

# **Academic Standards and Quality Regulations 2025-26**

**UHI**







# Contents

<b>INTRODUCTION .....</b>	<b>1</b>
<b>1 ACADEMIC STANDARDS AND QUALITY POLICY .....</b>	<b>2</b>
<b>2 QUALITY ASSURANCE .....</b>	<b>3</b>
Principles of quality assurance for degree provision .....	3
Principles of quality assurance for SQA provision .....	3
Quality assurance processes and outcomes .....	5
<b>3 ACADEMIC COMMITTEES .....</b>	<b>8</b>
Academic Council .....	8
Academic Planning Committee .....	10
Academic Titles Review Board .....	12
Comataidh Ghàidhlig .....	13
External Partnerships Steering Committee .....	15
Quality Assurance and Enhancement Committee .....	17
Research and Knowledge Exchange Committee.....	19
Research Degrees Committee.....	21
Faculty Boards.....	23
Joint Faculty Executive .....	25
Cognate Subject Group Committee (one per Cognate Subject Group) .....	26
Research Cluster Management Group (one for each research cluster).....	28
Academic Partner Quality Committee .....	29
University committee structure.....	30
<b>4 SUBJECT AREA REVIEW AND STUDENT SUPPORT SERVICE REVIEW .....</b>	<b>31</b>
Introduction .....	31
Scope of subject area review.....	31
Scope of student support service review .....	32
Frequency of subject area / service review .....	32
Relationship to other quality processes .....	32
Principles of subject area / service review .....	32
Preparation for reviews .....	32
Self-evaluation document and supporting documentation .....	33
Review panels .....	33
Review process .....	34
Outcomes and follow up .....	34
<b>5 ANNUAL QUALITY MONITORING .....</b>	<b>36</b>
Introduction .....	36
Scope .....	36



Objectives .....	36
Principles .....	36
Responsibility.....	37
Quality monitoring process .....	37
Self evaluation documents.....	38
Annual meetings and outcomes.....	38
Evaluation of process .....	39
Quality monitoring flowchart.....	40
<b>6    FRAMEWORK FOR CURRICULUM DEVELOPMENT.....</b>	<b>41</b>
Introduction .....	41
Levels, credits and modules .....	42
Continuing professional development (CPD) awards .....	43
Schemes.....	44
Programme design .....	44
<b>7    PROGRAMME DEVELOPMENT.....</b>	<b>46</b>
Introduction .....	46
Responsibilities.....	46
Stage 1 – initiation and planning approval .....	46
Stage 2 - programme development .....	47
Stage 3 – programme approval .....	48
Academic development process – stages, purpose and outcomes .....	49
<b>8    PROGRAMME APPROVAL .....</b>	<b>53</b>
Introduction .....	53
Objectives .....	53
Planning approval .....	54
Peer review or advisory group .....	54
Advisory group (if required).....	55
Faculty approval .....	55
Approval panel.....	55
Approval event.....	56
Approval outcomes .....	57
Signing off approval conditions .....	57
Documentation for approval.....	57
Learning resources .....	58
<b>9    RESPONSIBILITIES OF ACADEMIC PARTNERS IN RESPECT OF ACADEMIC PROVISION ...</b>	<b>60</b>
Introduction .....	60
Responsibilities of ‘responsible academic partner’ .....	60
Responsibilities of Home Academic Partners .....	60



Learning centres .....	61
<b>10A PROGRAMME MODIFICATION .....</b>	<b>62</b>
Scope .....	62
Proposals for modification of a degree programme .....	62
Risk factors .....	63
Modification approval events .....	63
Outcome of modification approval events .....	63
<b>10B DISCONTINUATION OF AND WITHDRAWAL FROM PROVISION .....</b>	<b>65</b>
Scope .....	65
Proposals for discontinuation of or withdrawal from provision .....	65
Timing .....	66
Notification following Faculty approval .....	66
Monitoring .....	66
<b>11 ACADEMIC LEADERSHIP: FACULTY STRUCTURES .....</b>	<b>67</b>
Introduction .....	67
Responsibilities of the Dean of Faculty .....	67
Responsibilities of the Associate Deans .....	68
Responsibilities of the Research Cluster Leads.....	69
Designation of programme leaders.....	71
Change of responsible academic partner for a degree and HN programme.....	71
Designation of module leaders .....	72
Allocation of teaching responsibilities within a module team.....	74
Allocation of students to each of the delivering members of a module team .....	74
Creation and identification of new module and programme teams .....	74
<b>13 COLLABORATIVE PROVISION .....</b>	<b>76</b>
Principles .....	76
External Partnerships Steering Committee .....	76
Information on collaborative activity .....	77
<b>14A TAUGHT POSTGRADUATE REGULATIONS.....</b>	<b>78</b>
Introduction .....	78
Taught postgraduate awards and credit framework.....	78
Intermediate awards .....	78
Programme structure and design.....	79
Programme duration .....	79
Attendance and withdrawal.....	79
Admission to programmes leading to Masters and intermediate awards .....	80
Arrangements for recognition of prior learning (RPL) .....	80



Management of assessment.....	80
Progression.....	84
Distinction in the awards of PgCert, PgDip and Masters .....	84
Merit in the awards of PgCert, PgDip and Masters .....	84
<b>14B POSTGRADUATE RESEARCH DEGREE REGULATIONS .....</b>	<b>85</b>
Introduction .....	85
Research awards.....	85
Admission .....	86
The research degree programme .....	86
Supervision and progression .....	88
Assessment .....	89
Posthumous awards .....	92
Academic misconduct.....	92
Thesis access, copyright and intellectual property rights .....	92
<b>14C REGULATIONS AND GUIDANCE FOR HIGHER DOCTORATES .....</b>	<b>93</b>
Awards.....	93
Eligibility.....	93
Application for candidature .....	93
Assessment and examination .....	95
Resubmission .....	96
Award.....	96
Appeals and academic misconduct .....	96
<b>15 APPOINTMENT AND ROLE OF EXTERNAL EXAMINERS .....</b>	<b>97</b>
Role of external examiners .....	97
Appointment of external examiners .....	98
Criteria for the appointment of external examiners .....	98
External examiners' reports .....	99
Term of appointment.....	100
Termination of external examiners' contracts .....	100
<b>16 ADMISSIONS AND ENROLMENT .....</b>	<b>101</b>
Principles of admission .....	101
Entry requirements .....	102
Appeals.....	103
Recognition of prior learning (RPL).....	103
Recognition of prior learning (RPL) limits.....	104
Recognition of prior learning (RPL) process .....	105
Appeals.....	106
Enrolment .....	106



Home academic partner.....	107
Payment of fees and debt to the university .....	107
Re-admission and intermediate awards.....	107
Attendance and withdrawal .....	108
<b>17A ASSESSMENT REGULATIONS (SQA AND OTHER AWARDING BODIES).....</b>	<b>110</b>
Introduction .....	110
Quality assurance - principles and partnership .....	110
Policy - assessment and verification .....	110
Progression boards.....	112
<b>17B ASSESSMENT AND PROGRESSION REGULATIONS (DEGREE PROGRAMMES).....</b>	<b>113</b>
Boards of examiners .....	113
Management of assessment.....	117
Components of assessment .....	121
General assessment provisions.....	121
Study abroad .....	126
Provisions for the progression of students .....	127
Provisions for the conferment of final awards .....	129
Conferment of intermediate awards.....	131
Aegrotat awards.....	132
Posthumous awards .....	132
<b>18 ASSESSMENT APPEALS PROCEDURE .....</b>	<b>136</b>
Introduction and scope .....	136
Grounds for appeal .....	136
Appeals procedure.....	137
Membership and remit of the appeals panel.....	138
Appeals panel hearing procedures .....	139
Rights of students .....	140
Rights of staff.....	140
Outcome of the appeals panel .....	140
External right of appeal.....	141
Reporting and monitoring.....	141
Timescale of assessment appeals procedure.....	142
Assessment appeals procedure flowchart .....	144
<b>19 ACADEMIC MISCONDUCT POLICY AND PROCEDURE.....</b>	<b>145</b>
Introduction .....	145
Forms of academic misconduct .....	146
Minor and serious academic misconduct.....	146
Procedures for investigation of alleged academic misconduct (taught provision) .....	147



Informal procedure.....	147
Formal investigation.....	147
Procedures for investigation of alleged academic misconduct (PGR provision) .....	149
Informal procedure.....	149
Formal investigation.....	150
Academic misconduct panel .....	150
Penalties for academic misconduct (taught provision) .....	151
Reassessment after academic misconduct is proven .....	152
Penalties for academic misconduct (PGR provision) .....	152
Communication with external funding agencies .....	152
Students' right of appeal .....	152
Academic misconduct procedure flowchart (taught provision) .....	154
<b>APPENDICES.....</b>	<b>155</b>
<b>A TERTIARY QUALITY ENHANCEMENT FRAMEWORK.....</b>	<b>156</b>
<b>B EXAMINATION GUIDELINES.....</b>	<b>159</b>
<b>C ASSESSMENT GUIDANCE NOTES (SQA PROGRAMMES) .....</b>	<b>186</b>
<b>D EQUIVALENCE POLICY .....</b>	<b>192</b>
<b>E APPROVALS PROCESS FOR SQA AWARDS .....</b>	<b>195</b>
<b>F INTERNAL VERIFICATION OF SQA PROVISION .....</b>	<b>197</b>
<b>G ACADEMIC MISCONDUCT .....</b>	<b>200</b>
<b>H MITIGATING CIRCUMSTANCES.....</b>	<b>203</b>
<b>I UNIVERSITY REFERENCING SYSTEM.....</b>	<b>206</b>
<b>J COPYRIGHT POLICY .....</b>	<b>207</b>



## List of Tables

Table 1: Key quality assurance processes in the university .....	7
Table 2: Annual quality monitoring process .....	38
Table 3: Qualifications and awards the university may offer .....	41
Table 4: University qualification and their SCQF requirements .....	42
Table 5: Normal duration of programmes .....	44
Table 6: Stage 1 - Initiation and planning approval (1-3 months) .....	50
Table 7: Stage 2 - Programme development (3-12 months) .....	51
Table 8: Stage 3 - Programme approval (1-3 months) .....	52
Table 9: PGT qualifications and their SCQF requirements .....	78
Table 10: PGT minimum period of study .....	79
Table 11: PGT assessment marking system .....	81
Table 12: PGT assessment marking system cont. ....	83
Table 13: Research awards offered by the university .....	85
Table 14: Periods of study if registered FROM 2021-22 .....	86
Table 15: Periods of study if registered BEFORE 2021-22 .....	87
Table 16: Outcomes of examination .....	91
Table 17: Higher doctorates application timetable .....	94
Table 18: UG performance criteria and conventions .....	121
Table 19: Late submission of assessment and the penalty to be applied .....	123
Table 20: Indicative word counts by SCQF level .....	124
Table 21: Exceeding the word count and penalties .....	124
Table 22: Timescale of assessment appeals procedure .....	143
Table 23: Co-ordination of examinations .....	160
Table 24: SQA Graded Units timeline .....	191
Table 25: Guidance on sampling .....	199
Table 26: Indicative penalty in cases of plagiarism (taught provision) .....	202







## INTRODUCTION

---

The Academic Standards and Quality Regulations have been developed to fulfil the regulatory requirements of the University of the Highlands and Islands (UHI) and are consistent with the Memorandum and Articles of the university.

The regulations cover all undergraduate and postgraduate students and originally were ratified by Network Academic Council (NAC) in October 1997. Since then, the regulations have been subject to regular amendments and additions.

Regulations and procedures are regularly reviewed and enhanced, and regulatory changes are ratified by Academic Council. This ensures that the university's regulatory framework remains in line with sector-recognised standards and expectations, including those of QAA Scotland and the Scottish Funding Council, and that it is aligned with the university's academic structures and curriculum.

Whenever there is a change to assessment regulations, the university applies the principle of 'no detriment' to ensure students part-way through their studies are not disadvantaged by the change.

Since February 2011, all taught degrees have been awarded by University of the Highlands and Islands, as distinct from UHI Millennium Institute, which was the institutional name prior to the achievement of university title.

The university achieved research degree awarding powers in June 2017. Academic Council approved relevant regulations in December 2016, applicable from 2017-18 onwards for all students registered for research awards made by the university, and for the management and standards of research programmes and awards.

Students who are registered for a research award with the University of Aberdeen under the accreditation agreement will continue to be subject to the regulatory framework of that agreement.

The electronic version of *Academic Standards and Quality Regulations*, along with all appendices, additional guidance notes and supporting materials, can be accessed through the website ([www.uhi.ac.uk/regulations](http://www.uhi.ac.uk/regulations)) and should be taken as the definitive version at all times.

For any comments or questions regarding these regulations, please contact: [tara.black@uhi.ac.uk](mailto:tara.black@uhi.ac.uk).

Copies of this publication in Braille, large print, audio CD and CD-ROM formats are also available from Tara Black ([tara.black@uhi.ac.uk](mailto:tara.black@uhi.ac.uk)).

**These regulations are for the academic year 2025-26 and supersede all previously issued regulations.**



## 1 ACADEMIC STANDARDS AND QUALITY POLICY

---

### **The university is committed to:**

- defining clear academic goals that are reflected in our portfolio of programmes
- designing appropriate and relevant programmes of study that are informed by national benchmarks and are systematically reviewed and updated
- offering nationally recognised degrees and other programmes where these provide sought after qualifications
- developing our academic staff to ensure they have the qualifications and experience to deliver successfully the programmes of study
- providing learning support that gives students the opportunity to realise their full potential
- creating stimulating learning environments through the use of appropriate technologies for teaching, assessment and guidance
- respecting the rights of copyright owners. The university will not permit the creation of, transmission of, or access to, material in such a way as to infringe a copyright, moral right, trade-mark, or other intellectual property right (the full Copyright Policy can be found on the website)
- supporting self-evaluation and enhancement of the learning experience, both in quality processes and in higher education staff cultures
- monitoring and maintaining the consistency of academic standards across the university
- ensuring quality assurance systems and processes are clear, effective and well embedded in normal operations
- ensuring policies and practices are non-discriminatory and that programmes are as inclusive and accessible as possible
- ensuring that policies and practices afford appropriate opportunities for student engagement and require due consideration of student feedback and the student voice.

The Academic Standards and Quality Regulations are designed to support staff and students in achieving these aims, by clearly defining responsibilities and procedures. Through its deliberative structures, the university has sought to build on the strengths of academic partners' practice and address the strategic issues affecting learners in these regulations. The university's Equivalence Policy (see appendix) describes how the comparability of student experience in different partners is monitored.

These regulations apply to all higher education provision offered by the university, including degree, taught postgraduate programmes, postgraduate research programmes and provision validated by the Scottish Qualifications Authority, or other recognised awarding body.

Approved by Academic Council  
March 2011



## **2 QUALITY ASSURANCE**

---

### **Principles of quality assurance for degree provision**

- 2.1 The university aims to set and maintain appropriate academic standards in all provision. This is achieved through a range of quality assurance systems which are designed to:
- engage with national standards and expectations (including the UK Quality Code for Higher Education) through development and review processes
  - ensure that action is taken to safeguard standards and to enhance the quality of programmes and learning opportunities
  - ensure that issues are resolved by the relevant body; where issues impact beyond individual programmes, ensuring that committees, resource-holders and decision-makers are informed and engaged in resolving them
  - provide feedback to students and programme teams on actions being taken to improve quality
  - review quality assurance activities and procedures to check their relevance, value and achievability for all partners
  - identify areas of good practice and contribute to quality enhancement.
- 2.2 A key feature of quality assurance is its use to strengthen and develop the professional expertise of the university academic community. Therefore, the university:
- uses peer review in quality assurance processes, in order to develop staff understanding of quality issues through critical evaluation of other programmes and contexts and to share experience
  - involves a wide range of staff across the partnership in the development of quality systems and regulations
  - involves students as much as possible in contributing to quality review and development activity
  - involves external expertise to widen debates and ensure external agendas are referenced.
- 2.3 The university benefits from engagement with a range of quality processes, both internal and external: these processes are outlined in this section.

### **Principles of quality assurance for SQA provision**

- 2.4 The university is committed to working in partnership with Scottish Qualifications Authority (SQA) to quality assure all its SQA qualifications to maintain national standards and to ensure the public recognition and credibility of these awards.
- 2.5 Quality assurance for SQA awards is based upon the following principles:
- the assessment and quality assurance system for SQA awards should be understandable to stakeholders, effectively administered, accountable and cost-effective to operate
  - qualifications should be accessible to all learners who have the potential to achieve them



- the criteria which define the performance required of learners to achieve specific qualifications should be appropriate to purpose, be explicit and in the public domain
- each unit, course and group award should be unique and necessary, and should comply with the relevant qualification specification
- assessments should be valid, reliable and practicable, and assessment results should satisfy the qualification criteria
- qualifications should be offered only where resources and expertise are in place to assess learners against the qualification's criteria
- staff should be provided with effective support in assessing learners for certification
- responsibility for quality assurance should be a partnership between the university and SQA and devolved to the university where this is consistent with the university devolved powers.

## 2.6 Quality assurance elements

SQA qualifications are designed, delivered and assessed to national standards and to ensure this SQA has identified key quality assurance elements, based on the above quality assurance principles. The university engages fully with these elements in order to underpin all its SQA qualifications and these are the key mechanisms through which SQA national standards are established and maintained.

SQA has divided each element into requirements or criteria. The university and SQA have allocated responsibilities for these criteria as quality provision requires an effective partnership. There are six categories of criteria which address management of the centre, resources, candidate support, internal assessment and verification, external assessment and data management.

The elements are:

- **approval as an SQA centre**  
These criteria relate to the management procedures which underpin the implementation and assessment of SQA qualifications across the partnership
- **approval to offer specific SQA qualifications**  
These criteria relate to resources required for the implementation and assessment of specific SQA qualifications
- **validation of SQA qualifications**  
These criteria relate to ensuring that SQA qualifications are fit-for-purpose
- **internal verification of internal assessment**  
These criteria relate to the processes by which the university ensures that all internal assessment is valid, reliable, practicable and cost-effective
- **external verification of internal assessment**  
These criteria relate to external processes by which SQA engages with the university to ensure that internal assessment is in line with the national standards set out in the qualifications.
- **quality control of external assessment**  
These criteria relate to the processes by which the university and SQA ensure that external assessment is in line with the national standards set out in the qualifications
- **monitoring of SQA's quality assurance elements**  
These criteria relate to the processes which are used to measure the success of the other elements in supporting the consistent application of national standards.



Academic Standards and Quality Regulations 2025-26  
Quality assurance

For further details on any of the above quality elements and criteria, please contact the relevant academic partner quality manager or UHI Head of Academic Standards and Enhancement.

### Quality assurance processes and outcomes

2.7 The key quality assurance processes that operate within the university are outlined below. All these processes are overseen by Quality Assurance and Enhancement Committee (QAEC), which also ensures that the outcomes of these processes are dealt with. The provisions of this section apply to all taught provision offered to registered students, including that validated by SQA, or through other HEIs and awarding bodies.

