



UNIVERSITY
OF LONDON

Schedule

Quality Assurance Schedule

University of London





Valid from: 2023-24 onwards

The University of London Worldwide (UoLW) is a Central Academic Body of the University of London, which, in collaboration with the federation members of the University, offers a suite of distance and flexible learning programmes leading to a University of London award. The terms and conditions of the partnership between the UoLW and the federation members are set out in Collaboration Agreements that detail the division of responsibilities between the respective parties. The Quality Assurance Schedule forms part of the Collaboration Agreement. It captures agreed policy, process, and operational responsibilities between the UoLW and federation members, all of which help to assure the provision and ensure compliance with the Office for Students' (OfS') ongoing conditions of registration, particularly those relating to quality and standards: Conditions B1 – B5¹.

In addition, the following frameworks inform the policies and responsibilities:

- United Kingdom Quality Code for Higher Education
- Competition and Markets Authority (CMA) guidance on consumer protection law

Quality Assurance Schedules are maintained by the Quality Team and are updated annually in consultation with federation members.

For any queries please contact qualityteam@london.ac.uk

Common acronyms

AB	Academic Board
APR	Annual Programme Report
AQAC	Academic Quality Assurance Committee
OED	Online Education Directorate, UoLW
SLT	Senior Leadership Team, UoLW
SVG	Student Voice Group
TCC	Teaching Centre Committee

This Quality Assurance Schedule covers all programmes that are not offered in collaboration with a federation member:

- ❖ International Foundation Programme
- ❖ Bachelor of Divinity
- ❖ PGCert Learning and Teaching in Higher Education
- ❖ PGCert in International Sports Management
- ❖ Gender Identity Healthcare suite
- ❖ MA Global Diplomacy (UoL led Regions Pathways)

Programme specific variations are highlighted within each relevant section, as necessary.

¹ (B1: Academic Experience, B2: Resources, support and student engagement, B3: Student outcomes, B4: Assessment and awards, and B5: Sector-recognised standards).

1. PROGRAMME LIFECYCLE			
	PROCESS or FUNCTION	RESPONSIBILITIES	GOVERNANCE
		UNIVERSITY OF LONDON	UNIVERSITY OF LONDON
1.1	Academic Management and Leadership		
	Appointment of Programme Director	Yes [For Gender Identity Healthcare suite: Programme Co-Director (Educationalist) seconded from the Royal College of Physicians (RCP) to UoL]	
	Appointment of Module Leader/Tutor ²	Yes [For Gender Identity Healthcare suite: Module Leaders/Tutors are nominated and appointed by RCP]	
1.2	Academic Programme Approval	Key document: Academic Programme Approval Process	
a.	<i>Approval of new programmes/awards</i>		
	New programmes, including the re-packaging of existing provision under a new award title	Programme Director Reference to Programme Approval Process Reference to Form A1: Agreement Pro-forma Major changes may include consultation/involvement of OED	Considered by PB Approved by AQAC (including sub-committees as appropriate) Reported to AB
	A new named award within an existing programme (e.g. pathways, exit awards)	Reference to Programme Approval Process Reference to Form A1: Agreement Pro-forma Major changes may include consultation/involvement of OED	Considered by PB Approved by AQAC (including sub-committees as appropriate) Reported to AB
b.	<i>Revision to programmes/awards</i>		
	Changes to the structure of a programme, which have the potential to impact on the programme's aims, level, learning outcomes or award title.	Reference to Form A1: Agreement Pro-forma Major changes may include consultation/involvement of OED	Considered by PB Reported to AQAC through APR
	Removal and/or addition of core (compulsory) Module	Reported through Programme Annual Monitoring	Approved by PB Reported to AQAC through APR

² Where Module Leaders are also appointed as examiners, this will be confirmed via a separate UoL contract (see section 2.3)

