***Responses to each question/area should usually be approximately 150 – 250 words in length.***

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| **Section A – The Arrangement** | |
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| **(i) Name and Address of Collaborative Partner** | |
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| **(ii) Category of Collaboration (as defined in the Taxonomy) and Description of Arrangement.** | |
|  | |
| **(iii) Programme(s) and/or Module(s) Covered by Report.** | |
|  | |
| **(iv) Name and Position of Main Report Authors** (please also list any other contributors) | |
|  | |
| **(v) Contact Information** (Academic Lead/Link Tutor and Professional Services) | |
| **University of Liverpool** | **Collaborative Partner** |
| **Name:**  **Position:**  **Email:**  **Tel:**    **Name:**  **Position:**  **Email:**  **Tel:** | **Name:**  **Position:**  **Email:**  **Tel:**  **Name:  Position:  Email:**  **Tel:** |

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| **Section B – Student Numbers** | | | | |
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|  |  | **Registrations Per Programme** | | |
| **Programme Title** | **Target** | **2023-24** | **2022-23** | **2021-22** |
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| **Section C** –for completion by partner |

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| 1. **Student Experience and Support**   Please comment on recruitment, enrolment, induction, progression, achievement and both academic and pastoral support of students on the programme(s).  Please make direct reference to the attached***Office for Students (OfS) B3 metrics***. Where areas are outside of the published threshold values, please outline the actions planned to address this. | | | |
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| 1. **Programme Modifications, Institutional, Policy or Procedural Changes** Please outline any modifications that have been made to the programmes, the rationale behind the modifications and the process by which they were approved/UoL was notified. Also comment on any changes at your organisation that could impact on the delivery of the arrangement and, where appropriate, any changes at UoL that may affect the arrangement. | | | |
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| 1. **Good Practice** Please highlight **at least** **three** areas of good practice or particular success specifically in relation to the partnership or programmes covered by this report. Add further rows where required. | | | |
| 1. |  | | |
| 2. |  | | |
| 3. |  | | |
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| 1. **Issues/Areas of Concern/Complaints or Appeals** Please reflect on **at least** **three** issues, problems or areas of concern in relation to the arrangement during 2023-24, detailing how they were resolved, or what actions will be taken to address them for future cohorts. Please include a summary of any complaints or academic appeals, and their eventual outcomes and add further rows where required. | | | |
| 1. |  | | |
| 2. |  | | |
| 3. |  | | |
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| 1. **Facilities and Resources, including Staff Resources** Please reflect on the facilities and resources available and comment on the staffing levels and any relevant staff development activity undertaken during 2023-24, as well as your institutional Peer Review Policy. | | | |
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| 1. **Communication** Please comment of the mechanisms for communication between the institutions and the effectiveness of these. Refer to the Joint Liaison Group (JLG) where applicable, and to any other meetings or committees that help to maintain oversight of the arrangement. | | | |
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| 1. **External Examiner Reports**   Please provide a summary of the External Examiner Report(s) and Departmental responses, and attach the relevant reports. . | | | |
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| 1. **Student Feedback**   Please provide a summary of feedback received from your internal student evaluation mechanisms. | | | |
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| 1. **The Prevent Duty and Safeguarding** Please provide evidence of your compliance with HEFCE’s Prevent monitoring requirements (e.g. outcome letter following initial submission or annual report) | | | |
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| 1. **University Documentation**   Where applicable, please confirm receipt of the following, and comment on any issues with compliance. | | | |
| **Document** | | **Received** | **Comment** |
| Code of Practice on Assessment | | YES/NO/NA |  |
| Policy on Student Representation | | YES/NO/NA |  |

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| **Section D** – for completion by the University of Liverpool department/school |