Process	Purpose	Description	Outcomes
<b>Approval procedures for new programmes, overseen by Faculty Boards</b>	To ensure new provision is fully developed and adequately resourced and academic standards are appropriately set	Faculty Board support required to approve initial proposal. Approval event based on programme documentation. Panels include internal members	Approval report may have conditions that must be met before programme commences
<b>Annual quality monitoring of modules, programmes and cognate subject groups, overseen by QMG and QAEC</b>	To identify strengths and weaknesses at each level, and plan for improvement	Annual SEDs produced, making appropriate reference to programme statistics, student evaluations of modules, staff evaluations, response to any external examiner issues, targets and objectives. Supported by site reports and other submissions from, and meetings with, academic partners (see below). Annual meeting between QMG and cognate subject group	Cognate subject group SEDs considered by Quality Monitoring Group prior to meeting with subject networks and agreement of annual targets
<b>Annual quality monitoring meeting with academic partners, overseen by QAEC</b>	To discuss student experience, support and infrastructure issues identified	Annual meeting of academic partner quality managers, internal members of QMG and associate deans	Summary institution-level report to QAEC comprising common issues and good practice and recommendations for action
<b>External examiners' reports</b>	To assure academic	Annual visits and reports by external examiners	Reports, often with recommendations for improvement. Discussed



Academic Standards and Quality Regulations 2025-26  
Quality assurance

Process	Purpose	Description	Outcomes
	standards in a national context		and acted on by programme team, with overview of all reports by Faculty Board to QAEC
<b>External Verification (SQA)</b>	To ensure academic and procedural standards in a national context	Annual visits and sampling of evidence generating reports by SQA External Verifiers	Reports identifying good practice and recommendations. Required actions are identified where criteria have not been met. The programme team must meet required actions by the specified deadline. Overview of all reports considered by Faculty Board, QAEC and Quality Forum.
<b>Internal subject area review every 5 years, overseen by QAEC</b>	To identify strengths and weaknesses and potential for enhancing the quality of student learning experience	Self-evaluation document produced by subject area. 1-2 day event to meet staff, students and review evidence. Panel includes internal and external and student members	Report containing judgements, with conditions and/or recommendations for action.
<b>Internal student support service review, overseen by QAEC</b>	To identify strengths and weaknesses in support services and potential for enhancing the quality of student learning experience	Self-evaluation document produced by student support service team. 1-2 day event to meet staff, students and review evidence. Panel includes internal and external and student members	Report containing judgement with recommendations for action
<b>Programme re-approval every 5-6 years, overseen by Faculty Boards</b>	To ensure programme continues to meet academic standards and is properly managed and resourced	Event includes evaluation of existing programme and analysis of student statistics. Panel includes internal and external and student members	Re-approval report may have conditions that must be met in a given time frame
<b>Systems Verification (SQA)</b>	To ensure systems, policies and procedures meet SQA quality assurance criteria and are	SQA work with the university to: Review evidence against identified criteria.	Consolidated evidence mapped to relevant criteria. Verification report detailing findings, good practice, developmental recommendations and required actions.



Academic Standards and Quality Regulations 2025-26  
Quality assurance

Process	Purpose	Description	Outcomes
	implemented effectively		Report considered by QAEC and all other relevant groups identified in the findings.

*Table 1: Key quality assurance processes in the university*



### 3 ACADEMIC COMMITTEES

---

#### Academic Council

3.1.1 Academic Council (AC) is the highest academic authority in the university. Its authority is delegated to it by the University Court, to whom it sends reports.

3.1.2 Academic Council has ultimate responsibility for the operation of its subcommittees and faculties. Academic Council oversees the operation of these subcommittees, receives reports, and undertakes final scrutiny and approval of policy. It is responsible for ensuring that the university meets the expectations, core and common practices of the UK Quality Code for Higher Education (<https://www.qaa.ac.uk/quality-code>) and the requirements of validating and accrediting bodies.

Academic Council has executive responsibility for:

- a. general issues relating to the research, scholarship, teaching and courses of the university, including criteria for the admission of students studying for an award; the appointment and removal of internal and external examiners; policies and procedures for assessment and examination of the academic performance of students studying for an award; the curriculum; academic standards and the validation and review of courses; and the procedures for the award of qualifications
- b. consideration of the development of the academic activities of the university and the provision of advice thereon to the Principal and to the Court
- c. provision of advice on such other matters as the Court or the Principal may refer to the Academic Council.

Academic Council devolves responsibilities to its committees to undertake the detailed consideration and development of policies and strategies in relation to:

- Academic titles
- Academic planning
- External partnerships
- Ghàidhlig
- Quality assurance and enhancement
- Research and knowledge exchange
- Research degrees

It receives reports from Faculty Boards:

- Arts, Humanities, Business and Education
- Science, Health and the Environment

3.1.3 The membership of Academic Council is:

- a. Chair: Principal and Vice-Chancellor, *ex officio*



Academic Standards and Quality Regulations 2025-26  
Academic committees

- b. Secretary and other such members of the senior management of the university as the Court shall designate, *ex officio*
- c. President of the students' association, *ex officio*
- d. such number of students as shall be at least equal to 10% of the aggregate membership of the Academic Council from time to time, elected by students according to rules made by the Court from time to time
- e. such number of professorial members of staff as are appointed by the Court, nominated from and by all the professorial members of staff of the university
- f. up to four such other persons as nominated by the Court to be required by the Academic Council to fulfil its remit
- g. such other number of teaching, research and / or academic support members of staff, excluding the Principal and Vice-Chancellor and principals of Academic Partners, as is necessary so that they (when aggregated with the persons elected pursuant to category (d)) shall be greater than the number of members appointed under categories (a),(b), (c), (e), (f) and (h), elected by members of staff who are academic staff (as identified as such according to rules made by the Court from time to time) and;
- h. such numbers of academic partner principals appointed by the Court as the Court deems necessary to enable the Academic Council to fulfil its remit.

3.1.4 Terms of office:

Of the members of the Academic Council, those persons appointed *ex officiis* under categories (a),(b), and (c) shall hold appointment during their tenure of office; the persons nominated under (d) shall hold appointment for one year; the persons nominated under (e) and (f) shall hold appointment for four years with the possibility of further nomination for one further period of four years; the persons appointed under (g) and (h) shall hold appointment for four years with the possibility of re-appointment for one further period of four years.

Casual vacancies occurring within a term of appointment may be filled by appointment or nomination, as appropriate for the balance of the period and thereafter the person nominated or appointed may hold appointment for up to two further terms as herein provided for.

A member of Academic Council shall cease to be a member of Academic Council if:

- a. their term of office expires without re-appointment
- b. they cease to be eligible for such appointment
- c. they have acted in a manner which is deemed by the Court to bring the university into disrepute, on written notice of removal by the Court or
- d. they resign by written notice to Academic Council.

3.1.5 Frequency of meetings:

The Academic Council shall meet no fewer than four times a year.



## Academic Planning Committee

3.2.1 The primary role of the Academic Planning Committee is to bring together senior curriculum leaders from across the academic partnership together with key university academic postholders in order to ensure that by working in a collaborative and cohesive manner the university partnership strategically plans and delivers high-quality further and higher education across the University partnership.

The Academic Planning Committee will report to Academic Council but will have a 'dotted line' reporting to Partnership Council.

3.2.2 Terms of reference:

1. to lead cross-partnership higher education student number planning and monitoring of agreed student number targets through the annual recruitment cycle (undergraduate SFC fundable Scottish, EU, RUK, International and PGT)
2. to support the university's regional planning and monitoring requirements for further education curriculum as the Regional Strategic Body, in particular the achievement of credit targets and, reporting to Partnership Council, consider the distribution of credit targets throughout the academic partnership
3. taking full account of academic partner priorities and plans, and through close iteration with the Faculties where appropriate, identify a cohesive high level tertiary education curriculum growth strategy for the academic partnership. This curriculum growth strategy covers school/college partnership programmes, further and higher education
4. to approve higher education programmes that have been endorsed for development by Faculty Boards
5. to consider such matters within further and higher education academic planning that have operational/resource implications, and which would fall under the responsibility of Partnership Council, and/or the Regional Strategy Committee and ultimately University Court (and to therefore in particular become the key consultative group for Partnership Council in that respect). This includes, but is not limited to:
  - i. academic calendars for higher education
  - ii. HR-impact eg leadership payment modelling
  - iii. credit distribution for further education provision
6. to receive compliance reports and agree action where appropriate in relation to any non-compliance, in terms of the delivery of higher education and further education programmes, including regarding module/unit registrations, mark entry, SEDs and exam paper submissions.
7. to agree the further education and higher education elements of the university's tertiary Regional Outcome Agreement.

3.2.3 The membership of Academic Planning Committee is:

- a. Chair: Deputy Principal (Tertiary), *ex officio*
- b. one senior education leader from each academic partner, nominated by the Principal and normally at the level of Assistant/Associate/Deputy Principal or equivalent
- c. Director of Planning and Performance, *ex officio*
- d. Director of Student Recruitment and Admissions, *ex officio*
- e. Deans of Faculty, *ex officio*



Academic Standards and Quality Regulations 2025-26  
Academic committees

- f. UHI Head of Further Education, *ex officio*
- g. Other officers will be invited to attend meetings for specific items from time to time as appropriate.

In attendance:

- Associate Deans, *ex officio*

3.2.4 Frequency of meetings:

The Academic Planning Committee shall meet on a monthly basis.



### **Academic Titles Review Board**

3.3.1 The Academic Titles Review Board (ATRB) is responsible to Academic Council for the award of academic titles.

3.3.2 Remit:

1. To determine the criteria for conferment of academic titles
2. To establish the procedures, processes, guidelines and timetable associated with nominations for titles
3. To consider all applications for award of academic titles
4. To forward its recommendations to Academic Council for ratification.

3.3.3 The membership of Academic Titles Review Board is:

- a. Chair: Principal and Vice-Chancellor, *ex officio* (or their delegate, the Vice Chair)
- b. Vice-Chair: Deputy Principal, *ex officio*
- c. Dean of Research and Innovation, *ex officio* (Senior Responsible Officer)
- d. Dean of Learning, Teaching and Students, *ex officio*
- e. Deans of Faculty of Science, Health and the Environment, *ex officio*
- f. Dean of Faculty of Arts, Humanities, Business and Education, *ex officio*
- g. One member of Academic Council, elected by Academic Council
- h. Three members of the Professoriate, elected by the Professoriate

The members appointed by Academic Council and by the professoriate must be appointed so that appointees come from different academic partners.

Other individuals, as appropriate and necessary, may also be invited to attend the Academic Titles Review Board.

3.3.4 Frequency of meetings:

The Academic Titles Review Board shall meet not less than once a year.

3.3.5 Terms of office:

All appointed members shall hold membership for three years in the first instance. Appointments may be renewed for a further three-year period. No appointed member shall be appointed to periods of office which amount to continuous office for a period of seven or more years. Terms of office will be by rolling demission to avoid all members retiring at the same time.

3.3.6 Conflict of interest:

The Conflict of Interest Policy will be strictly adhered to by ATRB members in the conduct of the Board's business.



## Comataidh Ghàidhlig

3.4.1 The Comataidh Ghàidhlig (Gaelic Committee) is responsible to Academic Council for the development and enhancement of the Gaelic language, culture and heritage within the university.

### 3.4.2 Remit:

1. To ensure the implementation of the strategic objective that the university will be a centre of excellence for the development and enhancement of the Gaelic language, culture and heritage
2. To implement, monitor and review Gaelic Strategy and Gaelic Strategy Enabling Plan (GSEP) in line with its commitment. The GSEP includes the present Gaelic Language Plan as well as future Gaelic Language Plans as they are produced
3. To monitor and advise on the Gaelic Language Plan developments of the academic partners and respond to consultations on other Gaelic Language Plans which may impact on the university
4. To liaise closely with the appropriate Faculty Board, other relevant academic structures and the student body pertaining to Gaelic.

### Reporting structure of Comataidh Ghàidhlig:

1. The Comataidh Ghàidhlig will report to Academic Council which will forward any items to the Partnership Council when appropriate. The Comataidh minutes will be forwarded to Academic Council. Academic Council and Partnership Council will escalate any issues as necessary to the University Court
2. Directors, heads of departments and other senior managers with responsibility for delivering aspects of the Gaelic Language Plan will report directly to the Comataidh Ghàidhlig when required by the Comataidh
3. The Comataidh Ghàidhlig will receive reports from the Strategic Delivery Body (SDB) / Gaelic language act implementation fund (GLAIF) project board.

3.4.3 The Comataidh Ghàidhlig itself will be constituted by staff/governors internal to the partnership. The membership of the Committee is:

- a. Chair: elected by the Comataidh Ghàidhlig
- b. Deputy Principal, *ex officio*
- c. Dean of Faculty of Arts, Humanities, Business and Education, or nominee, *ex officio*
- d. One senior member of staff to represent Sabhal Mòr Ostaig UHI
- e. One senior member of staff to represent UHI North, West and Hebrides
- f. The scheme leader for the Gaelic and Related Studies Scheme, *ex officio*
- g. Head of Marketing and Planning, or a senior member of the team nominated by the Head, *ex officio*
- h. One member of the University Court
- i. One student member from among the registered students, elected by the students' association
- j. One member of staff from each of the academic partners, other than UHI North, West and Hebrides and Sabhal Mòr Ostaig UHI, where the Principal wishes to nominate a member.



Academic Standards and Quality Regulations 2025-26  
Academic committees

At the discretion of the Comataidh Ghàidhlig, practitioner sub-groups may be formed to progress business between meetings. These sub-groups will focus on operational activities and will meet at a minimum of three times a year. External specialists may be invited to join sub-groups on a temporary basis to provide input and advice on specific issues.

3.4.4 Frequency of meetings:

The Comataidh Ghàidhlig shall meet no fewer than three times a year.

3.4.5 Terms of office:

All appointed members, including the chair, shall be appointed in the first instance for a period of two years. Appointments may be renewed for a further two-year period.



## **External Partnerships Steering Committee**

3.5.1 The External Partnerships Steering Committee (EPSC) is responsible to Academic Council for overseeing collaborative activity both in the UK and overseas in accordance with agreed university strategies. It is responsible for formulating policy and practice in relation to management of collaborative provision and partnerships with external institutions and other organisations, and for approving proposals for collaborative activity.

3.5.2 EPSC reports directly to Academic Council, with additional reporting lines as appropriate to the Partnership Council, Quality Assurance and Enhancement Committee and Faculty Boards.

3.5.3 Terms of reference:

1. To advise Academic Council on all aspects of external collaborative partnerships and provision both within the UK and overseas
2. To develop, monitor and evaluate policies and processes for external collaborative and partnership arrangements with reference to sector guidance and good practice, and make recommendations to Academic Council as appropriate
3. To make recommendations to Academic Council on the procedures and processes for the endorsement, monitoring, withdrawal from and review of external partnerships and collaborative programmes
4. To assess and endorse proposed external partners and collaborative programmes based on the conduct of proportionate due diligence enquiries and risk assessment protocols
5. To receive periodic quality review documentation relating to collaborative programmes identifying strengths, areas for development and any planned actions
6. To receive reports relating to international partnership recruitment trends, including transnational education (TNE) activity.

3.5.4 Scope:

The scope of the External Partnerships Steering Committee will cover any collaborative partnership or contractual activity relating to the management and / or delivery of higher education learning opportunities with another institution or organisation. Types of activity include:

- Joint and dual awards (including postgraduate research awards)
- External validation and franchise arrangements
- Joint delivery arrangements
- Articulation and progression agreements
- Student exchange and study abroad agreements
- Credit rating at SCQF Level 7 and above
- Training, CPD and / or skills development activities at higher education level which is non-credit bearing.

Where a collaborative partnership or contractual activity does not relate to higher education provision, but there is potential reputational and / or regulatory risk for the university and / or academic partners, the role of External Partnerships Steering Committee will be advisory and will require information to be provided in the interests of transparency within the partnership and in order to evaluate the cumulative and collective risk.



EPSC's scope does not include collaborative partnerships or contractual activity which deal solely with research, consultancy or knowledge exchange / transfer activities or further education provision.

3.5.6 The membership of External Partnerships Steering Committee is:

- a. Chair: Deputy Principal (academic and research) or nominee, *ex officio*
- b. Deans of Faculty, *ex officio*
- c. Dean of Research and Innovation, *ex officio*
- d. Four senior managers from academic partners (nominated by the principal of that academic partner), on a cross-partnership, rotating two-year appointment basis
- e. Head of Academic Standards and Enhancement, *ex officio*
- f. Head of International Student Recruitment, *ex officio*
- g. Admissions Manager, *ex officio*.

In attendance:

- Committee Secretary
- Marketing and Communications representative
- Others as appropriate to the business of the Committee.

Meetings will be deemed quorate with the attendance of at least one-third of the academic partner members.

3.5.7 Frequency of meetings:

The External Partnerships Steering Committee shall meet no fewer than five times a year.



### Quality Assurance and Enhancement Committee

3.6.1 The Quality Assurance and Enhancement Committee (QAEC) is responsible to Academic Council for monitoring all activity being reported to Academic Council through the subcommittee / faculty / practitioner group structures.

3.6.2 Remit:

1. To monitor and ensure compliance with/coordination of all formal quality assurance and regulatory requirements, and including institutional audit (Enhancement-led institutional review and such other forms of higher education institutional audit as may be imposed upon the university regional model)
2. To ensure that key initiatives/projects agreed by Academic Council are progressed as required
3. To make proposals to Academic Council in relation to emerging priorities and opportunities (identified through the activities listed below) which cannot be dealt with through and/or with the authority of existing groups
4. To develop and monitor learning and teaching and student experience strategies
5. To ensure (through key performance indicators and outcomes of specific projects or interventions) progress against relevant targets within the higher education outcome agreement
6. To promote quality assurance and quality enhancement as key features of the university's operation and to ensure that academic quality and standards inform relevant areas of institutional development
7. To maintain oversight (through monitoring of key performance indicators and outcomes of internal reviews, annual monitoring, validations, student surveys etc) of quality enhancement requirements and ensure that these are addressed by appropriate groups and processes
8. To ensure that all significant quality issues or concerns relating to student experience or curriculum are appropriately resolved
9. To coordinate engagement with relevant stakeholder groups, agencies, sectoral initiatives and fora, and to ensure that the university strategically places itself to best effect to address any developing regional or national developments relating to higher education quality assurance and/or enhancement.

3.6.3 The membership of Quality Assurance and Enhancement Committee is:

- a. Chair: Dean of Learning, Teaching and Students, *ex officio*
- b. Deputy Chair: Head of Academic Standards and Enhancement, *ex officio*
- c. Head of Further Education, *ex officio*
- d. Deans of Faculty, *ex officio*
- e. Head of Student Experience, *ex officio*
- f. Dean of Research and Innovation, *ex officio*
- g. Research Degrees Committee representative, *ex officio*
- h. Head of Academic Practice Development, *ex officio*
- i. Quality Framework and Enhancement Lead, *ex officio*
- j. Chair of Quality Forum, *ex officio*
- k. Up to two further academic partner representatives from senior/middle management with learning and teaching responsibilities nominated by/drawn from Academic Council



Academic Standards and Quality Regulations 2025-26  
Academic committees

- l. Two Quality Managers nominated by Quality Forum
- m. Academic partner representative with lead SQA responsibility
- n. HISA President or nominee, *ex officio*
- o. Chair of Regional Information and Communication Technologies Committee, *ex officio*
- p. Quality Assurance and Enhancement Coordinator (clerk), *ex officio*.

In attendance:

- University Librarian, *ex officio*
- HISA staff member
- Faculty Liaison Lead, *ex officio*
- Two Associate Deans, one from each faculty
- Senior Executive Team (SET) member with overall responsibility for QAEC.

In addition, other staff may be invited to join the group on a temporary basis where relevant to significant time-limited agendas.

#### 3.6.4 Frequency of meetings:

The Quality Assurance and Enhancement Committee shall meet no fewer than six times a year.

#### 3.6.5 Terms of office:

Appointed members shall be appointed, in the first instance, for a period of three years. Appointments may be renewed for a further three-year period. No appointed member shall be appointed to periods of office which amount to continuous office for a period of seven or more years. Student representatives shall hold membership for one year, which may be renewed for a further year.



## Research and Knowledge Exchange Committee

3.7.1 The Research and Knowledge Exchange Committee (RKEC) shall, subject to the overall authority of Academic Council and within the budgetary framework set by the Partnership Council and approved by the Finance and General Purposes Committee (FGPC) of the University Court, formulate a research development plan.

3.7.2 The Research and Knowledge Exchange Committee develops and promotes the university's strategy for research, knowledge transfer and commercialisation. It also audits and monitors the quality and compliance of research.

3.7.3 Terms of reference:

1. to endorse university strategy for research and knowledge exchange for approval at academic council and partnership council as appropriate taking full account both the external and internal environment for research and knowledge exchange
2. to endorse research and knowledge exchange policies and procedures for recommendation to academic council and partnership council as appropriate
3. in relation to the Research Excellence Framework (REF), to decide on key institutional approaches to preparation, drawing on the work of the REF Steering Group
4. to endorse the draft REF submission for progression to Academic Council and institutional sign-off
5. to monitor achievement against key performance indicators pertaining to research and knowledge exchange activity, including University Innovation Fund (UIF)
6. to receive operational plans from the Deans of Faculty pertaining to research and knowledge exchange and provide advice and support as appropriate
7. within available budgets for research and knowledge exchange, where appropriate consider options for the deployment of resources to support research and knowledge exchange
8. to endorse proposals for new research centres and institutes from time to time.