1. PROGRAMME LIFECYCLE			
	PROCESS or FUNCTION	RESPONSIBILITIES	GOVERNANCE
	Changes to pre-requisite modules or co-requisite modules	Reported through Programme Annual Monitoring	Approved by PB <i>[For Gender Identity Healthcare suite: Considered by PB and approved by RCP]</i> Reported to AQAC through APR
	Changes to the overall assessment strategy or scheme of award	Programme Director Reference to assessment policy Coordinated by Academic Services Manager Reported through Programme Annual Monitoring	Considered by PB Approved by AQAC
	Significant change to the mode of delivery of a programme (e.g. blended learning, block mode, face to face elements)	Programme Director Coordinated by Academic Services Manager and OED Reported through Programme Annual Monitoring	Approved by PB <i>[For Gender Identity Healthcare suite: Considered by PB and approved by RCP]</i> Signed off by AQAC with sub-committees as appropriate Reported to AB
	Change to progression	Programme Director Coordinated by Academic Services Manager and OED Reported through Programme Annual Monitoring	<i>[For Gender Identity Healthcare suite: Approved by RCP]</i> Reported to AQAC through APR
c.	<i>Modular changes</i>		
	Introduction of new option/elective module	Programme Director Coordinated by Academic Services Manager, with involvement from OED Reported through Programme Annual Monitoring	Approved by PB <i>[For Gender Identity Healthcare suite: Approved by RCP]</i> Reported to AQAC through APR
	Withdrawal of module	Programme Director Coordinated by Academic Services Manager, with involvement from OED Reported through Programme Annual Monitoring	Approved by PB <i>[For Gender Identity Healthcare suite: Considered by PB and approved by RCP]</i> Reported to AQAC through APR

1. PROGRAMME LIFECYCLE			
	PROCESS or FUNCTION	RESPONSIBILITIES	GOVERNANCE
	Change to a module title	Programme Director Coordinated by Academic Services Manager, with involvement from OED Reported through Programme Annual Monitoring	Approved by PB <i>[For Gender Identity Healthcare suite: Considered by PB and approved by RCP]</i> Reported to AQAC through APR
	Change to a module's learning outcomes	Programme Director Coordinated by Academic Services Manager, with involvement from OED Reported through Programme Annual Monitoring	Approved by PB <i>[For Gender Identity Healthcare suite: Considered by PB and approved by RCP]</i> Reported to AQAC through APR
	Change to credit value or level of a module	Programme Director Coordinated by Academic Services Manager, Quality Manager and OED (if required) External input may be required. This may be the External Examiner or Chair of Exam Board Reported through Programme Annual Monitoring	Approved by PB <i>[For Gender Identity Healthcare suite: Considered by PB and approved by RCP]</i> Reported to AQAC through APR
	Changes to the assessment of a module	Programme Director in consultation with External Examiner (and Chair of Board of Examiners if deemed appropriate) Coordinated by Academic Services Manager Reported through Programme Annual Monitoring	Approved by PB <i>[For Gender Identity Healthcare suite: Considered by PB and approved by RCP]</i> Reported to AQAC through APR
1.3	Approval of learning materials		
	Appointment of authors of learning materials	Programme Director Appointment/contract	
	Appointment of External Assessors of learning materials	Programme Director Appointment/contract	
	Consideration and follow-up of External Assessors' comments on draft learning materials	Programme Director Reported through Programme Annual Monitoring	Considered by PB

1. PROGRAMME LIFECYCLE			
	PROCESS or FUNCTION	RESPONSIBILITIES	GOVERNANCE
1.4	Annual Approval of Programme Specification	Academic Services Manager Programme Director	Approved by PB <i>[For Gender Identity Healthcare suite: Approved by RCP]</i>
1.5	General Regulations	Coordinated by the Academic Services Management Team	Signed off by AB annually
1.6	Programme Regulations	Academic Services Manager Programme Director	Approved by PB <i>[For Gender Identity Healthcare suite: Approved by RCP]</i>
1.7	Suspension of Programme Regulations	Reference Suspension of Regulations Policy Coordinated by Academic Services Manager Programme Director	Approved by PB <i>[For Gender Identity Healthcare suite: Considered by PB and approved by RCP]</i>
1.8	Suspension of General Regulations	Reference Suspension of Regulations Policy Coordinated by Academic Services Manager	Signed off by AB
1.9	Discontinuation of awards and programmes	Reference Closure Policy Coordinated by Academic Services Manager Reported through Programme Annual Monitoring Programme Director	SLTEG Approved by PB <i>[For Gender Identity Healthcare suite: Approved by RCP]</i> Reported to AQAC and AB
1.10	Review and revision of learning materials	Coordinated by OED along with Publications or Learning Solutions team Oversight by Programme Director	Reported to AQAC through APR