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| 1. **Recruitment, Retention and Achievement** Please ***comment*** on the data provided in the documents attached, regarding recruitment, retention and academic achievement of students admitted through this route compared to standard entry students and direct entrants from other partners. Are there any concerns related to student numbers or attainment gaps? Have any noticeable trends been identified? Are the numbers in line with expectations? What factors contributed to any differences and how will they be addressed?   Please make direct reference to the attached***Office for Students (OfS) B3 metrics***. Where areas are outside of the published threshold values, please outline the actions planned to address this. | |
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| 1. **Curriculum Mapping /Programme Modifications/ Institutional, Policy or Procedural Changes** Outline any changes that have been made to the partner and/or UoL programmes. Provide a summary of activity undertaken to ensure the curricula and learning outcomes remain aligned, relevant and appropriate. \*Please note that curriculum mapping for articulation arrangements should be undertaken on a minimum of a biennial basis to ensure continued alignment. Comment on any procedural or policy changes that could impact on the delivery of the arrangement, including facilities and resources. | |
|  | |
| 1. **Good Practice**   Please highlight **three** areas of good practice or particular success specifically in relation to the partnership or programmes covered by this report **during 2023-24**. | |
| 1. |  |
| 2. |  |
| 3. |  |
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| 1. **Issues/Areas of Concern for Faculty or University Consideration** Please reflect on **three** issues, problems or areas of concern specifically in relation to the arrangement **during 2023-24**, and note where these may require consideration at Faculty or University level. Where applicable, please provide a summary of any complaints or academic appeals, and their eventual outcomes as one of the items. | |
| 1. |  |
| 2. |  |
| 3. |  |
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| 1. **Professional, Regulatory and Statutory Bodies**Do the programmes covered by this report have professional or statutory body accreditation? If so, please confirm the name of the body and the date and outcome of the last review*.* | |
|  | |
| 1. **External Examiner Reports**   Please provide an **overview** of any comments relevant to the partnership made in the External Examiner Report(s) and Departmental responses. | |
|  | |
| 1. **Student Feedback**   Please arrange for feedback from students who have transferred to UoL from another institution, via a formal articulation or franchise arrangement. Provide a summary of their views on pre-departure preparation, the transfer process, as well as induction procedures and support at UoL | |
|  | |
| 1. **Communication** Please comment of the mechanisms for communication between the institutions and the effectiveness of these. Refer to the Joint Liaison Group (JLG) where applicable, and to any other meetings or committees that help to maintain oversight of the arrangement. | |
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| 1. **Institutional Review - Action Plan**   Where an Institutional Review has taken place within the past twelve months, please comment on progress made on the agreed conditions or recommendations. | |
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| **Section E – Audit of Published Information** |

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| **Information Audit and Approval** | | | | |
| The University is required to ensure effective control over the accuracy of all public information, publicity and promotional activity relating to its collaborative provision. All marketing material relating to a UoL programme, therefore, must be approved by UoL before the material is made public. Please confirm the process for audit and approval of all materials relating to the partnership and/or programmes. | | | | |
| **Area for Review** | **Process for Audit and/or approval** | **Responsibility** | **Date Completed** | **Comments** |
| **Websites** |  |  |  |  |
| **Student Handbooks** |  |  |  |  |
| **Programme Information** |  |  |  |  |
| **Assessment Regulations** |  |  |  |  |
| **Marketing**  **Materials** |  |  |  |  |
| **External Examiners** |  |  |  |  |

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| **SECTION F – ACTION PLAN** |

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| 1. **Please identify any issues or concerns for action during 2024-25** These should come directly from the information above. \*Please note that the Collaborative Provision Committee may identify areas for improvement or clarification if they are not covered by the action plan. | | | | |
| **Issue/Concern** | **Action** | **Responsibility** | **Timescale for completion** | **Status** |
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| 1. **Please comment on the issues or concerns raised in the previous year’s Annual Monitoring Report and the actions taken to address these.**   This section should include any actions or clarifications that were identified by the Collaborative  Provision Committee after submission of the report. |
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