3.7.4 The membership of Research and Knowledge Exchange Committee is:

- a. Chair: Deputy Principal (academic and research), *ex officio*
- b. Dean of Research and Innovation, *ex officio*
- c. Deans of Faculty, *ex officio*
- d. Head of Research Culture and Environment, *ex officio*
- e. Four Research Cluster Chairs (one from each cluster, nominated member to be agreed by the cluster conveners where the cluster is jointly convened)
- f. Two Knowledge Exchange Officers
- g. Four Professors of the University, not represented in other membership categories (election to be held every two years, commencing in time for 2024/25)
- h. Two Chairs of Academic Partner Research/Knowledge Exchange Committees (on a two-year rotating basis. 2023/24 being the first year of the new cycle)
- i. Two Research active academic staff, not represented in other membership categories (election to be held every two years, commencing in time for 2023/24)
- j. One PGR student (as a HISA representative)
- k. Two observers (at Chair's discretion)
- l. Three in Attendance as required (at Chair's discretion)



m. Research Administrative Officer (Clerk), *ex officio*.

#### 3.7.5 Frequency of meetings:

The Research and Knowledge Exchange Committee shall meet no fewer than four times a year.

#### 3.7.6 Terms of office:

The Deputy Principal (academic and research) shall be *ex officio* Chair of the Research and Knowledge Exchange Committee. The Committee shall appoint a deputy chair. Members appointed shall be appointed in the first instance for a period of four years unless otherwise stated. Appointments may be renewed for a further four-year period. No appointed member shall be appointed to periods of office which amount to continuous office for a period of eight or more years. Renewal of appointment should, in the first instance, be made with a view to establishing a 'rolling' membership.



## Research Degrees Committee

3.8.1 The Research Degrees Committee (RDC) is responsible to Academic Council for overseeing admission, registration, support, progression, examination and awards in respect of research students.

3.8.2 Remit:

1. To oversee admission, registration, progression, examination, and awards in respect of research students, including:
  - a. to approve research student applications
  - b. to consider reports relating to progress monitoring of research students
  - c. to approve requests relating to changes in terms of study (eg, extensions and suspensions)
  - d. to approve membership of examination panels
  - e. to approve recommendations of examination panels for the award of research degrees
2. To oversee support of research students and supervisors, including:
  - a. to monitor and review policies and procedures relating to research students
  - b. to monitor and review research student support issues
  - c. to maintain oversight of skills training for research students and training for staff in research supervision
  - d. to maintain oversight of research students' complaints and appeals
3. To oversee the approval and re-approval of academic research areas and to monitor and report on the meeting of any established conditions
4. To oversee the monitoring of quality assurance and enhancement and to take appropriate action on related issues as required
5. To consider and review strategies for recruiting and retaining research students with high potential.

3.8.3 The membership of Research Degrees Committee is:

- a. Chair: Dean of Research and Innovation, *ex officio*
- b. At least five active, or recently active, research supervisors (with at least one representative from each of Science and Engineering, Health and related subjects, Arts and Humanities, Social Science)
- c. Associate Deans (or representative), *ex officio*, one per faculty as named lead
- d. One external representative from a HEI
- e. Up to two postgraduate research student representatives
- f. Chair of the Graduate School Committee, *ex officio*
- g. Research Support Officer, *ex officio*
- h. Deputy Principal (academic and research), *ex officio*
- i. Head of Academic Standards and Enhancement, *ex officio*.

In attendance:

- Graduate School Officer (Committee Secretary), *ex officio*.

A meeting will be declared quorate with the attendance of one third of the membership, but this also requires at least two members from the following to be present: Dean of Research and



Academic Standards and Quality Regulations 2025-26  
Academic committees

Innovation, research supervisors, external representative, Chair of the Graduate School Committee.

3.8.4 Frequency of meetings:

The Research Degrees Committee meets formally approximately every six weeks. However, as business dictates, the Committee also meets virtually (by electronic means) outwith the cycle of formal meetings, as required.

3.8.5 Terms of office:

- a. The research supervisor members will hold office for three years, with the possibility of a three year extension, following which they must stand down from office for a period of not less than one year
- b. The PGR student representatives shall normally hold their membership for eighteen months – two years (up to a maximum of two years)
- c. The external representative shall hold office for three years in the first instance, with the possibility of a three year extension, following which they will be required to stand down from membership
- d. All members (as defined in section 3.7.3) are entitled to vote on matters requiring the Committee's decision. The Chair retains the casting vote, if required.

3.8.6 Reserved business:

Where the work of the committee concerns the progress of individual students, this will be classed as 'reserved business'. Students will be asked to leave the committee at this point. Issues of general concern to research students will form the first part of each meeting of the committee.



## Faculty Boards

### 3.9.1 The university has two Faculty Boards:

- Arts, Humanities, Business and Education
- Science, Health and the Environment.

Each Faculty Board has a tertiary remit which covers further education, higher education, research and knowledge exchange.

Faculty Boards report directly into Academic Council. For the Faculty Boards to be able to implement their approved role and remit it is essential that they have a clear line of accountability.

### 3.9.2 Remit:

1. To agree and oversee a (3–5 year) rolling tertiary faculty strategic plan, aligned with the UHI Strategic Plan, the UHI's Research Plan and the Strategic Plans of the Academic Partners. The plan should articulate ambition for further education, higher education, research and knowledge exchange and should be refreshed annually to align with key drivers
2. To oversee the approval and withdrawal of higher education academic provision under the university's degree awarding powers, and to monitor and report on the meeting of any established conditions
3. To advise on the development of UHI's further education strategy
4. To liaise with relevant external bodies and communities to identify external drivers and horizon scan to inform planning at all levels within the university
5. To take a high-level approach to consideration of quality measures, enrolments and other KPIs and to receive reports on achievement against key performance indicators pertaining to research and knowledge exchange activity from RKEC
6. To monitor and take appropriate action on quality assurance and enhancement issues
7. To set the faculty priorities for quality enhancement activity
8. To make recommendations for changes to policies/processes that are outwith the remit of Faculty Board (eg that might enhance delivery of academic activity or address identified issues) in the context of relevant two-way relationship with other university committees
9. To homologate decisions from Joint Faculty Executive for the appointment of suitable external examiners for higher education awards
10. To approve the membership of relevant boards of examiners
11. To maintain oversight of the Joint Faculty Executive and ratify its decisions.

### 3.9.3 The membership of each Faculty Board is:

- a. Chair: Dean of Faculty, *ex officio*
- b. Associate deans within the Faculty, *ex officio*
- c. Dean of Research and Innovation, *ex officio*
- d. Dean of Learning, Teaching and Students, *ex officio*
- e. Head of Further Education, *ex officio*
- f. Academic partner representation at senior management team level (one from each academic partner)



Academic Standards and Quality Regulations 2025-26  
Academic committees

- g. One academic lead representing specialist academic provision, where required by a professional body (for example nursing)
- h. Research cluster leads for each cluster aligned with the Faculty
- i. Knowledge exchange officer, *ex officio*
- j. HISA President, *ex officio*, or representative
- k. Professional services representative, *ex officio*
- l. Other co-opted members at the discretion of the Dean.

Nominations for membership shall be made to the dean. Other individuals, as appropriate or necessary, may also attend Faculty Board, at the invitation of the chair.

3.9.4 Frequency of meetings:

The Faculty Board shall meet no fewer than three times a year.

3.9.5 Terms of office:

All members, except *ex officio* members and student members, shall normally hold membership for three years.

3.9.6 Representation on other committees:

The Faculty Dean will receive papers from the formal committees sitting within the faculty structure and have the ability to sit on and attend all associated committees.



### Joint Faculty Executive

- 3.10.1 The university recognises that for Faculties to deliver on their allocated functions there may be tasks that are most effectively, consistently and efficiently delivered upon jointly. This will be a subcommittee of the two Faculty Boards with appropriate delegated authority.

The Joint Faculty Executive will report to both Faculty Boards.

3.10.2 Remit:

1. To consider requests for modifications to degree programmes and decide upon the appropriate approval route, based on the level of risk within the proposal
2. To endorse recommendations for the appointment of suitable external examiners for higher education awards
3. To receive external examiner reports for higher education awards and approve faculty responses
4. To receive update reports pertaining to further education performance from time to time, especially performance against credit targets, including apprenticeships
5. To receive update reports from time to time pertaining to research and knowledge exchange, including grant capture, innovation vouchers and knowledge transfer partnerships.

3.10.3 The membership of Joint Faculty Executive is:

- a. Chair: Faculty Deans (chaired on rotation), *ex officio*
- b. Associate deans, *ex officio*
- c. Head of Academic Standards and Enhancement, *ex officio*
- d. Faculty liaison advisors, *ex officio*
- e. Any co-opted members at the discretion of the Deans of Faculty.

The Dean of Learning, Teaching and Students, the Dean of Research and Innovation and the Head of Further Education may be asked to attend Joint Faculty Executive meetings for specific items.

3.10.4 Frequency of meetings:

The Joint Faculty Executive shall meet monthly.



**Cognate Subject Group Committee (one per Cognate Subject Group)**

3.11.1 The cognate subject groups report to their respective faculty board. Associate deans are responsible for setting the agenda and schedule of meetings.

3.11.2 Remit:

1. to act as the formal body for communication and consultation for staff and students in the curriculum area
2. to develop and oversee an ambitious outcome focussed rolling operational plan, updated annually, which identifies key internal and external drivers, operationalises the faculty level academic plan, to include development of academic communities at further education and higher education, research/knowledge exchange and implementation of the Learning and Teaching Enhancement Strategy
3. to co-ordinate and plan curriculum development and delivery within the curriculum area across the partnership, including acting as consultation body for proposals for new curriculum or major modifications to existing curriculum
4. to endorse the development of new curriculum areas, of curriculum modification and retiral at higher education for approval at academic planning committee, and noting at faculty board, recognising that the locus of academic planning for further education currently resides in the academic partners
5. to monitor enrolments on tertiary pathways and promote progression links for example from further to higher education programmes
6. to monitor the operationalisation of quality assurance processes for further education and higher education
7. to receive reports from all relevant research clusters and knowledge exchange groups
8. to promote tertiary planning for activity in key sectors
9. to promote research - teaching linkages and scholarship
10. to monitor and report on KPIs for the cognate area and escalate any areas of concern to QAEC and Faculty Board as appropriate
11. to agree the number and form of any operational groups or fora which are required within the CSG, to receive regular reports.

3.11.3 The membership of the Cognate Subject Group Committee is:

- a. Chair: Associate Dean, *ex officio*
- b. One Research Cluster Lead for each relevant cluster
- c. A curriculum and/or research manager from each academic partner, as appropriate
- d. One academic lead representing specialist academic provision, where required by a professional body (for example nursing)
- e. One quality manager representative
- f. Faculty liaison advisor
- g. One HISA representative
- h. Any co-opted members at the discretion of the Associate Dean.

It is anticipated that the Head of Academic Standards and Enhancement will attend cognate subject group committees from time to time for specific agenda items.

3.11.4 Frequency of meetings:



Academic Standards and Quality Regulations 2025-26  
Academic committees

A minimum of three times per year, with special areas of focus at each meeting, and additional members invited as appropriate at individual meetings.



**Research Cluster Management Group (one for each research cluster)**

3.12.1 The research cluster management groups report to their respective cognate subject group committee. Research Cluster Leads are responsible for setting the agenda and schedule of meetings, and have representation on Faculty Board and Research and Knowledge Exchange Committee.

3.12.2 Remit:

1. to foster cross partner interdisciplinary research
2. to contribute to the institutional research strategy and faculty and cognate subject group plans
3. to identify opportunities for the enhancement of research/teaching linkages
4. to enhance research environment and culture
5. to create meaningful links between research and the knowledge exchange sector groups, to encourage impactful research in the key sectors aligned with research clusters
6. to support and nurture potential agreed new areas of research strength, where these are deemed to have strategic priority, and encourage the further development of existing areas
7. to agree a yearly programme of interdisciplinary research seminars for staff and students in liaison with the research centres and institutes aligned with each faculty
8. to facilitate research bid development and growth, and monitor agreed PIs for this
9. to support and facilitating public engagement and involvement in research
10. to support growth in research student numbers and experience
11. to support REF plans and implementation
12. to monitor the deployment of agreed resources
13. to monitor agreed PIs for the knowledge exchange sector groups assigned to the research cluster.

3.12.3 The membership of the Research Cluster Group is:

- a. Chair: Research Cluster lead, *ex officio*
- b. Associate Dean, *ex officio*
- c. Head of Research Environment and Culture, *ex officio*
- d. Knowledge Exchange Group Leads
- e. Nominated leads for key activities as decided by the cluster lead (e.g. REF, PGR, ECR etc)
- f. Any co-opted members at the discretion of the Cluster Lead.

3.12.4 Frequency of meetings:

Four meetings per year but increased where appropriate and needed, at the discretion of the cluster lead. Additionally research cluster leads consider the balance between a small management group that can drive and action changes and a wider steering group that can participate and contribute to thinking through initiatives and enhancing the sense of shared ownership of plans.



### **Academic Partner Quality Committee**

3.13.1 Each academic partner shall establish an Academic Partner Quality Committee (APQC) with responsibility for monitoring the academic standards and the quality of academic provision and SQA higher education programmes, modules and units delivered by the academic partner.

3.13.2 Remit to include:

1. To implement the procedures and maintain the academic standards and quality of programmes, modules and units delivered within the academic partner and in any location where the academic partner delivers any part of the university curriculum
2. To engage with the faculties, cognate subject groups and other partnership bodies in the management and further development of higher education curriculum, learner experience and staff development
3. To submit any relevant information to the Quality Monitoring Group, prior to annual monitoring meetings relating to the quality assurance and enhancement of curriculum and learner experience
4. To receive reports on approval, review and monitoring of higher education provision and to ensure that appropriate action is taken
5. To promote good practice in quality assurance and enhancement within the academic partner.

3.13.3 The membership of the Academic Partner Quality Committee shall include:

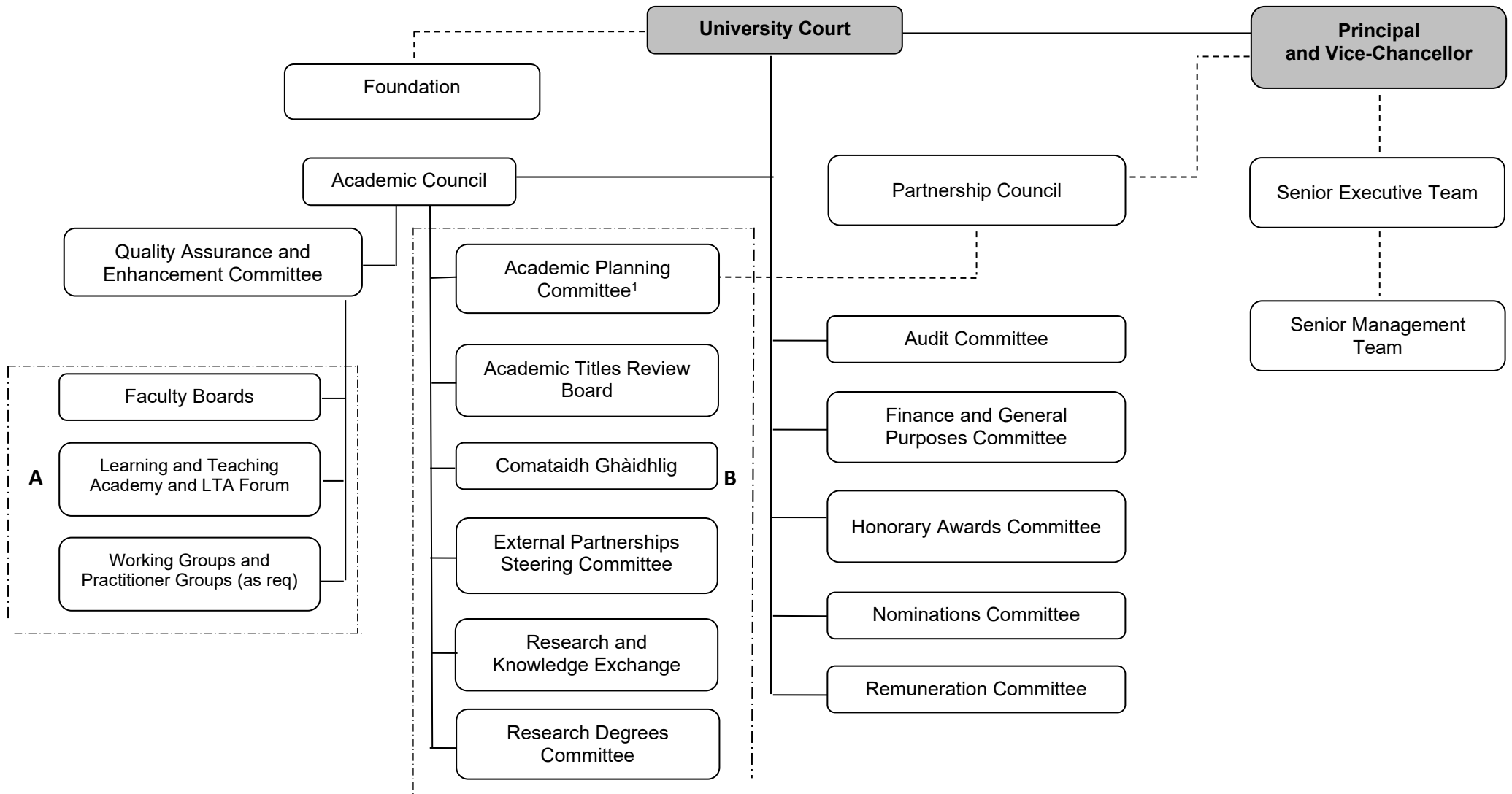
- a. The member of the academic partner's senior management responsible for quality matters
- b. Representative of each academic unit within the academic partner
- c. Representative from student learning support
- d. At least one student representative.

3.13.4 Frequency of meetings:

The Academic Partner Quality Committees shall meet no fewer than three times a year.



## University committee structure



### Footnotes

1 Also reports to other committees: Academic Planning Committee to Partnership Council.

A Primarily reports to Academic Council through Quality Assurance and Enhancement Committee.

B Primarily reports direct to Academic Council.



## **4 SUBJECT AREA REVIEW AND STUDENT SUPPORT SERVICE REVIEW**

---

### **Introduction**

- 4.1 Subject area reviews and service reviews form one element within the university's quality framework. These operate in conjunction with other elements to provide assurance to the university and to external stakeholders of the standards of awards and of the quality of the student learning experience provided within the university. The primary processes for assurance of academic standards are programme approval / reapproval and annual monitoring.
- 4.2 The purpose of subject area / service review is to provide periodic in-depth reflection on, and analysis of, the ways in which the quality of students' learning experiences is being managed and enhanced throughout the subject area or service provision and its supporting structures.
- 4.3 The reviews will make evidence-based judgements on how effective the academic management processes, teaching and learner support across the subject area / service area, and the extent to which they sustain a culture of ongoing reflection and enhancement. The panel will explore with subject area / service teams how issues and initiatives already identified through other quality monitoring and approval processes are being progressed. The panel may make recommendations on how the subject area / service might further develop or be supported and will identify areas of good practice for sharing within the university.
- 4.4 The review process will refer to the expectations and core and common practices of the UK Quality Code for Higher Education and other external reference points.
- 4.5 The subject area / service review process and outcomes are subject to scrutiny by QAA through Enhancement-led Institutional Review (ELIR). The ELIR team will examine how the university uses the review process effectively to manage and enhance the quality of provision, and to what extent the process meets sector-wide expectations. This includes how subject area / service reviews link to other quality processes, such as annual monitoring, approval and reapproval. Particular attention will be given to how the university addresses and monitors the outcomes of reviews, and what actions are taken as a result. The university will draw on evidence of subject area / service reviews in producing its self-evaluation for ELIR.

### **Scope of subject area review**

- 4.6 The scope of a subject area review will include all taught higher education provision within an agreed subject area, including postgraduate awards, HN programmes, continuing professional development (CPD), collaborative and trans-national education (TNE) provision, online and distance learning and provision which provides only small amounts of credit.
- 4.7 The review will also examine areas that have specific relevance to the university, such as the delivery of SQA programmes, articulation arrangements, and the management of the student learning experience for dispersed groups of students. It will look at the ways in which quality is enhanced, identify practice that others might learn from and how this might be disseminated more widely. It will also support reflection on the strategic development of the subject area.



### **Scope of student support service review**

- 4.8 The scope of each student support service review will include all activities within that service which are student-facing and/or intended to enhance the student learning experience. The scope will cover the relevant service across all academic partners, however it is provided and resourced, recognising that such services will support both HE and FE students.