2. ASSESSMENT			
	PROCESS or FUNCTION	RESPONSIBILITIES	GOVERNANCE
2.1	Guidelines for Examinations	<i>Key document: Guidelines for Examinations</i>	
2.2	Nominations (for the categories below) <ul style="list-style-type: none"> Chairs of Boards of Examiners External and Intercollegiate Examiners Chief Examiners Examiners Associate Examiners Assessors Assistant Examiners 	Programme Director Coordinated by Academic Contractors Team in liaison with Quality Team	Approved by PB
2.3	Appointments		
	Appointment of Nominations (see 2.2 above)	Coordinated by Academic Contractors Team	
	Appointment of overseas examiners for non-UK oral examinations	Coordinated by Academic Contractors Team	
2.4	Register of Interests for Examiners	Coordinated by Academic Contractors Team	Sign-off by Chief Executive, UoLW
2.5	Setting of assessment tasks, including examination question papers	Reference Guidelines for Examinations Board of Examiners Examiners External Examiner	
2.6	Approval of marking schemes	Reference Guidelines for Examinations Chair of Board/Chief Examiner in liaison with External Examiners Reference Guidelines for Examinations	Proposed changes to marking schemes considered by PB <i>[For Gender Identity Healthcare suite: Oversight by RCP]</i>
2.7	Marking and confirmation of results	Boards of Examiners Reference Guidelines for Examinations	Boards of Examiners Reference Guidelines for Examinations and Terms of Reference Sign-off from External Examiner(s)
	Terms of Reference for Boards of Examiners	Coordinated by Student Registry Services Directorate	Approved by PB
	Boards of Examiners Meetings	Boards of Examiners	Reported to PB
2.8	Award of degrees, diplomas and certificates	Boards of Examiners Pass Lists prepared by the Student Registry Services Directorate	Sign-off from Board of Examiners Sign-off from External Examiner(s) Vice-Chancellor to sign off the Pass Lists

2. ASSESSMENT			
	PROCESS or FUNCTION	RESPONSIBILITIES	GOVERNANCE
2.9	Assessment Offences	Referred by Programme team Coordinated by the Student Affairs Team	Policy and Regulations approved by AQAC Annual outcome report to AQAC Programme level reporting through Programme Annual Monitoring
2.10	Consideration and follow-up of External and Intercollegiate Examiners' reports	Programme Director Coordinated by Quality Team	Reported to PB through APR Annual summary report considered by AQAC

3. STUDENT LIFECYCLE/EXPERIENCE			
	PROCESS or FUNCTION	RESPONSIBILITIES	GOVERNANCE
3.1	Setting General Entrance Requirements	GERs approved by the External System Academic Board, 2006 Requirements administered by Student Admissions	
3.2	Setting Programme Entrance Requirements (including English language requirements)	Programme Director Coordinated by Student Admissions Programme Annual Monitoring	Approved by PB <i>[For Gender Identity Healthcare suite: Approved by RCP]</i>
3.3	Applicants not meeting programme-specific or course entry requirements	Reference Agreed Precedents Programme Director Coordinated by the Admissions Panel, Student Admissions	
3.4	Applicants not meeting general entrance requirements (undergraduate programmes only)	Reference Agreed Precedents Coordinated by the Admissions Panel, Student Admissions	
3.5	Credit transfer	Reference Agreed Precedents Programme Director Coordinated by the Admissions Panel, Student Admissions	
3.6	Recognition of prior learning: 'non-automatic' (not listed in the Programme Regulations)	Programme Director	
3.7	Renewal of registration	Programme Director Coordinated by Registry	
3.8	Misconduct	Programme Director refers allegations, where appropriate Coordinated by the Student Affairs Team in accordance with Ordinance 17	Reported to AQAC annually
3.9	Transfer of registration	Managed by Registry	

