty Education Committee
UEC – University Education Committee
SIoE – Surrey Institute of Education
CPD – Continuous Professional Development



Appendix 2: Academic Partner Institutions' Continuous Enhancement Review consideration and approval



CEP – Continuous Enhancement Plan (to be completed continuously throughout the year)
APER – Annual Programme Enhancement Review report (to be completed at the end of the reporting academic year)
EE – external examiner
APSC – Academic Partnerships Sub-committee
UEC – University Education Committee
SIoE – Surrey Institute of Education
APIs – Academic Partner Institutions

Appendix 3: Annual Cycle, Governance, and Implementation

Annual Cycle (When)

- **July–September**
  - Central teams prepare data packs (NSS, continuation, GO, internal metrics).
  - High-level institutional themes identified (e.g. assessment & feedback, belonging).
- **July–October**
  - Programme teams undertake **Level 1 self-reflection** on data release.
  - Risk-based triage allocates programmes to Level 1, 2 or 3 for each strand.
  - School-level enhancement meetings agree priority programmes and themes.
- **August/September**
  - Identify subjects (or programmes/schools) for level 2 and 3 support
- **September –March**
  - Level 2 and 3 support delivered (facilitated workshops, action-planning, curriculum/assessment support, student-partnered projects).
  - Quick wins implemented (0–3 months) and communicated to students (“you said, we did”).
- **April–June**
  - Review of progress against actions and interim indicators (pulse surveys, mid-module feedback, continuation data).
  - Planning of medium- and longer-term structural changes (e.g. curriculum/ periodic review, assessment redesign).
- **Ongoing**
  - CEPs updated as living documents.
  - Enhancement outcomes reported through Board of Study/ Faculty and University Education Committees.

Roles and Responsibilities (Who)

- **Subject/Programme Teams**
  - Lead self-evaluation, student partnership activity and local action planning.
  - Own communication with students about changes and impact.
- **Faculty/School/Department Leadership (ADE/HoSch/AHE/Subject leads)**
  - Prioritise programmes/themes; ensure workload and resource for enhancement.
  - Co-identify areas for level 2 and 3 support. (with Pro VC Exec Deans)
  - Monitor CEPs.
- **SIoE, Central Enhancement & Data Teams (e.g. SIoE, DAPQG, Strategic Planning & Performance)**
  - Provide curated data, interpretation support and facilitation.
  - Offer targeted expertise (pedagogy, assessment, inclusive curriculum, progression support) and academic development as appropriate.
  - Co-identify areas for level 2 and 3 support (with Pro VC Education)
- **Students and Student Representatives**
  - Co-interpret data and co-design solutions.
  - Participate in review meetings and evaluation of impact.
- **University Committees (UEC and sub-groups)**
  - Set institutional priorities and principles.

- Receive regular assurance on progress, risks and impact across the four strands.

What Is Reviewed (Core Data Set)

External data

- NSS (and PTES where relevant) by theme, question, demographic and level.
- Continuation, completion and graduate outcomes metrics (including TEF/OfS B3 indicators).
- Good degree and awarding gap data.
- APP metrics and any external league table indicators used by the University.
- PSRB reports

Internal data

- Progression and withdrawal rates by level and cohort.
- Module pass rates and average marks.
- Internal good degree data (by programme and demographic).
- MEQs and other module/programme evaluation data.
- SSLC minutes, informal feedback, complaints/appeals themes.
- External examiner reports.

Data are presented as **integrated dashboards/snapshots** for each subject/programme, with:

- Traffic-light risk flags and trend arrows.
- Short narrative commentary to support interpretation.
- Prompts drawn from the NSS self-assessment template.