### **Frequency of subject area / service review**

- 4.9 Subject area reviews will normally be conducted on a six-year cycle, with the schedule of activity determined by Quality Assurance and Enhancement Committee (QAEC).
- 4.10 Service area reviews will normally take place on a biennial basis, with the focus of review determined by QAEC based on analysis of institutional enhancement priorities. Where appropriate, one or more student support services may be reviewed jointly.

### **Relationship to other quality processes**

- 4.11 Subject area and service reviews form one element within the university's quality framework. They are intended to draw on the outcomes of other quality processes, such as annual monitoring and programme (re)approval, as well as to feed into them.

### **Principles of subject area / service review**

- 4.12 The subject area / service review process is based on the following principles:
- the review will be based on a self-evaluation undertaken by the subject area / service, making appropriate use of performance indicators, student feedback and student data
  - the review will draw on and inform other quality processes
  - the review panel will include external representatives and a student member
  - the review will be open and based on a process of peer review
  - the process of review will engage staff and students from the subject area / service
  - the review will be flexible in scope to accommodate the characteristics of the subject area / service
  - the review will be conducted so as to be enhancement-focussed, for the subject area / service, and the university as a whole.

### **Preparation for reviews**

- 4.13 Planning and preparation for subject area / service review will begin the year before the review takes place. The review will take into account the characteristics of the subject area / service, and staff may identify any particular topics for exploration during the review. There will also be consultation on preferences for the composition of the review panel and the timing of the review within the academic session.
- 4.14 It is the responsibility of the subject area lead / nominated service review co-ordinator to co-ordinate the writing of the self-evaluation document and to lead the preparations for review. Support in preparing for the review will be provided by Academic Standards and Enhancement.



4.15 Staff from every academic partner offering provision within the subject area will be required to contribute to the preparations for subject area review and the self-evaluation document.

4.16 Staff from every academic partner will be required to contribute to the preparations for service review and the self-evaluation document.

### **Self-evaluation document and supporting documentation**

4.17 The main document required for subject area / service review will be the self-evaluation document (SED): a single SED will be produced for each subject area / service undergoing review. The SED forms the basis of the review, and the review panel will explore the statements made in dialogue with staff, students and other stakeholder groups. The SED should demonstrate a process of reflection and analysis, identifying areas of strength and good practice, as well as areas for development, and any activities in place to address these. Guidance on producing the SED and supporting documentation will be provided to teams.

4.18 The subject area SED should demonstrate that the subject area has evaluated:

- its own strategic priorities and objectives, and the extent to which these align with institutional strategic plans, policies and objectives
- its approach to enhancement of the student learning experience
- its approach to enhancement of learning and teaching, including staffing and staff development, quality of learning resources
- its approach to managing quality and academic standards, including the extent of alignment with external reference points and other benchmarks, and the effectiveness and outcomes of other quality processes.

4.19 The service SED should demonstrate that the service has documented and evaluated:

- the provision and structure of the service
- the service's routine or annual monitoring processes
- notable recent developments and achievements
- the extent of alignment with external reference points and other benchmarks
- the engagement with students and other stakeholders
- the service's impact on the student learning experience
- the professional development of staff contributing to the service
- the quality of resources (for staff contributing to the service and for students).

### **Review panels**

4.20 Subject area review panel composition will take account of the range and volume of provision within the subject area. The review panel will normally include:

- a. a senior member of university staff, who will chair the review
- b. at least one external member with a relevant subject background, from another UK university or college
- c. one or two academic staff, such as associate dean or programme leader from another subject area
- d. a senior manager from an academic partner eg curriculum manager from an unrelated subject area, quality manager
- e. a student member, from another subject area
- f. an administrative officer.



- 4.21 Service review panel composition will take account of the scope and characteristics of the student support service. The review panel will normally include:
- a. a senior member of university staff, who will chair the review
  - b. up to two external members: senior service managers with relevant experience from another UK university or college
  - c. two internal members of staff: staff with management-level expertise in any student-facing service (other than the service under review), including managers with a mixed remit
  - d. a student member
  - e. an administrative officer.
- 4.22 Where a review is particularly large or complex, the chair may decide that additional academic or specialist expertise is required on the panel.

### **Review process**

- 4.23 The review will be conducted through:
- a. analysis of the SED and supporting evidence as referenced in the SED. Review teams may request access to additional documentation
  - b. discussion with subject area / service staff and relevant senior managers to explore issues arising from the documentary evidence, and issues that they wish to raise
  - c. discussion with students, normally including a range of students enrolled at different academic partners and enrolled on different programmes
  - d. discussion with employers, professional bodies and / or graduates.
- 4.24 It is not expected that staff from every academic partner will necessarily meet with the review panel, however, there should be a sufficient mix of participants to represent the range of curriculum provision or student support activities, and the contexts in which they are delivered.
- 4.25 The review process will normally be conducted wholly online, to enable engagement by a wide range of participants and remove geographical or other barriers to participation.
- 4.26 The reviews will be organised and supported by Academic Standards and Enhancement and overseen by QAEC.

### **Outcomes and follow up**

- 4.27 The review panel is likely to make a number of enhancement-focused recommendations on how the subject area / service might further develop or be supported, and will identify areas of good practice for sharing within the university. The panel may also identify requirements, which must be actioned accordingly. Recommendations and requirements may be either for the subject area / service team itself, or with wider applicability across the institution, which will be referred to QAEC for consideration in the first instance. Initial outcomes will be drafted within one week of the event.
- 4.28 The review report will be drafted within eight weeks of the event and the subject area / service team invited to check the report for factual accuracy prior to publication. The report will be presented to QAEC and published internally.



- 4.29 Within three months of the review, an initial action plan will be drafted by the subject area lead and Dean of Faculty or the service review co-ordinator, addressing all requirements and recommendations identified in the report, which will be presented to QAEC for discussion. Where institution-level recommendations are identified, QAEC will refer the issue to the appropriate accountable lead or committee, and will be responsible for monitoring progress.
- 4.30 The subject area lead / service review co-ordinator will be required to submit a follow-up report one year after the review event setting out how recommendations and any requirements have been addressed. This will be discussed at a formal meeting between the chair of the review panel, the chair of QAEC, the Dean of Faculty and the subject area lead / service review co-ordinator. The follow-up report will be presented to QAEC for discussion and approval, although QAEC may require further assurances or actions prior to approval.



## **5 ANNUAL QUALITY MONITORING**

---

### **Introduction**

- 5.1 Annual quality monitoring processes collectively provide a means of assuring the standards and quality of the university's provision, and seek to enhance the quality of the student learning experience. Within a devolved quality management framework, they enable the university to manage quality assurance and enhancement at an institutional level and in line with national expectations. The processes seek to encourage development of a reflective, open and analytical approach, to facilitate managed risk-taking in relation to curriculum development and quality enhancement, and to ensure rapid identification and mitigation of quality assurance issues.

### **Scope**

- 5.2 The provisions of this section apply to all taught provision offered to registered students, including that validated by SQA, other HEIs and awarding bodies.

### **Objectives**

- 5.3 The objectives of these processes are:
- a. to ensure that taught provision is delivered in line with the requirements of approval
  - b. to ensure that quality issues relating to curriculum and delivery are identified and acted upon at appropriate levels
  - c. to encourage engagement with institutional and national enhancement themes
  - d. to identify examples of good practice in curriculum and delivery and ensure that these are disseminated
  - e. to enable staff to contribute to the ongoing development and enhancement of provision.

### **Principles**

- 5.4 Quality monitoring processes are based on the following principles:
- a. the core of all processes is reflection on the student learning experience and the ongoing enhancement of curriculum and student support
  - b. the cycle includes annual engagements with representatives from all cognate subject groups / departments and all academic partners, conducted by a Quality Monitoring Group (QMG) comprising internal and, where deemed beneficial, external membership
  - c. the processes are transparent, with all reports being made available to all staff
  - d. the evidence base for evaluation depends on analysis of key performance indicators (KPIs) derived from a robust dataset
  - e. target and objective setting for cognate subject groups / departments, academic partners and the university enables systematic monitoring and evaluation
  - f. outcomes from annual quality monitoring will feed into subject area review
  - g. these processes do not obviate the responsibility of programme teams and academic partners to address emerging quality assurance issues immediately, where this is practicable.



## Responsibility

- 5.5
- a. overall responsibility for quality monitoring rests with Quality Assurance and Enhancement Committee (QAEC) acting, subject to other awarding body requirements in respect of their awards, on behalf of Academic Council
  - b. the first line of responsibility for programme monitoring is carried by programme leaders, working in conjunction with all Home Academic Partners (HAPs)
  - c. module leaders are responsible for submitting a self-evaluation document (SED) at the end of the semester of delivery
  - d. programme leaders are responsible for submitting a self-evaluation document (SED) annually on behalf of the programme committee (or equivalent structure)
  - e. in the case of SQA programmes, the named contact at each site of delivery is responsible for submitting a site-specific SED for that programme. Where the programme is formally networked, a single overarching SED from the programme leader should be submitted
  - f. Associate deans / department leads are responsible for submitting a SED covering all provision within the area
  - g. QMG will meet with each cognate subject groups / department and each academic partner to discuss relevant issues and will report to QAEC and other committees as appropriate.

## Quality monitoring process

- 5.6 The annual quality monitoring process and indicative timescales are as follows:

Month	Annual quality monitoring process
<b>February</b>	Degree module leaders submit semester 1 module-level SEDs to quality monitoring officer and 'lead' programme leader. To be taken to exam boards to inform external examiners.
<b>June</b>	Degree module leaders submit semester 2 module-level SEDs to quality monitoring officer and 'lead' programme leader. To be taken to exam boards to inform external examiners.
<b>August</b>	UHI Principal receives reports from external examiners. UHI Head of Academic Standards and Enhancement acknowledges receipt of report and advises the programme leader, quality manager, chair of exam board, chair of academic partner quality committee (APQC) and dean of its availability.
<b>September</b>	Appropriate KPI data available to academic staff via university systems. Programme leader produces programme-level SED (drawing on external examiners' reports, KPI data, feedback from students and staff, and external feedback as appropriate), ensuring that site-specific issues are addressed for networked programmes, and sends SED to quality monitoring officer, associate dean and quality managers. Similar processes operate for SQA programmes. Faculty sends response to external examiner(s), copied to faculty officer, quality manager and associate dean (degree programmes only).
<b>October</b>	Associate dean / department lead sends SED to QMG via quality monitoring officer. APQCs consider programme-level SEDs.



Academic Standards and Quality Regulations 2025-26  
Annual quality monitoring

Month	Annual quality monitoring process
	All module, programme and cognate subject group / department SEDs available to all academic staff and quality managers.
<b>November / December</b>	QMG members meet with each associate dean / department lead and colleagues to discuss issues raised in the SED and any other issues brought forward by either party. QMG produces written report of each meeting, to be approved by associate dean / department lead.
<b>December</b>	QMG produces overarching document on completion of all dialogue meetings, drawing out common issues and good practice. All reports made available to all staff.
<b>January / February</b>	Internal members of QMG meet with senior representatives (usually the quality manager) from all academic partners and cognate subject groups / departments to discuss issues relating to student support and infrastructure, meetings or identified through any other mechanism, and any issues brought forward by the academic partners. Issues for further action will be considered by QAEC.
<b>February / March</b>	QAEC consider reports and agree specific actions / responsibilities in light of recommendations.

*Table 2: Annual quality monitoring process*

### Self evaluation documents

- 5.7 Detailed guidance and proformas will be made available for each type of self-evaluation document (SED) required within the quality monitoring process and these will be kept under review.
- 5.8 Module / programme / cognate subject group / department self-evaluation documents:
- should focus on issues relating to the curriculum and the student experience and make appropriate reference to the KPI data available via university systems
  - should be reflective / evaluative, while summarising key points concisely
  - should, as far as possible, be drafted in a manner which is inclusive of the teaching team and supporting academic partners (including quality and curriculum management teams)
  - should clearly indicate the locus (eg programme, module, delivery site) of issues of concern or good practice, while avoiding naming individuals
  - will be made available to all staff.

### Annual meetings and outcomes

#### Quality monitoring dialogue meetings

- 5.9 The meetings will be organised and supported by Academic Standards and Enhancement. At each meeting there will be a minimum of three members of QMG, including an officer or representative from Academic Standards and Enhancement and (where deemed beneficial) an external member to review particular subject areas.



Academic Standards and Quality Regulations 2025-26  
Annual quality monitoring

- 5.10 The principal documentation required for the meeting will be the SED, although other existing documents may be used.
- 5.11 The meeting will be attended by the associate dean / department lead plus other staff representatives. Normally, this should not exceed a total of six individuals.
- 5.12 The purpose of the meeting will be to discuss issues raised in the SED and any other issues brought forward by either party. During the meeting, there will be discussion and agreement of QA / QE / curriculum-related targets and objectives for the cognate subject group / department for the next 12 months. There may also be recommendations and actions identified for referral elsewhere, including committees, academic partners and executive office.
- 5.13 A report will be drafted within two weeks of the meeting and sent to the associate dean / department lead for comment. Once approved, all reports will be made available to all staff.
- 5.14 As well as the individual reports, QMG will produce a summary institution-level report, drawing out common issues and good practice, and recommendations for action.

**Academic partner meeting**

- 5.15 The meeting will be attended by all academic partner quality managers, internal members of QMG, and associate deans / department leads.
- 5.16 The purpose of the meeting will be to discuss student experience, support and infrastructure issues identified during the dialogue meetings or through other mechanisms and any issues brought forward by the academic partners.

**Institutional overview**

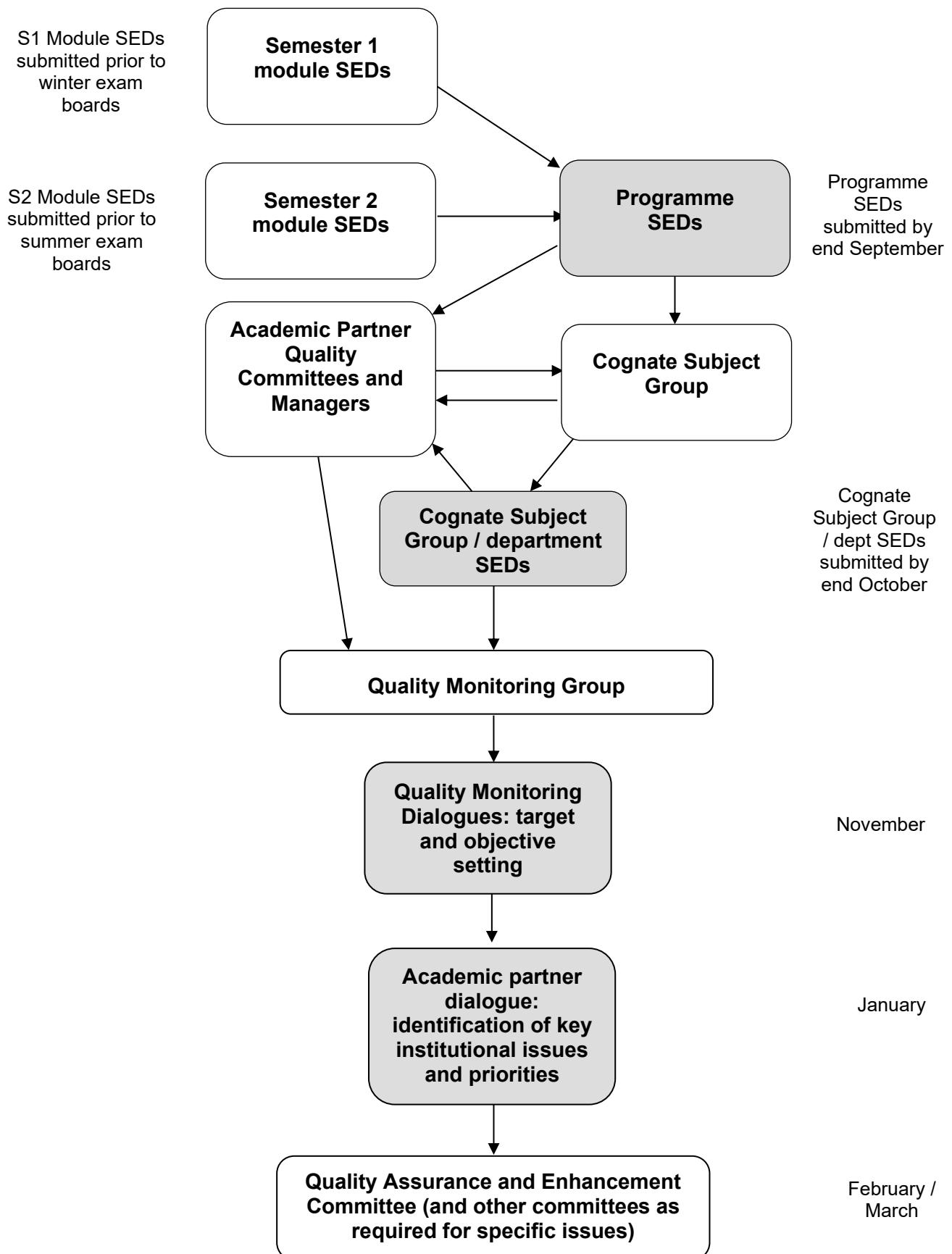
- 5.17 The summary institution-level report, comprising common issues and good practice, and recommendations for action identified through the quality monitoring process will be considered by QAEC, who will agree lead members of staff to progress each one. There may be recommendations and actions identified for referral elsewhere, including committees, academic partners and executive office.
- 5.18 This summary report, developed and monitored by QAEC, will constitute an annual overview of all reports and outcomes, identifying common issues and themes.

**Evaluation of process**

- 5.19 QAEC shall undertake evaluations of the effectiveness of the quality monitoring process at regular intervals.



**Quality monitoring flowchart**





## 6 FRAMEWORK FOR CURRICULUM DEVELOPMENT

### Introduction

- 6.1 The university framework for curriculum development forms the basis for the development of all new programmes. Programme development teams must adhere to the criteria set out below.

### Awards

- 6.2 The awards for which the university is responsible are set out in the table below. The levels indicated refer to the Scottish Credit and Qualifications Framework (SCQF). Under its degree awarding powers, the university may offer awards up to, and including, SCQF Level 11, and research degrees at SCQF Level 12.

SCQF Level	Qualification	Award
12	Doctorate, Professional Doctorate, Higher Doctorate	PhD, DLitt, DSc, DD, DTech, DEng, DEd, DSocSc, DArts
11	Masters by Research <sup>2</sup> Taught Masters Degree <sup>3</sup>  Postgraduate Diploma Postgraduate Certificate	MRes, MPhil MA, MAcc, MLitt, MSc, MSci, MTh, MBA, MMus, Meng, MOptom PgDip PgCert
10	Scottish Bachelors Degree with Honours	BA (Hons), BSc (Hons), BEng (Hons)
9	Scottish Bachelors Degree	BA, BSc, BEng
8	Diploma of Higher Education Higher National Diploma	Dip HE HND
7	Certificate of Higher Education Higher National Certificate	Cert HE HNC

Table 3: Qualifications and awards the university may offer

### Notes

- 1 HNC, HND, PDA and SVQ awards offered by the university are externally validated by the Scottish Qualifications Authority (SQA). PDAs and SVQs are linked to National Occupational Standards. They have varying credit values, and are placed at Levels 6-11 in SCQF. For more information, see [www.sqa.org.uk](http://www.sqa.org.uk)
- 2 Masters by Research degree may include up to 60 credit points through taught components
- 3 Within a taught Masters degree, no more than 90 credit points may be achieved through research component(s).

- 6.3 The title of an award should reflect the curriculum content of the programme, and will be confirmed at the point of approval. In determining the award title, programme teams should



Academic Standards and Quality Regulations 2025-26  
Framework for curriculum development

take due cognisance of sector norms and practice within their discipline, and the expectations of any relevant professional or statutory body. Under no circumstances may different final award titles be available for a single programme.

- 6.4 The university may award a Scottish Bachelors Degree, Diploma of HE or Certificate of HE as general awards with no subject specified in their titles, where the normal credit requirements for such awards have been met.
- 6.5 The university may offer other vocational awards validated by other recognised awarding bodies, subject to approval through appropriate planning processes.
- 6.6 The university may also collaborate with other appropriate institutions to offer joint taught or research programmes, in accordance with the general provisions of its regulations.

### Levels, credits and modules

#### Levels

- 6.7 The university has adopted the SCQF credit requirements, as set out below, as the basis for the development of all new taught programmes and this may only be varied with the prior approval of Academic Council.