3. STUDENT LIFECYCLE/EXPERIENCE			
	PROCESS or FUNCTION	RESPONSIBILITIES	GOVERNANCE
3.10	Student appeals and complaints (incorporating appeals concerning decisions of Boards of Examiners)	Coordinated by the Student Affairs Team in accordance with the <i>University of London Procedure for Student Complaints and Academic Appeals</i> , as follows: Stage 1: Informal stage – response/resolution managed by the relevant department. Stage 2: Formal complaints managed under the delegated authority of the Pro-Vice Chancellor (International, Teaching and Learning) Stage 3: Review stage managed on behalf of the Managing Director with the delegated authority of the Vice-Chancellor of the University of London	Procedure approved by Academic Board. Annual report submitted to the Academic Board.
3.11	Misrepresentation of entry qualification	Coordinated by the Student Admissions Team	Vice-Chancellor sign-off
3.12	Student Engagement		
	Student Feedback on services	Programme Director	Considered by PB
	Modular/Course level feedback	Programme Director Coordinated by the Surveys and Student Voice Team Module Enhancement Service – Learning Solutions Team	Considered by PB
	Student Experience Survey	Coordinated by the Surveys and Student Voice Team on a biennial basis	Considered by PB Reported and discussed through AQAC, and sub-committees as appropriate
	Committee Membership	Coordinated by the Surveys and Student Voice Team Student members are recruited annually to UOLW governance All appointed student members also sit on Student Voice Group (SVG)	Members of the Sub-Committees are appointed annually by the Chair of the AQAC SVG reports to SLTEG
	Quality Assurance Panel Membership e.g. PPRs, Programme Approvals	Coordinated by the Surveys and Student Voice Team in liaison with the Quality Team	

4. RELATIONSHIPS WITH RECOGNISED TEACHING CENTRES			
	PROCESS or FUNCTION	RESPONSIBILITIES	GOVERNANCE
4.1	Establishment of Recognition Criteria	Recognition criteria set out in the TCRF and Agreement	Considered by the TCC Approved by AB
4.2	Teaching Centre Monitoring events	Coordinated by the Quality Team (International)	Report considered by the TCC Recommendations concerning recognition status considered by TCC Approved by AB
4.3	Recognised Teaching Centre Annual Monitoring	Quality Team (International) collates data and supporting evidence to evaluate Teaching Centres' performance in liaison with Programme Teams, arranging individual meetings where necessary. Recommendations concerning status of teaching centres presented to Annual Monitoring Executive Meeting co-ordinated by the Quality Team (International).	Annual Monitoring Executive meeting: makes recommendations concerning recognition, de-recognition, targets/warnings and commendations. Annual Monitoring Executive Report considered by the TCC Recommendations concerning recognition status considered by TCC Approved by AB
4.4	Risk Register	Managed by the Business Support Services Team in liaison with the Quality Team (International)	Reported to the TCC
4.5	Agreement	Coordinated and approved by Managing Director, UOLW	Contract put in place following approval by the TCC and AB
4.6	Protection of students when there is a change to recognition status or scope of recognition	Business Support Services Team and Quality Team (International) assure alignment with OfS Regulatory Framework (including the Student Protection Plan); the QAA Quality Code, the <i>"UoL Policy and Procedure for protecting and supporting students when there is a change to a Recognised Teaching Centre Status or A change to the scope of recognition for a Recognised Teaching Centre"</i> ; and overseas regulators for higher education	Considered by the TCC Approved by AB