University qualifications and their SCQF credit requirements	
Taught Masters Postgraduate Diploma Postgraduate Certificate	min 180 with min of 160 at Level 11 min 120 with min of 100 at Level 11 min 60 with min 40 at Level 11
Scottish Bachelors Honours Degree	min 480 with min of 200 at Levels 9 and 10 including at least 100 at Level 10
Scottish Bachelors Degree	min 360 with min 100 at Level 9
Diploma of HE Higher National Diploma	min 240 with min 100 at Level 8 or higher 240 with a min of 64 SCQF credit points at Level 8
Certificate of HE Higher National Certificate	min 120 with min 100 at Level 7 or higher 96 with a min of 48 SCQF credit points at Level 7

*Table 4: University qualification and their SCQF requirements*

#### Note

Research degrees are not credit-rated, except in the context of taught components within MRes.

#### Credits

- 6.8 Each SCQF credit point represents the outcomes of learning achieved through 10 notional hours of learning activity, making 1,200 hours at each level. It should be noted that all learning activities are included within this, i.e. managed learning time, directed student activities and time spent in private study, revision, preparation for assessments etc.



### **Core and option modules**

- 6.9 A standard module has been adopted of 20 SCQF credits, i.e. 200 hours of student activity. There will, therefore, be six modules or equivalent at each level of a standard programme. 10-credit modules are exceptionally permitted within CPD awards only (see section below).
- 6.10 A programme specifies core and option modules within its defined structure, as set out in the programme specification and confirmed at the point of approval.
- 6.11 A core module has learning outcomes relating to knowledge and skills which are deemed to be fundamental to the programme of study and:
- must be designated as such at the point of approval of a programme / scheme
  - must be undertaken by all students (full-time and part-time) enrolled on that programme (except in cases of advanced level entry by RPL or credit transfer)
  - must not normally be condoned.
- 6.12 Option modules are specified within the programme specification and confirmed at the point of approval. Students' choice of option modules may determine their eventual named award.
- 6.13 An elective module does not form part of the defined structure of a programme. Students may be permitted to undertake one elective module per SCQF level instead of an option module, for the purposes of broadening their educational experience, subject to approval by their PAT and timetabling constraints.

### **European Credit Transfer and Accumulation System (ECTS)**

- 6.14 The university has recognised the ECTS for the purposes of award and transfer of credit, in line with common practice in Scotland and the UK. The university will award ECTS credits on the basis of one ECTS credit for every two SCQF credits at SCQF Levels 7-11.
- 6.15 The university will recognise ECTS credits achieved from European universities for students seeking admission to its programmes.
- 6.16 Academic transcripts issued by the university will show both SCQF and ECTS credit totals.

### **Continuing professional development (CPD) awards**

- 6.17 The university may approve credit-bearing CPD awards aimed at specific student groups which will consist of limited volume of credit, and will normally be of short duration. CPD awards may use flexible patterns of delivery, and may include 10-credit modules. 10-credit modules may only be used in approved CPD awards, and may not be used in standard undergraduate or postgraduate programmes.
- 6.18 CPD awards will consist of at least 20 credits and no more than 100 credits at undergraduate level and no more than 40 credits at postgraduate level.
- 6.19 CPD awards may comprise either 10-credit or 20-credit modules or a mixture of both.
- 6.20 CPD awards of up to 60 credits may be approved through the Faculty-led modification process (see Section 10A). CPD awards of 70-100 credits must be approved through the normal approval process.



## Schemes

- 6.21 Undergraduate academic provision may be organised into schemes. A scheme will comprise a coherent group of programmes in a particular subject area, and may include both SQA and degree provision from SCQF Levels 7-10. It will demonstrate progression opportunities, student choice and efficient sharing of units/modules.
- 6.22 Each named award within a scheme will maintain programme integrity in the light of market expectations, and will take into account any relevant professional, statutory or regulatory body (PSRB) accreditation requirements.
- 6.23 Core modules may be specified at scheme or programme level within definitive documentation presented for approval. Students must successfully complete all specified core modules in order to achieve the named award.

## Programme design

### Normal duration of programmes

- 6.24 The normal planned length of undergraduate programmes is set out below. Students are expected to complete their studies in the timescales shown, but there is no maximum period of registration.

Normal planned length of programme	Full-time students complete within	Structured part-time students complete within
1 year	2 years	3 years
2 years	3 years	5 years
3 years	5 years	6 years
4 years	6 years	8 years

Table 5: Normal duration of programmes

- 6.25 Programmes may specify a maximum period of registration, particularly where there are accreditation requirements set by a professional, statutory or regulatory body (PSRB).

### Exit awards

- 6.26 Programmes should incorporate appropriate exit points at each level. Undergraduate degree programmes may incorporate SQA awards at Higher National Certificate and Higher National Diploma level, or the awards of Certificate of Higher Education (Cert HE) and Diploma of Higher Education (Dip HE) and beyond.

### Projects and dissertations

- 6.27 At Level 9, one module will normally be devoted to a project or equivalent. At Level 10 one double module will normally be devoted to a dissertation or equivalent. [This section does not apply to SQA awards.]



**Level descriptors (SCQF)**

- 6.28 In developing any new programme, programme development teams must take cognisance of the relevant level descriptors that exist as part of the Scottish Credit and Qualifications Framework ([www.scqf.org.uk/](http://www.scqf.org.uk/)).

**Subject benchmark statements (QAA)**

- 6.29 In developing any new programme, and in particular Bachelors degrees with honours, programme development teams must also take cognisance of any relevant subject benchmark statements that have been issued by the Quality Assurance Agency for Higher Education ([www.qaa.ac.uk](http://www.qaa.ac.uk)).

**Professional, Statutory or Regulatory Body (PSRB)**

- 6.30 All taught degree provision will be subject to the assessment regulations set out in relevant sections of these regulations unless any variation is confirmed at the point of (re)approval. Variation from these standard assessment regulations may be approved due to professional, statutory or regulatory body (PSRB) accreditation requirements or for other reason, such as the nature of specialist provision.



## **7 PROGRAMME DEVELOPMENT**

---

### **Introduction**

- 7.1 This section deals with the development of new programmes. Programmes for this purpose are deemed to be proposals that are planned to lead to an award as set out in Section 6.2 of these regulations. As indicated in Section 6.21, proposals for more than one programme can come forward as a scheme. What follows within this section and Section 8 also applies to schemes.
- 7.2 There are three key stages in the development of a new programme (see table at the end of this section for more detail). These are:
- Stage 1 – Initiation and planning approval
  - Stage 2 – Programme development
  - Stage 3 – Programme approval.
- 7.3 The objectives of adopting a staged process are:
- a. to ensure that developments are open to all wishing to participate
  - b. to ensure that developments are consistent with strategic plans
  - c. to establish a clear business case for the development
  - d. to ensure that the resources required to deliver new developments are identified
  - e. to facilitate development by enabling development teams to secure resources
  - f. to ensure that proposals are subject to rigorous academic scrutiny.

### **Responsibilities**

- 7.4 The relevant Faculty Board is responsible for determining the academic validity of the proposal and for recommending planning approval.
- 7.5 The responsibility for ensuring that a programme development team are properly supported through the development process rests with the relevant Faculty Board and the Dean of Faculty.
- 7.6 All proposals are also subject to scrutiny at institutional level by Academic Council (which delegates this authority to Academic Planning Committee (APC)) of their strategic fit and sustainability, taking into account the recommendation of the relevant Faculty Board of Study.

### **Stage 1 – initiation and planning approval**

- 7.7 Proposals for new programmes will be considered in the first instance by the relevant academic partner(s) and cognate subject group(s) following informal discussions on the viability of the concept.
- 7.8 Proposals must be approved by the planning groups of the responsible academic partner and all other academic partners which will make a significant contribution to development and delivery of the programme.
- 7.9 The Faculty Board will pay particular attention to whether the proposal:
- i. supports the academic and strategic priorities of the faculty and of the university



- ii. meets the needs of prospective students, employers and the wider community
- iii. uses resources efficiently, minimising duplication
- iv. identifies that the resources needed for the development and delivery of the proposal are available or can be obtained.

7.10 The Faculty Board will then determine whether the proposal proceeds, with or without changes being made, or that it should not proceed. In making its recommendation, the Faculty Board will also recommend the responsible academic partner, and nominations for the programme development leader.

7.11 Academic Planning Committee will consider the Faculty Board's recommendation on the proposal, reviewing in particular its strategic fit and viability, and determine whether the proposal is granted planning approval, with or without changes being made, or that it should not proceed.

## **Stage 2 - programme development**

7.12 The programme development team will develop the curriculum and documentation for approval. Internal and external support for this will be provided by either a peer review process or Advisory Group. New programmes will normally only require an Advisory Group where:

- a. The award is to be accredited by a professional body
- b. The programme is within an entirely new discipline area for the university
- c. The programme will be delivered using a new mode or model of delivery for the university
- d. The programme is delivered in collaboration with an external partner.

7.13 The Dean of Faculty will determine whether an Advisory Group or peer review process is required.

7.14 The peer review process supports the programme team by inviting constructive feedback from an internal and external adviser. This will be provided on the final draft documentation at an appropriate stage prior to the approval event.

7.15 It is the responsibility of the programme development team to nominate both an internal and external adviser to undertake the peer review, taking into account any specific areas of expertise which may be needed. Nominations are subject to approval by the Dean of Faculty.

7.16 The Advisory Group, if required will support the programme team through scheduled interactions at mutually agreed points in the development process. The membership of the Advisory Group will normally comprise:

- a. Dean of Faculty or nominee – chair
- b. Head of Academic Standards and Enhancement or nominee
- c. Principal or nominee from responsible academic partner
- d. At least one internal member with appropriate experience, who is not involved with the provision being developed
- e. At least one external academic member from another HEI
- f. Other members if appropriate, e.g. professional body representative.



Academic Standards and Quality Regulations 2025-26  
Framework for curriculum development

- 7.17 It is the responsibility of the programme development team to nominate individuals for the Advisory Group, taking into account any specific areas of expertise which may be needed. Nominations are subject to approval by the chair of the Advisory Group.
- 7.18 The programme development team will produce programme documentation for consideration by the approval panel in accordance with the agreed timescale.
- 7.19 The Dean of Faculty and the Chair of the Advisory Group (normally the Associate Dean) are responsible for providing written confirmation to the Head of Academic Standards and Enhancement that the programme and relevant documentation are ready to go forward to the formal approval stage.

**Stage 3 – programme approval**

- 7.20 Detailed procedures relating to the approval process are contained in Section 8 of these regulations.



Academic Standards and Quality Regulations 2025-26  
Framework for curriculum development

**Academic development process – stages, purpose and outcomes**

Activity	Who's involved	Purpose	Outcome
<b>Stage 1 – initiation and planning approval (1-3 months)</b>			
Idea and informal discussions	Academic staff, AP managers, HoS	Initial consideration of viability of concept prior to any development work	Decision on whether concept merits further development work
Drafting business case	Proposer(s), AP managers, HoS, University Planning team	Outline business case giving sufficient detail for wider discussion (programme content, delivery, market demand, resources, impact on funded numbers).	Rationale and business case
Consideration of business case by planning teams	Proposer(s), AP planning groups, University Planning team	Discussion of concept, fit with strategic plans Opportunity for discussion of resourcing implications and integration with other provision	'In principle' support - or not - with commitment to resourcing for development May include recommendations for refinement prior to next stage
Circulation of business case to SN members, APC and Learning and Teaching team	Proposer(s), CSG, APC, Learning and Teaching team	Visibility of proposed development Opportunity for involvement of / contribution by other CSG members and APs in proposal	Feedback to proposers and HoS
HoS convenes writing team to draft curriculum proposal	Proposer(s), HoS, reps from all participating APs	Produce curriculum proposal, building on business case information	Completed curriculum proposal and costing spreadsheet
Consideration of curriculum proposal by Faculty Board (normally by circulation)	Proposer(s), Faculty Board	Ensures fit with faculty strategic plan	Dean recommends approval - or not - to APC
Planning for marketing	Proposer(s), Marketing (EO and APs)	Planning and integration of marketing activity (including discussion of date	Production of marketing plan



Academic Standards and Quality Regulations 2025-26  
Framework for curriculum development

Activity	Who's involved	Purpose	Outcome
		for inclusion in print prospectus and UCAS)	
Consideration of curriculum proposal by APC		Discussion of curriculum proposal, fit with strategic plan and existing provision, resource and networking implications, implications for funded student numbers, consideration of market and likely demand	Confirmation of planning approval. May include recommendations for consideration by programme development team
Addition to approval schedule	Academic Standards and Enhancement Team	Planning for approval event	Inclusion on approval schedule
Planning for marketing	Proposer(s), Marketing (EO and APs)	Continued planning and implementation of marketing activity	Increased awareness of new programme, inclusion of programme information in print prospectus and UCAS

*Table 6: Stage 1 - Initiation and planning approval (1-3 months)*



Academic Standards and Quality Regulations 2025-26  
Framework for curriculum development

Activity	Who's involved	Purpose	Outcome
<b>Stage 2 – programme development (3-12 months)</b>			
Curriculum development	Programme development team, Peer Reviewers/ Advisory Group	Detailed development of programme. Advice on content, structure, alignment with external reference points	
Production of programme documentation	Programme development team, Peer Reviewers/ Advisory Group	Documentation to support programme	Programme Specification Module Descriptors Library Resources Reading List Draft student handbook
‘Sign-off’ of draft programme documentation	(Chair of) Advisory Group	Confirmation from Advisory Group/Peer Review process that documentation is ready to go forward to formal approval stage	Chair’s written confirmation to Dean of Faculty
Consideration by Dean	Dean	Decision by dean whether programme is ready to go forward to formal approval stage	Dean’s confirmation

*Table 7: Stage 2 - Programme development (3-12 months)*

Activity	Who's involved	Purpose	Outcome
<b>Stage 3 – programme approval (1-3 months)</b>			
Approval panel meets	Programme development team, AP manager(s), Dean, approval panel	Formal consideration of academic standards and quality of learning opportunities of proposed programme	Report with recommendation to FB for approval of programme for delivery - or not May include conditions
Response to any conditions	Programme development team	Action taken to address issues identified by approval panel	Programme amended and/or resources made available



Academic Standards and Quality Regulations 2025-26  
Framework for curriculum development

Activity	Who's involved	Purpose	Outcome
Sign-off by Chair of approval panel	Chair of approval panel	Meet academic standards and quality assurance requirements as set by approval panel	Programme meets panel conditions
Production of final programme documentation	Programme development team	Information for students, staff, stakeholders	Programme documentation
Consideration of panel recommendations by FBOS	Faculty Board	Formal approval (on behalf of Academic Council) of programme to be included in academic portfolio	Confirmation of approval of programme for delivery
New programme entered on systems	Student Records Office	Control of the university's academic portfolio. Registration and enrolment of students. Student access to finance and other support	Programme and modules and HAPs added to SITS
Recruitment to new programme	Marketing (EO and APs), Admissions, Programme team	Recruitment of viable student cohort to programme.	Students enrolled on programme.

*Table 8: Stage 3 - Programme approval (1-3 months)*

List of acronyms					
AP	Academic Partner	FB	Faculty Board	HoS	Head of School
CSG	Cognate Subject Group	HAP	Home Academic Partner	SRO	Student Records Office
EO	Executive Office				



## **8 PROGRAMME APPROVAL**

---

### **Introduction**

- 8.1 Programme approval / reapproval forms one element within the university's quality framework, and operates in conjunction with other elements to provide assurance to the university and to external stakeholders of the standards of awards and of the quality of the student learning experience provided within the university. Approval is the process by which the university ensures that proposed new or revised programmes meet curricular and quality requirements. Programmes are approved for delivery for a defined period (normally five years but up to a maximum of six years) and are then subject to re-approval. If a programme is not submitted for reapproval at this time, it will lapse and no further recruitment will be permitted.
- 8.2 Programmes in the same broad subject area may be clustered for the purposes of approval and/or reapproval, so that a number of programmes may be considered at a single event.
- 8.3 Unless noted otherwise, throughout this section of the regulations, the term 'approval' refers to both new and existing programmes. The term 'validation' is used for programmes where the awarding body is not the university.

### **Objectives**

- 8.4 The objectives of the approval process are:
- i. to ensure that programmes offered by the university meet its curricular and quality requirements. This is achieved by:
    - a. ensuring that programmes satisfy its academic standards and quality criteria
    - b. ensuring that programmes meet SCQF guidelines, are in line with the UK Quality Code for Higher Education, and are mapped against QAA subject benchmarks appropriately
    - c. ensuring that the academic standards of programmes are comparable with those of similar programmes across the UK higher education sector
  - ii. to provide opportunities for enhancing the quality of programmes through peer review.
- 8.5 Approval ensures that:
- a. the aims and intended learning outcomes of the programme are clearly defined
  - b. the strategies for learning and teaching are clearly defined
  - c. clear mechanisms for programme management and student support are in place in each academic partner and the integration of these systems, if appropriate, has been achieved
  - d. an appropriate assessment strategy is in place, including mechanisms for co-ordination of assignment and assessment scheduling by the responsible academic partner to ensure that no students are advantaged or disadvantaged
  - e. appropriate learning resources, guidance and access to facilities, scheduled and unscheduled, will be provided in all Home Academic Partners
  - f. sufficient and appropriately qualified and experienced staff are available
  - g. the overall academic integrity of a programme involving network delivery can be assured
  - h. the programme structure and design demonstrates considered and appropriate implementation of relevant institutional policies and strategies.



Academic Standards and Quality Regulations 2025-26  
Programme approval

- 8.6 Approval of programmes comprises three stages:
- a. planning approval (Faculty Board and Academic Council, which delegates this authority to Academic Planning Committee)
  - b. Faculty approval (Dean of Faculty)
  - c. approval event (approval panel).

**Planning approval**

- 8.7 Proposals for new programmes must be approved by the relevant Faculty Board before being presented to Academic Planning Committee for planning approval.
- 8.8 Academic Planning Committee, taking into consideration the recommendation of the Faculty Board, may decide:
- a. to grant planning approval for the proposed programme
  - b. to grant planning approval for the proposed programme with recommendations for consideration by the programme development team
  - c. not to grant planning approval for the proposed programme.

**Peer review or advisory group**

- 8.9 The Dean of Faculty will determine whether an Advisory Group or Peer Review process is required.
- 8.10 New programmes will normally only require an Advisory Group where:
- a. The award is to be accredited by a professional body
  - b. The programme is within an entirely new discipline area for the university
  - c. The programme will be delivered using a new mode or model of delivery for the university
  - d. The programme is delivered in collaboration with an external partner.
- 8.11 For the majority of proposals, the peer review process will be adopted.
- 8.12 The peer reviewers will be confirmed by the Dean of Faculty in accordance with the guidance in Section 7. External peer reviewers are expected to be discipline experts, industry or accrediting body representatives, as appropriate. Internal peer reviewers, with their institutional perspective, should have a particular focus on areas such as strategic fit, resourcing and management, operational issues, pedagogical approaches, alignment with institutional policies and student support and engagement.
- 8.13 The programme leader is responsible for submitting final draft documentation to the peer reviewers in accordance with the agreed timescale.
- 8.14 The peer reviewers will provide feedback on the programme documentation using a template report. The programme leader will provide their response to this feedback within the relevant section of the same report.
- 8.15 The Associate Dean is responsible for providing written confirmation to the Dean of Faculty that:
- a. the programme is at a sufficient stage of development to go forward to an approval event, and



Academic Standards and Quality Regulations 2025-26  
Programme approval

- b. the required documentation is ready, complete and appropriate for consideration by the approval panel.

**Advisory group (if required)**

- 8.16 Membership of the Advisory Group, if one is required, will be confirmed by the chair of the Advisory Group, normally the Associate Dean in accordance with the guidance in Section 7.
- 8.17 The programme leader is responsible for submitting final draft documentation to the chair of the Advisory Group and to the chair of the responsible academic partner's quality committee in accordance with the agreed timescale.
- 8.18 The chair of the Advisory Group is responsible for providing written confirmation to the Dean of Faculty that:
  - a. the programme is at a sufficient stage of development to go forward to an approval event, and
  - b. the required documentation is ready, complete and appropriate for consideration by the approval panel.

**Faculty approval**

- 8.19 The Dean of Faculty will decide whether:
  - a. the programme may go forward to an approval event with no revisions/changes to the documentation, or
  - b. the programme should not go forward without a significant re-write and reconsideration by an Advisory Group where relevant. Specific comments about the omissions / weaknesses of the documentation must be given.
- 8.20 If the Dean indicates that the programme cannot go forward, they will convene a meeting with the chair of the Advisory Group or internal peer reviewer, programme leader designate and chair of the responsible academic partner's quality committee to discuss their comments and resolve any outstanding issues.
- 8.21 For required documentation to be submitted, see Sections 8.40 and 8.41.

**Approval panel**

- 8.22 Membership of the approval panel will be established by the Dean of Faculty (or nominee), in discussion with the chair of the responsible academic partner quality committee, and the programme leader designate.
- 8.23 The approval panel acts with delegated authority from the Faculty Board to approve programmes, and to set any conditions as it deems appropriate.
- 8.24 Panel membership should be appropriately balanced, comprising individuals who do not have a direct involvement with the provision being considered. Each panel shall include:
  - a. chair of the panel
  - b. at least one external member with subject expertise. More external members may be required if several programmes are being considered at a single event



Academic Standards and Quality Regulations 2025-26  
Programme approval

- c. at least one internal member with appropriate experience
- d. a student member, from another subject area
- e. officer(s): appointed by the Head of Academic Standards and Enhancement, and where appropriate by the awarding body.

- 8.25 Observers may also be in attendance, with the permission of the chair of the panel.
- 8.26 Where appropriate, additional member(s) for the panel can be drawn from any of the following: industry, commerce, relevant employer group, or professional body.
- 8.27 Panel members must be independent of the programme(s) being considered for approval. No member shall have had a close association with the programme(s) (as external examiner, programme adviser or through involvement in the management of the programme) during the five years prior to the approval event.

**Approval event**

- 8.28 The date for the approval event will be established by the chair, in discussion with the officer and chair of the responsible academic partner quality committee, and the programme leader.
- 8.29 Members of the approval panel will receive the documentation for the proposed programme(s) at least two weeks prior to the approval event.
- 8.30 The schedule for the approval event will normally include the following:
- a. private panel meetings - to allow the panel to discuss the documentation received and information gathered through meetings with staff and students, and agree the final outcomes
  - b. a meeting with senior management representatives of academic partners to ascertain whether the infrastructure for learning will be fully supported
  - c. one or more meetings with the programme team(s) to explore various aspects of the proposed programme(s)
  - d. a meeting with students where applicable, or potential students if possible (eg HN provision leading to degree provision)
  - e. final meeting with programme team(s) and senior managers to provide informal feedback on likely outcomes of the approval event. These outcomes will be confirmed in writing, normally within five working days.
- 8.31 Approval events will normally be conducted wholly online, to enable engagement by a wide range of participants and remove geographical or other barriers to participation.
- 8.32 A draft report summarising the outcomes of the approval event will be circulated by the officer within two weeks of the event for comments and amendments by the panel. The chair of the panel will approve the report on behalf of the panel. The report will then be sent to the programme leader(s) to comment on factual accuracy. Any modifications to the report will be approved by the chair on behalf of the panel. The report will be circulated to the programme leader(s), the Dean of Faculty, academic partner quality manager(s), and other relevant staff.



8.33 For required documentation to be provided to the panel, see Sections 8.40 and 8.41.

### Approval outcomes

- 8.34 The approval panel, acting with delegated authority from the Faculty Board, will determine one of the following outcomes, that the:
- a. Programme(s) be approved, for a specified period up to a maximum of six years
  - b. Programme(s) be approved, for a specified period up to a maximum of six years, subject to meeting specific conditions
  - c. Programme(s) should not be approved at the current time.
- 8.31a **Approved unconditionally.** The approval panel may, at its discretion, determine that a programme be approved for a period of less than six years, at which point it will be subject to reapproval or will lapse.
- 8.31b **Approved with conditions** - approval may be made conditional upon fulfilment of certain conditions by a specified date. In all cases, the responsibility for ensuring that such conditions are fulfilled lies with the programme leader, the relevant dean, and chair of the relevant academic partner quality committee.
- 8.31c **Not approved** – in the event that the approval panel does not approve a programme, it is the responsibility of the Dean of Faculty to convene a meeting with the chair of the approval panel, programme leader designate and chair of the responsible academic partner's quality committee to decide how to proceed.

### Signing off approval conditions

- 8.35 The approval panel will specify a date by which any conditions must be met, which should normally be no more than twelve months after the approval event. Where a longer timescale is appropriate, the period of approval should be carefully considered.
- 8.36 The programme leader is responsible for providing written evidence demonstrating how the conditions have been met to the officer, who will liaise with the chair of the panel. Both the chair of the panel and the officer(s) must agree they have been met.
- 8.37 The programme team and the panel will be informed in writing when the conditions have been met; or if deemed unmet, why the conditions are outstanding.
- 8.38 The programme leader is responsible for providing an electronic version of the definitive programme document to the officer once all conditions have been met.
- 8.39 Following the approval event, the programme leader must include an update on actions taken in response to any conditions and recommendations in their annual monitoring self-evaluation reports.

### Documentation for approval

- 8.40 For approval of a new programme the following documentation must be submitted by the programme team:
- a. programme specification (which when finalised after the approval event will become the definitive programme document)



- b. module descriptors
- c. library resource reading lists (see Section 8.39)
- d. draft student handbook
- e. Peer review or advisory group report
- f. operational handbook (for external partnerships only)

The approval panel will also receive:

- g. confirmation from the Dean of Faculty that they are satisfied that the programme is ready to go forward to approval
- h. guidance for approval panels
- i. external panel members will also have access to *Academic Standards and Quality Regulations* and general information about the university.

8.41 For reapproval of an existing programme the following documentation must be submitted by the programme team:

- a. critical review of the programme since its last approval, including any modification made during that time, and drawing on student and stakeholder feedback, outcomes from monitoring and review activity and analysis of relevant KPIs and trends
- b. summary of main changes to the programme being proposed and rationale
- c. revised programme specification and, where appropriate, module descriptors
- d. library resource reading list (see Section 8.39)
- e. draft student handbook

The approval panel will also be sent:

- f. guidance for approval panels
- g. external panel members will also have access to *Academic Standards and Quality Regulations* and general information about the university.

## Learning resources

8.42 During development, programme teams will identify an appropriate threshold level of resource required to be provided by Home Academic Partners.

8.43 Levels of resource must be defined for adequate and appropriate learning resources and facilities, including specialist equipment where appropriate. This will depend on the subject area of the programme and the mode of delivery.

8.44 Programme teams must supply specific information on resources for the following areas in their documentation:

Library resources reading list:

- a. all core and recommended texts or journal subscriptions
- b. electronic resources, including electronic journals, access to databases, CD-ROMs, etc
- c. availability of these resources.

Specialist facilities and equipment (within programme specification or module descriptor):

- a. all specialist facilities and equipment, including software and other resources used by students
- b. availability of these facilities and equipment.



Academic Standards and Quality Regulations 2025-26  
Programme approval

- 8.45 The chair of the quality committee at each Home Academic Partner and the university librarian must sign off the library resource document before approval.
- 8.46 The approval panel will endorse or modify the levels of resource that each Home Academic Partner must provide.
- 8.47 During the approval event, the approval panel may undertake a tour of the academic and support facilities at the responsible academic partner. The approval panel may, as a condition of approval, require site visit(s) to be undertaken at some or all of the Home Academic Partners.



## **9 RESPONSIBILITIES OF ACADEMIC PARTNERS IN RESPECT OF ACADEMIC PROVISION**

---

### **Introduction**

- 9.1 Degree programmes normally have a designated responsible academic partner. Other academic partners will be designated as Home Academic Partners (HAPs) as long as they are able to provide the necessary facilities and resources for that degree programme.
- 9.2 Only organisations which are academic partners may be designated as responsible academic partner or Home Academic Partners (HAPs).
- 9.3 The responsible academic partner, and all other academic partners which will be Home Academic Partners (HAPs) for a particular programme, will be confirmed through the academic approval process. The facilities and resources required at HAPs will be defined within programme documentation, depending on the subject area and the mode of delivery.
- 9.4 Non-degree programmes (including SQA awards) are subject to different approval processes and frameworks for academic partner-level curriculum management. Although the regulations within this section have been written from the perspective of degree programmes, the principles inherent in them should be applied to all provision by the same, or nearest equivalent, processes.

### **Responsibilities of 'responsible academic partner'**

- 9.5 The responsible academic partner is required to identify, manage and support an appropriate programme leader, or other responsible individual who fulfils this role in accordance with current guidance.
- 9.6 The responsible academic partner, through the oversight of its quality committee and engagement with annual quality monitoring process, is required to ensure that:
  - a. the operation of the programme complies with the Academic Standards and Quality Regulations and any professional or statutory body requirements where appropriate
  - b. any matter affecting the delivery of the programme is addressed in an effective and appropriate manner, taking into account current management or resource implications or constraints, as appropriate. Where matters cannot be effectively addressed by the academic partner they shall be reported to the subject network in the first instance.

### **Responsibilities of Home Academic Partners**

- 9.7 A Home Academic Partner (HAP) is responsible for enrolling students on their programme of study and providing both generic services and programme-specific facilities and resources. Every student will be allocated to an approved Home Academic Partner.
- 9.8 A Home Academic Partner (HAP) is responsible for providing the following services for all students it enrolls:
  - a. to provide students with a local induction
  - b. to provide pastoral support, e.g. information on funding, counselling



- c. to provide reasonable adjustments - and a Personal Learning Support Plan, where appropriate
  - d. to collect fees
  - e. to ensure each student has been provided with a Personal Academic Tutor who fulfils this role in accordance with current guidance
  - f. to identify, manage and support a Hosting Manager
  - g. to ensure that the delivery of programmes complies with the *Academic Standards and Quality Regulations* and any professional or statutory body requirements where appropriate.
- 9.9 A Home Academic Partner (HAP) is also responsible for providing programme-specific facilities and resources as defined in programme documentation:
- a. learning resources, video-conference and ICT equipment
  - b. specialist equipment and software
  - c. accommodation (e.g. classrooms, laboratories, workshops) for teaching, learning and assessment, including examinations.

### **Learning centres**

- 9.10 If a Home Academic Partner makes a programme available through an affiliated Learning Centre, it has delegated responsibility for ensuring that students at that location have access to an equivalent level of programme-specific facilities and resources.



## 10A PROGRAMME MODIFICATION

---

### Scope

- 10a.1 These procedures cover modifications to existing degree programmes, ie those which have already been approved and are being delivered. They do not apply to the normal and expected ongoing changes in programme content and delivery which are monitored through the annual monitoring process.
- 10a.2 The type of modifications covered by these procedures include:
- change in overall programme aims and objectives
  - change in mode / location of delivery
  - change in module / programme title
  - a significant addition to the resources required for the programme
  - approval of joint awards (internal), using existing provision
  - approval of joint awards (with other HEIs), or other form of collaborative agreement, using existing provision
  - approval of stand-alone modules
  - approval / addition / deletion of modules within a programme (new or existing)
  - change in module assessment arrangements
  - change in regulations for the admission of students
  - change in regulations for the assessment of students.

### Proposals for modification of a degree programme

- 10a.3 Initial consideration of formal proposals for modification will be at faculty level, with Faculty Executive making a decision on the appropriate subsequent process, based on the level of risk within the proposal.
- 10a.4 A modification proposal must be supported by the following information:
- a. a brief description outlining the proposed changes
  - b. the rationale for the proposed changes
  - c. evidence of market or student demand, if appropriate
  - d. evidence of student feedback / student demand leading to the change if appropriate
  - e. implications for enhancement of the student learning experience
  - f. implications for human / physical resources
  - g. evidence of internal / external support for the modification
  - h. specific comment from relevant external examiner.
- 10a.5 A modification proposal must be endorsed in writing by relevant lead staff and quality managers at programme / cognate subject group / academic partner levels as appropriate.
- 10a.6 The Faculty Executive will assess the risk level of the proposed modification into one of the following categories with the associated course of action:
- a. **low risk** – Faculty Executive approves or rejects the modification
  - b. **medium risk** – Faculty Executive determines the nature and scope of modification approval ‘event’
  - c. **high risk** - Faculty Executive refers decision to Academic Council (or a body to which it



delegates this authority), with recommendation for further action, ensuring that the university retains strategic oversight of its academic portfolio

d. **unacceptable risk** - Faculty Executive rejects the modification.

- 10a.7 The proposer(s) will be given feedback on Faculty Executive decisions and recommendations, normally within one working week of the Faculty Executive meeting. Where the Faculty Executive does not accept a proposal, proposers will be given the option of addressing the issues identified, and re-presenting the proposal at a later stage.
- 10a.8 All decisions made by the Faculty Executive will be reported to Academic Council, via faculty reports. Where Faculty Executive has approved a low / medium risk modification, Academic Council will be asked to homologate the decision.

### **Risk factors**

- 10a.9 Faculty Executives will take into consideration the following risk factors when assessing a proposed modification:
- risk to academic standards of any award
  - risk to quality of student learning experience
  - risk to financial viability of any programme or subject area
  - risk to reputation / student / stakeholder perception
  - risk to sustainability of programme delivery (or elements thereof)
  - any other risk not covered by the above.

### **Modification approval events**

- 10a.10 Modification approval events provide an opportunity for full discussion of the proposal and its implications, and will be formally minuted. They are unlikely to be as extensive as full approval events for new provision. They may involve any or all of the following:
- a further meeting of the Faculty Executive
  - attendance of programme team members and / or academic partners' senior managers at a Faculty Executive meeting
  - production of additional documentation as required, including informed internal / external comment
  - convening a panel, with or without internal / external members.

### **Outcome of modification approval events**

- 10a.11 The outcome of a modification approval event will be a recommendation to Faculty Board that the proposed modification is:
- a. approved unconditionally
  - b. approved with conditions to be met prior to implementation
  - c. not approved.
- 10a.12 The outcome will also be sent to relevant academic partners. Outcomes will be homologated by Academic Council, via faculty reports.
- 10a.13 Within one month of approval of a modification, an electronic version of the updated definitive programme document must be lodged with Academic Standards and



Academic Standards and Quality Regulations 2025-26  
Changes to academic provision

Enhancement.



## **10B DISCONTINUATION OF AND WITHDRAWAL FROM PROVISION**

---

### **Scope**

- 10b.1 These procedures cover discontinuation of a programme / level of a programme, temporary suspension of recruitment to a programme / level of a programme and withdrawal by one or more academic partners from networked provision. They apply to all provision, including SQA awards, taught degree programmes and postgraduate research provision. They do not apply to modification scenarios as outlined in Section 10A.
- 10b.2 Academic Council has overall responsibility for ensuring that current students have the opportunity to complete their studies in the event of programme closure, and that the quality and standards of the programme are maintained. Faculty Board is responsible for ensuring that satisfactory arrangements are in place to support completing students, or others affected by the change and monitoring their implementation.

### **Proposals for discontinuation of or withdrawal from provision**

- 10b.3 A proposal to discontinue or withdraw from provision may be initiated by an academic partner, cognate subject group or Faculty Board, and must be submitted by a member of senior management, using the relevant proforma. It is expected that the proposer will have consulted with staff and academic partners which may be affected prior to submitting a proposal.
- 10b.4 A proposal to discontinue or withdraw from provision must be supported by the following information:
- a. details of the proposed discontinuation / withdrawal, including whether temporary or permanent
  - b. the rationale for the proposed discontinuation / withdrawal
  - c. the proposed replacement or alternative provision (if any)
  - d. arrangements to be put in place for current students and applicants (where relevant)
  - e. impact on other provision (if any)
  - f. implications for human / physical resources in all affected academic partners
  - g. summary of consultation with all affected academic partners.
- 10b.5 Initial consideration of a proposal will be by the Dean of Faculty, who is responsible for ensuring that relevant parties have been consulted, and that implications are understood. Depending on the nature of the proposal, and the extent of prior consultation and consensus, it will be either:
- approved by Faculty (by Chair's Action or through Faculty Board), or
  - referred for further discussion until a consensus position is reached, and any further actions agreed.
- 10b.6 Approval will be subject to satisfactory arrangements being in place to mitigate any negative impact on students or applicants. It is essential that any current students are able to complete the programme of study for which they are registered.



## Timing

10b.7 A proposal to discontinue or withdraw from provision should normally be submitted a full academic year in advance of the implementation date, to avoid making changes once the application cycle is open. Where this is unavoidable, proposers will need to demonstrate that they have engaged with prospective and actual applicants to advise on their options.

## Notification following Faculty approval

10b.8 Following Faculty approval, the faculty liaison officer is responsible for notifying:

- the proposer
- Academic Planning Committee (APC)
- UHI Marketing and Planning team
- UHI Admissions
- Student Records Office
- Associate Dean

And, if relevant:

- Academic partners affected by the change
- External examiner(s)
- Head of Academic Standards and Enhancement
- UHI Communications team
- External collaborative partner(s)
- Awarding body.

10b.9 The proposer is responsible for notifying:

- programme leader / AP curriculum manager
- AP quality manager

And, if relevant:

- Current students
- Applicants / enquirers
- PSRB
- Placement providers
- External stakeholders.

## Monitoring

10b.10 The programme will require to be included in quality monitoring processes while there continue to be registered students, and a programme self-evaluation document submitted each year.



## **11 ACADEMIC LEADERSHIP: FACULTY STRUCTURES**

---

### **Introduction**

- 11.1 The university has implemented a horizontal structure of cognate subject groups, each of which belongs to a faculty. Each faculty will be led by a Dean of Faculty and each cognate subject group led by an associate dean, normally located within an academic partner, and reporting to the relevant dean. Each faculty is supported by a faculty liaison advisor. The two faculties are situated within the Deputy Principal (academic and research), with the deans of faculty reporting to the Deputy Principal.
- 11.2 Within the two faculties there are six cognate subject groups. Each faculty and each cognate subject group will include further education, higher education, research and knowledge exchange. Equal value will be attributed to each. These structures are designed to include all elements of the core academic provision of the university, from activity related to the senior phase of school to work-based learning, apprenticeships, further education, higher education, and research, and knowledge exchange.
- 11.3 Associate deans have overall responsibility for the management of their cognate subject group. They will develop, implement and maintain a cognate subject group operational plan which is grounded within faculty, academic partner and corporate strategic plans and priorities.
- 11.4 Associate deans will also be responsible for the development, delivery and quality of academic provision for their cognate subject group, framed within the university's academic structures and strategic priorities. This will include implementing, monitoring and reporting on agreed performance indicators for the cognate subject group.
- 11.5 Through liaison with academic partners, associate deans will ensure that the operational direction of the cognate subject group is appropriate to all stakeholder needs. They will also liaise closely with programme leaders operating within the cognate subject group, and from time to time with module leaders on particular issues.

### **Responsibilities of the Dean of Faculty**

- 11.6 The Dean of Faculty, as senior tertiary academic leaders of the university, will liaise with academic partner principals and senior academic leaders in the academic partners and have significant responsibility for external engagement. The associate deans and the research cluster leads report to the deans of faculty. The deans are responsible for:
- a. using a strongly collaborative approach across the academic partnership, defining an ambitious faculty tertiary and research academic growth strategy, which reflects the UHI strategic plan, UHI 2024, and academic partner planning, and which aligns with, and helps realise, the ambitions of the University's Research, Impact and Knowledge Exchange Strategy and the Learning and Teaching Enhancement Strategy, as well as the overarching UHI strategy
  - b. meeting agreed regional academic key performance indicators relating to this, especially in relation to agreed student number targets/further education credits at regional level, curriculum growth and curriculum efficiency



- c. representing the university externally at high level in a wide range of fora, including at national and international level, appropriate to the cognate subject disciplines of the faculty
- d. assuming responsibility for a range of whole university initiatives, including those out with the cognate subject groups in the faculty, as agreed with the Deputy Principal (academic and research)
- e. working in strong collaboration with academic partners, and leads of the cognate subject groups, to deploy facilitative leadership at regional level in regard to curriculum planning across the cognate subject groups in the faculty, including the development of new curriculum areas, the connectedness between further and higher education articulated in tertiary curriculum mapping, the sharing of good practice across the region in further education learning and teaching, including work-based learning, and the modification and retiral of higher education programmes and modules in order to secure growth of student numbers and curriculum efficiencies year on year
- f. assuming strategic oversight of the development of the research environment in cognate subject groups, including the development of cross partnership research communities in cognate subject groups, in close liaison with the Dean of Research and Innovation, the Head of Research Environment and Culture, research cluster leads, and academic partners
- g. assuming strategic oversight of the research clusters and knowledge exchange sector groups aligned with the faculties and the facilitation of their linkage with teaching and learning, and curriculum
- h. senior participation in major academic reviews as appropriate, including those undertaken by QAA
- i. creating key strategic relationships with external bodies in order to support the academic growth of the faculty
- j. through an in-depth understanding of the quality frameworks for both further and higher education, and in collaboration with academic partners, providing the Regional Strategic Body (RSB) with assurance in regard to the quality of all elements of academic activity in the faculty
- k. liaising with the Institutes and Centres which are aligned with the faculty.