4. RELATIONSHIPS WITH RECOGNISED TEACHING CENTRES			
	PROCESS or FUNCTION	RESPONSIBILITIES	GOVERNANCE
4.7	Certificate Teaching Status (CTS)	UOLW Registry office providing attendance lists for CTS programmes CTS Managed by the Programme Team	CTS status reported to the TCC
4.8	Granting of Recognised Teaching Status	Proposal developed by the Global Business Development Directorate	SLT considers in the first instance Considered by TCC Approved by AB
4.9	Appeals against decisions concerning Recognised Teaching Status or scope of recognition	Quality Team (International) to coordinate process, according to the agreed policy	Appeals policy for teaching centres wishing to appeal against a decision on Recognised Teaching Status or scope of recognition approved by TCC Reported to AB
4.10	Student complaints against recognised teaching centres	Quality Team (International) responsible for investigating allegations where there is concern about a recognised teaching centre's potential breach of TCRF criteria	Policy and procedure for handling student complaints/grievances against University of London Recognised Teaching Centres approved by TCC Reported to AB

5. MASSIVE OPEN ONLINE COURSES (MOOCS)			
	PROCESS or FUNCTION	RESPONSIBILITIES	GOVERNANCE
5.1	Proposal	Proposal submitted to OED Coordinated by OED MOOC strategy, proposal forms and selection criteria set annually	Considered by SLTEG and Chair of the MOOC Review Panel
5.2	Development	Coordinated by Academic Project Manager, OED Content development and development schedule agreed with OED and member institution.	
5.3	Approval	Coordinated by the Quality Team with support from OED Course Team provides response to the report from the MOOC Review Panel	Approved by SLTEG
5.4	Review Panel Appointments	Standing members of the MOOC Review Panel appointed annually, coordinated by the Quality Team. Student member and External Peer reviewer appointed to each Review Panel by the Quality Team Recommendation of External Peer Reviewer from course team coordinated by OED	
5.5	Annual Monitoring	Coordinated by the Quality Team with support from OED	Considered by SLTEG

6. REVIEW			
	PROCESS or FUNCTION	RESPONSIBILITIES	GOVERNANCE
6.1	Programme Annual Monitoring	Coordinated by Academic Services Managers Annual provision of Programme Director's summary and attendance at meeting	Reported to PB Considered by AQAC Reported to AB
6.2	Periodic Programme Review (PPR) and reporting process	Coordinated by Quality Managers Provision of Self-Evaluation Document from Programme Team	Reported to PB Considered by AQAC. Reported to AB

APPENDIX 1

POLICY, PROCEDURES AND REGULATIONS

This section contains documentation drawn up by the University of London to set expectations and responsibilities on quality assurance on the development and delivery of UoLW programmes in collaboration with federation members.

Please contact qualityteam@london.ac.uk for information on documents not available via the University of London website.

ITEM	DOCUMENT
1.	Assessment Principles
2.	Academic Programme Approvals Policy
3.	Qualifications and Credit Framework
4.	General Regulations
5.	Guidelines for Examinations
6.	Inclusive Practice Policy
7.	Periodic Programme Review
8.	Programme Closure
9.	Statutes, Ordinances and Regulations
10.	Student Terms and Conditions
11.	Student Complaints and Appeals Procedure
12.	Teaching Centre Recognition Framework
13.	Assessment Offences

APPENDIX 2

ANNUAL REPORTS

Common acronyms

AB	Academic Board
AQAC	Academic Quality Assurance Committee
SLT	Senior Leadership Team

ITEM	DOCUMENT	COMMITTEE
1	Quality Enhancement Review (QER) Report	AQAC
2	External Examiners Summary	AQAC
3	Student Complaints and Appeals	AQAC
4	Report on Assessment Offences for the Academic Year	AQAC
5	List of Awards	AB
6	Annual Quality, Learning and Teaching Report	AQAC AB
7	SGS Audits Summary Report	Audit and Risk Committee
8	Annual Programme Reports	AQAC
9	Statistical Report on requests for re-checks of examination results	AQAC
10	Retention and completion data	AQAC
11	Assessment Offences: Chair's overview report	AQAC
12	Appeals & Complaints: Stage 2 annual report	AQAC
13	Appeals & Complaints: Complaints escalated to the OIA annual report & case studies	AQAC
14	Appeals & Complaints: Stage 3 annual report	AQAC
15	Ordinance 17: Code of Student Discipline annual report	AQAC
16	Suspension of Regulations overview report	AB
17	Student Engagement Initiatives	SLTEG/AQAC