### **Responsibilities of the Associate Deans**

- 11.7 The associate deans are responsible for developing practitioner academic communities across the region, inclusive of further education, higher education, research and knowledge exchange. The associated deans will report to the Dean of Faculty and be responsible for:
- a. working with the faculty dean, other associate deans, and senior academic leaders in academic partners supporting the operationalisation of agreed faculty level academic plans across the region
  - b. facilitating the development of a cross-partnership initiatives in further education, including networking of provision where appropriate, thereby strengthening the further education community
  - c. facilitating the development of a pan-regional academic community of practitioners within a cognate subject area that optimises the potential synergies between further education and higher education, and teaching and research
  - d. supporting the realisation of the learning and teaching enhancement strategy, the greater connectedness of further education practice across the region
  - e. in close collaboration with academic partners, facilitating the development of new curriculum areas and the major re-refresh of existing curriculum areas, especially where these involve multiple academic partners



- f. operationalising agreed quality assurance and quality enhancement arrangements in further and higher education, including in relation to exam boards in higher education, and the development and validation of new taught programmes
- g. in liaison with the research cluster leads and the knowledge exchange sector group leads, developing and facilitating linkages between teaching and research and/or scholarship as appropriate
- h. working with relevant cluster leads to develop appropriate research strategy and contribute to operational delivery of this at the cognate subject area level where appropriate
- i. creating a culture of academic scholarship across the academic partnership reflective of the subject disciplines within the cognate subject area
- j. monitoring and reporting on a range of agreed key performance indicators of relevance to the cognate subject area including student numbers, student satisfaction and those arising from the institution's learning and teaching and research and knowledge exchange plans, and discuss any issues of concern with relevant staff
- k. liaising with external bodies in specialist areas where these sit within the specific cognate subject groups, including the Nursing and Midwifery Council and General Teaching Council for Scotland.

### **Responsibilities of the Research Cluster Leads**

11.8 The research cluster leads will report directly to the Dean of Faculty, and there will also be a 'dotted line' relationship to the lead of their 'home' cognate subject area, so as to encourage the deep integration of research and knowledge exchange within the cognate subject areas.

11.9 The research cluster leads will be responsible for:

- a. proactively developing a cross-partnership interdisciplinary research and scholarship community involving specified cognate subject disciplines, and including research students, experienced researchers, staff undertaking informal scholarship and staff who are new to research, or aspire to becoming more involved with research. In some instances these communities may be the same as for tertiary education, i.e. teacher education, but for others they may be separate research and teaching communities. The number of cognate subject communities in each cluster may well vary considerably
- b. contributing to the formation of institutional strategy in research and knowledge exchange and to the operationalisation of this
- c. working with relevant associate deans to seek out and enhance potential synergies between teaching and research
- d. supporting and nurturing potential agreed new areas of research strength, where these are deemed to have strategic priority, and encourage the further development of existing areas
- e. creating meaningful links between research and the knowledge exchange sector groups, to encourage impactful research in the key sectors aligned with research clusters. **Note:** all knowledge exchange sector groups are aligned with a research cluster, except for Creative and Entrepreneurship which are aligned with Business, Leisure and the Creative Economy
- f. establishing a yearly programme of interdisciplinary research seminars for staff and students in liaison with the research centres and institutes aligned with each faculty
- g. supporting and encouraging the development of research bids and grant capture within cognate subject areas and in liaison with the research centres and institutes aligned with each faculty
- h. supporting and facilitating public engagement arising from research in cognate subject areas relevant to the faculty, including making links to other outreach teams such as STEM



- i. participating in research studentship competitions, ensuring that clear recommendations are made for progression at institutional level
- j. participating in Research Excellence Framework (REF) preparations in close liaison with Unit of Assessment leads and the REF team
- k. in liaison with the cognate subject areas and the Dean of Research and Innovation deploying agreed research related resources.



## **12 ACADEMIC LEADERSHIP: DEGREE PROGRAMMES AND MODULES**

---

### **Designation of programme leaders**

- 12.1 Degree programme leaders are formally recognised at the point of first approval of a degree programme, on an open-ended basis. HN programme leaders are formally recognised via a Faculty-led process. The programme leader is normally employed by the responsible academic partner.
- 12.2 Where a programme leader demits the role, or indicates their intent to do so, the principal of the responsible academic partner must immediately inform the relevant Dean of Faculty of the situation. Wherever possible, this should be at least one semester before a change in programme leadership needs to take place.
- 12.3 If advance notice cannot be given for a need to change programme leadership, the principal of the responsible academic partner must agree interim measures with the relevant Dean of Faculty until a new programme leader is appointed. In any case, a replacement should be nominated within three months of a programme leader demitting the role (or notifying their employing academic partner of intent to do so).
- 12.4 Normally the responsible academic partner will propose a replacement programme leader, to the Dean of Faculty for consideration by completing a programme leader expression of interest form. The Dean will present the proposal to the Faculty Board, which is responsible for approving the new programme leader.
- 12.5 If approved, the responsible academic partner ensures that the following are informed of the change in programme leadership where appropriate:
- students on the programme
  - programme committee
  - admission and marketing staff at all relevant academic partners and at Executive Office
  - external examiners
  - awarding body (if this is not the university).

### **Change of responsible academic partner for a degree and HN programme**

- 12.6 If an academic partner does not wish to continue as responsible academic partner for a programme, or is unable to propose a replacement programme leader acceptable to the Faculty Board within three months of an existing programme leader demitting the role, the principal must inform the relevant Dean of Faculty of the situation.
- 12.7 The Dean of Faculty will then invite all other academic partners to express an interest in assuming this responsibility. Academic partners who are interested in assuming the role of responsible partner should submit a rationale and provide details of the proposed programme leader using the programme leader expression of interest form.
- 12.8 The Dean of Faculty will present the proposal(s) to the Faculty Board, which will determine which academic partner is the most suited to take over as responsible academic partner.



Members of the Faculty Board who are employed by any of the academic partners who have expressed an interest should not take any part in the decision-making process.

- 12.9 If the Faculty Board does not approve any proposal, or if the Faculty Board cannot reach agreement between nominees, the Deputy Principal, in consultation with the relevant Dean of Faculty, will form a panel to resolve the issue.
- 12.10 Once a change of responsible academic partner has been approved, the outgoing responsible academic partner will ensure that the following are informed of the change in programme leadership where appropriate:
- students on the programme
  - programme committee
  - admission and marketing staff at all relevant academic partners and at Executive Office
  - external examiners
  - awarding body (if this is not the university).

### **Designation of module leaders**

- 12.11 The designation of module leaders will be co-ordinated by the Associate Dean and approved by Joint Faculty Executive.
- 12.12 Module leaders are formally recognised at the point of first approval of the module, on an open-ended basis.
- 12.13 Module leaders are expected to fulfil the tasks specified in the module descriptor.
- 12.14 Where a module leader demits the role, or indicates their intent to do so, they must inform their Associate Dean, line manager within their academic partner and the Programme Leader. Wherever possible, this should be at least one semester before a change in module leadership needs to take place.
- 12.15 If advance notice cannot be given of the need to change module leadership, the line manager within the relevant academic partner must agree interim measures with the relevant Associate Dean and Programme Leader until a new module leader is appointed. In any case, a replacement should be nominated within three months of a module leader demitting the role (or notifying their Associate Dean and line manager of their intent to do so).
- 12.16 The Associate Dean, responsible academic partner and Programme Leader will agree whether the module needs to be continued and a replacement module leader required.
- 12.17 The programme leader and academic partner of the demitting module leader will be invited to propose a replacement module leader to the Associate Dean for endorsement. The expertise required will be reviewed and due consideration will be given to the distribution of module leadership across the university. The Associate Dean will then present the proposal to Joint Faculty Executive for approval.
- 12.18 If no recommendation is made from the academic partner of the demitting module leader or Joint Faculty Executive does not approve the recommendation all other academic partners will be invited to express an interest in assuming the module leadership.



- 12.19 The Faculty Liaison Coordinator will inform the following of the available module leadership and invite expressions of interest to be submitted to the Associate Dean.
- HR Practitioner Group
  - Academic Planning Committee (APC) representatives
  - Quality Managers
  - Programme Leaders
  - Associate Deans.
- 12.20 Those interested in taking up the module leadership should complete an Expression of Interest Form. Each expression of interest must confirm that the individual has the full support of their academic partner.
- 12.21 Where only one expression of interest has been received the Associate Dean, if endorsed, will make a recommendation to Faculty Executive which is responsible for approving the designation of module leaders.
- 12.22 Where more than one expression of interest has been received the Associate Dean and a second Associate Dean from outwith the faculty will consider the expressions of interest and make a recommendation to Faculty Executive for approval.
- 12.23 The Associate Deans will seek to reach a consensus on the most appropriate module leader and make a recommendation to Joint Faculty Executive. If no consensus can be reached by the Associate Deans or Joint Faculty Executive, the Dean of Faculty is responsible for the final decision.
- 12.24 Internal expressions of interest will be considered in the first instance, with external nominations only being invited if a suitable internal staff member cannot be found.
- 12.25 If an external module leader is chosen, the responsible academic partner must ensure that they comply and engage with university legal and contractual obligations. This may be achieved through the nomination of an internal deputy module leader if necessary. Where an external is chosen, consideration should be given to implementing a buddy system wherever possible.
- 12.26 Once approved, the responsible Associate Dean ensures that the employing academic partners with expressions of interests are informed of the outcome.
- 12.27 The Faculty Liaison Coordinator will forward details of the new module leader to the Student Records Office (SRO). SRO will ensure these details are updated in SITS.
- 12.28 Once approved the programme leader must ensure that the following are informed.
- students on the module
  - relevant programme committee
  - external examiners
  - awarding body (if this is not the university).
- 12.29 An annual summary of all decisions will be sent to Academic Planning Committee for noting so that the volume and trend of such decisions can be monitored.



### **Allocation of teaching responsibilities within a module team**

12.30 The module leader, within the context of a programme team, is responsible for determining the mode of delivery for that module and thus how much of it is taught by the module leader and how much is taught by other members of the module team, e.g. 100% face-to-face; 40% online and 60% face-to-face local delivery; 100% online.

12.31 All members of the module team will be listed within the relevant module descriptor.

### **Allocation of students to each of the delivering members of a module team**

12.32 When the mode of delivery is 100% face-to-face, students will be allocated to the member of the module team delivering at the academic partner where the students are based.

12.33 When the mode of delivery is a combination of face-to-face and online delivery, students can be taught by staff located across the partnership.

12.34 When the mode of delivery is 100% online, teaching will normally be shared between members of the module team regardless of location. Students will be grouped into cohorts and each cohort allocated to a member of the module team, with the module leader being allocated the first cohort.

12.35 It is recognised that a significant number of such allocations will not divide quite so evenly across the network. When such a situation arises, it will be the responsibility of the Associate Dean to lead discussion between the relevant line managers from each of the delivering academic partners to ensure that a solution is reached.

12.36 If the mode of delivery and / or suitable allocation of students are disputed by the module team, an arbitration process will apply. An advisory panel comprising the Head of Academic Standards and Enhancement, the relevant Associate Dean and a senior member of academic staff who is not substantively involved in the module, will seek to broker an agreement with the module team. The advisory panel will provide a final decision if an agreement with the module team cannot be brokered.

12.37 Timetabling the delivering members of the module team is the responsibility of the appropriate line manager within each employing academic partner.

### **Creation and identification of new module and programme teams**

12.38 When new curriculum is proposed, the Associate Dean will circulate a rationale and business case to members of the cognate subject group and Academic Planning Committee representatives, who are responsible for notifying relevant colleagues in their academic partner. Sufficient information on indicative academic content should be included to enable decision-making, but this will not be binding on the final programme structure.

12.39 This communication will include an agreed deadline and the appropriate contact details for the submission of any interest in joining the programme development team.



- 12.40 All respondents seeking to be part of the programme development team must confirm that they have the full support of their academic partner in undertaking this role.
- 12.41 During the curriculum development phase, all staff who have expressed interest in joining the programme development team will be advised of outline module titles and proposed module leaders.
- 12.42 When the proposed module leader is unopposed, their designation as module leader will be confirmed at the point of approval of the programme.
- 12.43 Where more than one member of the programme development team is interested in leading a module, or where no module leader can be identified from within the programme development team, then the existing process for appointing a module leader will apply. It is the responsibility of the relevant Associate Dean to oversee this process.



## 13 COLLABORATIVE PROVISION

---

- 13.1 The university seeks to develop collaborative provision with national and international partners where these are consistent with its mission, strategic objectives and quality standards. Collaborative partnerships will be established to achieve objectives or contribute to targets which the university could not achieve alone, and which will enhance the quality of the student learning experience.

### Principles

- 13.2 The university is responsible for the academic standards of all awards granted in its name, including the award of academic credit, wherever they are delivered, and through all types of collaborative arrangements.
- 13.3 The university's equivalence policy applies to students enrolled on programmes delivered at or by an external collaborative partner.
- 13.4 The university will seek to ensure that all collaborative provision is conducted in accordance with sector expectations, and the requirements of government and funding agencies and relevant awarding bodies.
- 13.5 The university recognises the scope of collaborative provision as: *'...[agreed] proportionate arrangements for effective governance to secure the academic standards and enhance the quality of programmes and modules that are delivered in partnership with others.'* (UK Quality Code, Principle 8: Operating partnerships with other organisations (June 2024)).
- 13.6 The university recognises different types of collaborative provision, including external validation, franchising, joint or dual awards, student exchange arrangements, etc. For each proposed collaborative partnership, the initial scrutiny, and exact approval, monitoring and review arrangements, will be proportionate to the financial, legal, academic and reputational risks involved.
- 13.7 The university expressly forbids 'serial' arrangements, i.e. the practice whereby provision franchised, or authority delegated, to an external partner is in turn validated or franchised to a third party.
- 13.8 The university will enter into a collaborative partnership only on the recommendation of EPSC, following appropriate and proportionate due diligence enquiries.
- 13.9 The university and the external partner will negotiate a written agreement setting out the nature and scope of each collaborative partnership, and respective roles and responsibilities of all parties. The agreement will become effective only when signed by the university Principal and Vice-Chancellor and the external partner's counterpart.

### External Partnerships Steering Committee

- 13.10 Academic Council has established the External Partnerships Steering Committee (EPSC) as a subcommittee with responsibility for formulating policy and practice in relation to



collaborative provision and partnerships with external institutions and other organisations both in the UK and overseas, in accordance with agreed university strategies.

- 13.11 Initial proposals relating to collaborative activity will be considered by the relevant Faculty Board(s) or Research Degrees Committee in the first instance. If endorsed, proposals will be considered by EPSC which will decide whether to support the proposal, and to determine the next steps for development and approval.

**Information on collaborative activity**

- 13.12 Information and guidance for staff about procedures and protocols relating to collaborative provision, including risk assessment, approval, management and review, will be maintained and reviewed regularly.
- 13.13 The university will maintain a register of all collaborative partnerships, and information about the collaborative provision operated through these partnerships is publicly available.



## 14A TAUGHT POSTGRADUATE REGULATIONS

---

### Introduction

- 14a.1 The university has adopted the Scottish Credit and Qualifications Framework (SCQF) as the basis for the development and design of its taught postgraduate programmes, which relate explicitly to SCQF Level 11. These regulations apply to taught postgraduate qualifications of Postgraduate Certificate (PgCert), Postgraduate Diploma (PgDip) and Masters programmes, including MA, MAcc, MLitt, MSc, MSci, MMus, MBA, MOptom, MTh and MEng.

### Taught postgraduate awards and credit framework

- 14a.2 The generic learning outcomes that will apply to taught postgraduate awards relate to those set out in the Scottish Credit and Qualifications Framework.
- 14a.3 Taught postgraduate modules will be assessed against specific module learning outcomes consistent with the relevant SCQF level generic learning outcomes.
- 14a.4 Normally, the amount and level of academic credit in a taught postgraduate programme will be as follows:

University qualifications and their SCQF credit requirements	
Masters	min 180 with min of 160 at SCQF Level 11
Postgraduate Diploma	min 120 with min of 100 at SCQF Level 11
Postgraduate Certificate	min 60 with min 40 at SCQF Level 11

*Table 9: PGT qualifications and their SCQF requirements*

- 14a.5 Within a taught Masters degree, no more than 90 credit points may be achieved through research component(s).
- 14a.6 Within any taught postgraduate programme it may be possible to include a limited amount of credit drawn from other levels of academic study, specifically from SCQF Level 10, or SCQF Level 12, within the limits of the minimum credit requirements set out above.

### Intermediate awards

- 14a.7 Students registered on a programme of study leading to a taught Masters degree will normally have the opportunity to exit the programme with an intermediate award. Intermediate awards will be specified at approval and will normally include:
- within a Masters degree, the intermediate awards of PgDip and PgCert
  - within a PgDip, the intermediate award of PgCert.

There are no intermediate awards in a PgCert.



## Programme structure and design

- 14a.8 Each SCQF credit point represents the outcomes of learning achieved through 10 notional hours of learning activity, making 1,800 hours for a Masters degree. A standard module has been adopted of 20 SCQF credit points, i.e. 200 hours of student activity. Owing to the shift to greater self-directed learning at postgraduate level, the ratio of tutor-directed to self-directed learning time will be lower than that found in undergraduate programmes, and will be defined in module descriptors at programme approval.
- 14a.9 All taught Masters degrees will have a mandatory element which will be a dissertation or major project component. A dissertation will normally be 60 credits. For professionally-oriented programmes, such as an MBA, a major project may be approved at a minimum of 40 credits.
- 14a.10 Programme design and specification will ensure that an appropriate range of specific module learning outcomes, referring to relevant subject benchmark statements, have been integrated into a coherent structure with progression leading to the characteristic generic outcomes of the award.

## Programme duration

*[Note: programme duration regulations only apply to taught postgraduate students formally registered for an academic award of PgCert, PgDip or Masters degree. They do not directly apply to those undertaking individual postgraduate modules for the purposes of continuing professional development (CPD).]*

- 14a.11 Masters degrees studied full-time represent one calendar year of full-time study. While the postgraduate academic year is not prescribed, normally it will include learning activity grouped into three semesters or equivalent. The minimum period of study is therefore:

Programme	Minimum period of study	
	Full-time	Part-time
Masters	45 weeks	6 semesters
Postgraduate Diploma	30 weeks	4 semesters
Postgraduate Certificate	15 weeks	2 semesters

Table 10: PGT minimum period of study

- 14a.12 The maximum period of registration for a postgraduate programme, whether full-time or part-time, will not normally exceed six years.

## Attendance and withdrawal

*[Note: programme attendance and withdrawal regulations only apply to taught postgraduate students formally registered for an academic award of PgCert, PgDip or Masters degree. They do not directly apply to those undertaking individual postgraduate modules for the purposes of CPD.]*



- 14a.13 The standard regulations for attendance and withdrawal, as set out in the admissions regulations, apply to postgraduate students.

#### **Admission to programmes leading to Masters and intermediate awards**

- 14a.14 **Standard entry:** the standard requirement for entry will normally be an Honours degree at the classification of 2.1, and not less than the classification of 2.2. The subject range and level of acceptable entry qualifications will be specified in the programme specification.
- 14a.15 **Non-standard entry:** candidates seeking admission to a postgraduate programme through non-standard entry will need to demonstrate equivalence of prior learning and achievement to that of standard entry. Specific requirements may be defined within the programme specification and admission will be at the discretion of the programme leader.
- 14a.16 The programme leader will establish an appropriate methodology for assessing the suitability of all candidates for entry to the programmes for which they have responsibility. Appropriate evaluation tools may include for example: portfolio material; interview; evidence of investigative research; references and published articles. The programme leader will review the learning requirements of all entrants on an individual basis.

#### **Students whose first language is not English**

- 14a.17 Students whose first language is not English applying for programmes taught through the medium of English must reach satisfactory IELTS scores, or the equivalent scores in other recognized Secure English Language Tests. For entry at SCQF levels 11-12, the requirement is an overall IELTS score of 6.5 with no element below 6.0.
- 14a.18 Alternatively, students must otherwise demonstrate that they have an adequate command of both written and spoken English to follow their programme before an offer of admission will be made.

#### **Arrangements for recognition of prior learning (RPL)**

- 14a.19 The standard regulations and processes for recognition of prior learning, as set out in the admissions regulations, apply to taught postgraduate students.

#### **Limit of credit that can be claimed**

- 14a.20 The maximum credit that can be awarded for RPL will be limited to a proportion of the 'taught' component of a Masters level award as follows:
- For students exiting with PgCert – 20 credits
  - For students exiting with PgDip – 60 credits
  - For students exiting with Masters – 60 credits.

#### **Management of assessment**

- 14a.21 The general provisions of the regulations relating to assessment and external examiners will also apply to taught postgraduate programmes except where variations are specified below. All teaching staff must use the postgraduate assessment coversheet.



Academic Standards and Quality Regulations 2025-26  
Postgraduate regulations

% age	Assessment marking system	
<b>80+</b> <b>Distinction:</b> <i>outstanding</i>	An answer close to all that is expected of a student. The answer will combine structure, organisation, a high level of critical thinking and argument, convincingly and in a co-ordinated way. It will demonstrate exemplary grasp of the topic. Full and critical use of relevant literature will be demonstrated. Presentation will match the substantive quality. All the criteria for 70-79 fulfilled to a high degree, plus...	
	<ul style="list-style-type: none"> <li>○ Exceptionally well presented, laid out and illustrated</li> <li>○ Self-critical awareness</li> <li>○ Many examples of original and imaginative thinking</li> <li>○ Excellent use of references and command of the literature</li> <li>○ In-depth critical and independent thinking</li> </ul>	<ul style="list-style-type: none"> <li>○ Displays mastery of concepts and theories</li> <li>○ Precisely focused discussion</li> <li>○ Extremely rigorous handling of data and evidence</li> <li>○ Comprehensive, concisely balanced argument</li> <li>○ Own ideas are very well linked to concepts, theories and literature</li> </ul>
<b>70-79%</b> <b>Distinction:</b> <i>excellent</i>	This work displays excellent and comprehensive understanding of the topic; critical awareness of issues and source material and use of appropriate empirical and / or theoretical material. It provides a well-structured argument, and the mark recognises learning at a high level. There is originality in the answer, and an effective grasp of literature.	
	<ul style="list-style-type: none"> <li>○ An attractive presented piece of work</li> <li>○ Rigorous handling of evidence</li> <li>○ Examples of creativity, originality, imagination, insight</li> <li>○ Own ideas developed and justified from theoretical frameworks which have been thoroughly analysed, applied and tested</li> </ul>	<ul style="list-style-type: none"> <li>○ Offers analytical comment, critical evaluation and independent discussion</li> <li>○ Comprehensive coverage of content / theory</li> <li>○ Realistic evaluation of own work, with appropriate rationale</li> </ul>
<b>60-69%</b> <b>Pass:</b> <i>merit</i>	A very good answer that is well presented, coherent and demonstrates critical judgement. It displays good coverage of the material and issues, and it is well laid out and argued. It may lack originality, or draw upon limited sources; however, referencing will be good.	
	<ul style="list-style-type: none"> <li>○ Well presented</li> <li>○ Referencing relevant and accurate</li> <li>○ Logical, coherent and lucid, and with good style</li> <li>○ Clear evidence of understanding</li> <li>○ Grammar and spelling accurate</li> <li>○ Conclusions well-argued and substantiated</li> <li>○ Appropriate selection of content / theory / style in key areas</li> <li>○ Good focus on module's aims and themes</li> </ul>	<ul style="list-style-type: none"> <li>○ Clear identification of the issues</li> <li>○ Demonstration of reading of relevant literature from a variety of sources</li> <li>○ Evidence of wide reading</li> <li>○ Appropriate application of theory</li> <li>○ Ability to be critical and appraise the literature retrospectively to further knowledge and thinking</li> <li>○ Evidence of evaluation / justification / critical thought</li> </ul>

Table 11: PGT assessment marking system



Academic Standards and Quality Regulations 2025-26  
Postgraduate regulations

% age	Assessment marking system	
50-59% Pass: adequate	A satisfactory answer indicating a grasp of the question and a reasonably structured answer. It offers fair coverage, picking most of the key issues, but lacks any real development. Some evidence of reading or wider appreciation of subject.	
	<ul style="list-style-type: none"><li>Logical, coherent and reasonably presented</li><li>Evidence of evaluation / justification / critical thought</li><li>Grammar and spelling largely accurate</li><li>Mostly accurate referencing</li><li>Thought given to selection of content / theory in key areas</li><li>Good level of understanding of topic area</li></ul>	<ul style="list-style-type: none"><li>Identification of the main issues to the subject</li><li>Conclusions largely well-argued and substantiated</li><li>Evidence of reading relevant literature round the subject</li><li>Focus on module’s aims and themes</li><li>Some application of theory</li></ul>
40-49% Marginal Failure: incomplete	This indicates a very basic understanding of the issues. Failure to highlight some of the key points, and the overall structure of the answer is weak and lacking in critical thinking. An understanding of the issues can be identified but there is a failure to elaborate or communicate them beyond description. Presentation is also likely to be poor quality and referencing poor and limited in scope.	
	<ul style="list-style-type: none"><li>Meaning apparent, but language not fluent, grammar and spelling poor</li><li>Superficial / limited evaluation</li><li>Limited evidence of reflection</li><li>Shows an attempt to be logical and organised</li><li>Referencing present but mostly inaccurate</li><li>Some key aspects of theory may be missed and application limited</li></ul>	<ul style="list-style-type: none"><li>Critical thought and rationale for work presented is inadequately demonstrated</li><li>Evidence of general understanding of concepts, but inaccuracy / confusion</li><li>Conclusions weak or unclear</li><li>Some of the writing is focused on module aims and themes</li><li>Evidence of some reading</li></ul>
30-39% Fail: deficient	A weak attempt not adequate for a pass because of basic errors and misconceptions. The argument is confused and the material thin, though there may be some limited evidence of understanding, but evidence is inadequate and / or highly descriptive. Presentation is probably poor with many inaccuracies in style, spelling etc.	
	<ul style="list-style-type: none"><li>Failure to address the question asked / task set</li><li>Lack of critical thought / analysis / theory</li><li>Confused / illogical thinking</li><li>No evidence of reflection</li><li>Inaccurate or inappropriate content / theory</li><li>Unsupported value judgements / generalisations</li><li>Disorganised content / style</li><li>Insubstantial / invalid conclusions</li></ul>	<ul style="list-style-type: none"><li>Unclear meaning</li><li>Little or no evidence of reading round the subject</li><li>Significantly under / over required specified length</li><li>No attempt to address modules’ focus, aims or themes</li><li>Referencing absent</li><li>Possible evidence of plagiarism</li></ul>



Academic Standards and Quality Regulations 2025-26  
Postgraduate regulations

% age	Assessment marking system
<b>0-29% Fail: very deficient</b>	A failure to grasp the question and / or provide any evidence of learning / understanding of the issues. Disorganised ideas / comments. Very poor structure and rambling answer which is extremely descriptive and grossly lacking in content. Presentation is very inadequate.

*Table 12: PGT assessment marking system cont.*

### Assessment marking system

- 14a.21 Assessment and feedback are crucial in the learning cycle. The university places great importance on the assessment of, and feedback on, student work. The following guidelines and actual feedback on assessed work will assist students in understanding what grades and marks mean so they can enhance their performance. These guidelines cannot cover all types of assignments, nor can all the points be apposite to all assignments. However, where grading of outcomes is employed, the criterion-based approach will be adopted.

### Module assessment

- 14a.22 The minimum overall pass mark on each module is 50% (weighted average). Students must attempt all components of summative assessment; non-submission of any component of assessment will result in a fail mark for the module overall. Students must normally achieve a minimum mark of 40% on each component of assessment in order to pass the module.
- 14a.23 A programme team may, at its discretion, specify a minimum overall pass mark of 50% in some or all of the components of assessment in a module.

### Reassessment

- 14a.24 Students failing to achieve the minimum requirements for passing a module may be offered one reassessment opportunity. The maximum module mark that can be obtained at reassessment shall be 50%. In deciding whether a student should be offered this opportunity, the board of examiners will take into account the number and extent of the module failures that a student has had during the session in question and decide, on all of the evidence available, whether the student has a reasonable chance of redeeming the position. Boards of examiners shall not withhold permission for students to be reassessed for a module(s) without good cause.
- 14a.25 If a student fails to pass a module at the reassessment, the board of examiners may permit the student to repeat the module for a second and final time, and the maximum module mark that can be obtained at the repeat shall be 50%. An opportunity to repeat will not be offered where doing so contravenes practice required by professional or accreditation bodies.



- 14a.26 The board will exercise its discretion to determine the nature, conditions and time of the reassessment: normally, where a module is assessed by more than one component of assessment then the components(s) that have been passed will not be used. The board of examiners may, at its discretion, require a student to repeat a module before reassessment takes place.

### **Progression**

- 14a.27 A student on a taught postgraduate programme will normally be permitted to continue with their studies while carrying one failed 20-credit module, subject to meeting any module pre-requisite requirements. Where a student has failed more than one module, they will not normally be permitted to enrol on new modules within that programme until the failures have been redeemed.
- 14a.28 A student may progress to the dissertation stage of a Masters programme while carrying one failed 20-credit module, subject to meeting any module pre-requisite requirements.
- 14a.29 A programme may, subject to approval, specify additional criteria for progression from PgCert to PgDip, or from PgDip to Masters.

### **Distinction in the awards of PgCert, PgDip and Masters**

- 14a.30 Boards of examiners will be guided by the following regulations which set out the normal minimum requirements that are expected of a student in order to gain Distinction in their award. However, in arriving at a decision, the board of examiners can look beyond these regulations if this is deemed to be appropriate to the circumstances. This can only be done if it is not to the detriment of the student or to the integrity of the award:
- a student may achieve the award of PgCert with Distinction if a minimum of 40 credits at SCQF Level 11 have been achieved at Distinction grade
  - a student may achieve the award of PgDip with Distinction if a minimum of 60 credits at SCQF Level 11 have been achieved at Distinction grade
  - a student may achieve the award of Masters with Distinction if a minimum of 100 credits at SCQF Level 11 have been achieved at Distinction grade, including the dissertation module.

### **Merit in the awards of PgCert, PgDip and Masters**

- 14a.31 Boards of examiners will be guided by the following regulations which set out the normal minimum requirements that are expected of a student in order to gain Merit in their award. However, in arriving at a decision, the board of examiners can look beyond these regulations if this is deemed to be appropriate to the circumstances. This can only be done if it is not to the detriment of the student or to the integrity of the award:
- a student may achieve the award of PgCert with Merit if a minimum of 40 credits at SCQF Level 11 have been achieved at Merit grade
  - a student may achieve the award of PgDip with Merit if a minimum of 60 credits at SCQF Level 11 have been achieved at Merit grade
  - a student may achieve the award of Masters with Merit if a minimum of 100 credits at SCQF Level 11 have been achieved at Merit grade, including the dissertation module.



## 14B POSTGRADUATE RESEARCH DEGREE REGULATIONS

---

### Introduction

- 14b.1 All postgraduate research degree (PGR) students are bound by, and must satisfy, the following regulations and are advised to read them in conjunction with the university's PGR Code of Practice for Students and Supervisors (PGR Code of Practice) and other relevant university policies. Aligned with the UK Quality Code for Higher Education, the PGR Code of Practice sets the context for implementation of the regulations and provides detailed guidance and practical support in relation to the responsibilities of research students, supervisors and academic partners.
- 14b.2 The Research Degrees Committee (RDC) is empowered by Academic Council to recommend the award of research degrees on behalf of the university Court.

### Research awards

- 14b.3 The university has adopted the Scottish Credit and Qualifications Framework (SCQF) as the basis for the development and design of its postgraduate research degree programmes. Postgraduate research awards offered relate explicitly to SCQF Levels 11 and 12 and the generic learning outcomes that will apply are those set out in the SCQF level descriptors .
- 14b.4 The university offers the following research awards:

Degree	Description
Higher Doctorate (DLitt, DSc, DD, DTech, DEng, DEd, DSocSc, DArts)	<i>See Section 14c – awarded to current or former staff only</i>
Doctor of Philosophy (PhD)	Based on a supervised research project during which the student is registered at a higher education institution. All doctoral students are required to make an original contribution to knowledge by conducting an independent research project.
Professional Doctorate (DLitt, DSc, DD, DTech, DEng, DEd, DSocSc, DArts)	Based on a supervised research project in the student's profession, rooted in an academic discipline.
Masters by Research (normally MRes)	Based on independent research, undertaken with supervision and guidance, for a shorter period of time than a doctoral degree. MRes degree may include up to 60 credit points through taught components.

Table 13: Research awards offered by the university

- 14b.5 The university may enter into joint award arrangements with other institutions, subject to its policies, procedures and regulations on collaborative provision.



## Admission

- 14b.6 The standard entry requirements are:
- a postgraduate Masters degree from a degree awarding body recognised by the UK government, or equivalent, or
  - a first or upper second class honours degree from a degree awarding body recognised by the UK government, or equivalent, or
  - other qualifications or experience that affords sufficient evidence of an applicant's ability to work at the academic level associated with the target award.
- 14b.7 Applications will be considered by RDC which has delegated authority from Academic Council to approve or reject applications. If approved, RDC will also:
- approve the proposed thesis topic
  - approve a suitable supervisory team, and
  - ensure that the principal or director of the academic partner or research area (or nominated representative) undertakes to provide suitable facilities and resources to support the student for the duration of study.
- 14b.8 Applicants whose first language is not English must normally reach satisfactory IELTS scores, or the equivalent scores in other recognised Secure English Language Tests as outlined in the university's admissions regulations.
- 14b.9 The standard university admissions policies, procedures and regulations must be adhered to.

## The research degree programme

### Enrolment

- 14b.10 All students are required to enrol at the start of their programme of study. Thereafter, as continuing students, they are required to enrol at the commencement of each subsequent academic year during which they are undertaking study.

### Duration of Study

- 14b.11 The periods of study for research degrees are as follows:

	Degree	Mode of Attendance	Standard Period	Maximum Period
<b>First registered FROM 2021-22</b>	PhD	Full-time	36 months	48 months
	PhD	Part-time	72 months	84 months
	MPhil (PhD exit award only)	Full-time	24 months	48 months
	MPhil (PhD exit award only)	Part-time	42 months	66 months
	Masters by Research (MRes)	Full-time	12 months	24 months
	Masters by Research (MRes)	Part-time	24 months	36 months

Table 14: Periods of study if registered FROM 2021-22



Academic Standards and Quality Regulations 2025-26  
Postgraduate regulations

	Degree	Mode of Attendance	Standard Period	Maximum Period
<b>First registered BEFORE 2021-22</b>	PhD	Full-time	36 months	60 months
	PhD	Part-time	60 months	84 months
	MPhil (PhD exit award only)	Full-time	24 months	48 months
	MPhil (PhD exit award only)	Part-time	42 months	66 months
	Masters by Research (MRes)	Full-time	12 months	36 months
	Masters by Research (MRes)	Part-time	24 months	48 months

*Table 15: Periods of study if registered BEFORE 2021-22*

14b.12 RDC has the authority to recognise study at the same level undertaken in another institution as counting towards the total period of study, provided that it has not previously contributed to an academic award. In no case shall the period of registration at the university for any research degree be less than 12 months (full-time) or 24 months (part-time).

14b.13 Individuals applying for or transferring to a PhD may seek an exception to the standard period of study on the basis of previous study, provided that it has not already contributed to an academic award:

- for full-time students, the total period of study shall not be reduced to less than 24 months (PhD) or 12 months (MPhil), or
- for part-time students, the total period of study shall not be reduced to less than 36 months (PhD) or 24 months (MPhil).

#### **Extending registration**

14b.14a For students first registered from 2021-22:

**Extension period** - If a thesis is not submitted for examination at the end of the thesis pending period (PhD) or at the end of the standard period of registration (MRes), on application by the student, RDC may exceptionally grant an extension of up to 12 months. No further period of extension will be permitted, and no extension will normally be approved that results in a thesis being submitted beyond the permitted maximum period of study.

14b.14b For students registered prior to 2021-22:

**Continuation period** - If a thesis is not submitted for examination at the end of the standard period of registration, full-time and part-time students will be entered into a continuation period of registration, whereby a further 12 months is given to complete their thesis.

During this time, the student will be entitled to continued access to library and computing facilities, but access to facilities for research may be limited and will be made available at the discretion of the academic partner. Supervision guidance will also continue to be provided, albeit likely to be on a more limited basis.



If a thesis has not been submitted for examination at the end of the continuation period, on application by the student, RDC may grant another extension of up to 12 months. No further period of extension will be permitted, and no extension will normally be approved that results in a thesis being submitted beyond the permitted maximum period of study.

**14b.14c PhD Thesis Pending** - Only available for students first registered from 2021-22:

If a thesis has not been submitted for examination at the end of the standard period of registration, full-time and part-time PhD students will be entered into a thesis pending period, whereby a further 12 months is given to complete their thesis. Some UKRI-funded programmes may differ.

During this time, the student will be entitled to continued access to library and computing facilities, but access to facilities for research may be limited and will be made available at the discretion of the academic partner. Supervision guidance will also continue to be provided, albeit likely to be on a more limited basis.

**Suspensions**

- 14b.15 On application by the student, RDC may grant a suspension of studies of up to 12 months in a single application. The maximum amount of time that may be suspended is 24 months. If a student does not return to study after 24 months of suspension their registration will be terminated. Time elapsed during a period of suspension will not count as part of the period of study in section 14b.11.

**Change in mode of study**

- 14b.16 On application by the student, RDC may allow those admitted as full-time students to change their mode of study to part-time for a specified period, or those admitted as part-time students to change their mode of study to full-time for a specified period. In such cases, the total period of study will be adjusted pro-rata.

**Withdrawal and termination**

- 14b.17 Students seeking to withdraw permanently from their research programme should discuss the matter with their Director of Studies or supervisory team and complete the student withdrawal form. Further information about the withdrawal process can be found on the university website ([Thinking of leaving?](#)).
- 14b.18 RDC may terminate the registration of a student at any time provided it is satisfied there is sufficient reason for doing so (for example, unsatisfactory progress, see section 14b.22 below). Students may appeal their exclusion or termination of registration through the appeals procedure.

**Supervision and progression**

- 14b.19 The university will appoint an appropriate and qualified supervisory team, led by a Director of Studies.
- 14b.20 The Director of Studies shall be a suitably qualified individual currently employed by the university or one of its academic partners. RDC may consider other suitably qualified individuals on an exceptional basis. The Director of Studies has responsibility for the overall



management and quality assurance of the student's supervision and for assessing the student's performance and engagement with the research programme.

- 14b.21 All students are required to make satisfactory and timely progress throughout their programme of study and participate in regular progress monitoring reviews.
- 14b.22 If a doctoral research degree student does not make satisfactory progress, their supervisory team may recommend to RDC that the student be transferred to a lower level of degree as appropriate or have their registration terminated.
- 14b.23 Students registered for all Masters by Research awards, who, with the support of their supervisory team, wish to progress instead to the award of PhD may apply to RDC for approval of transfer.

### **Assessment**

- 14b.24 Final assessment of a student for a research degree award normally involves:
- Submission of thesis or equivalent body of work for examination
  - Independent examination of thesis or equivalent body of work by individual examiners
  - Oral examination of the student by an examination panel.

#### **Appointment of examiners**

- 14b.25 The university will appoint an examination panel to examine each thesis or equivalent body of work. The panel will normally consist of one internal examiner, one external examiner and one independent internal panel chair.

#### **Submission of theses or equivalent bodies of work**

- 14b.26 All students shall present to the university for examination a thesis or equivalent body of work embodying the results of their research, before the end of their approved period of study.
- 14b.27 Students who fail to submit before the end of their approved period of study will be automatically withdrawn and will, therefore, not be permitted to submit after that time. In such cases, a student may apply to RDC to be reinstated in order to submit. If, exceptionally, reinstatement is approved, the student's thesis or equivalent body of work will be examined, subject to payment of a reinstatement fee.
- 14b.28 Every thesis or equivalent body of work submitted must:
- be written in English or, where appropriate, Gaelic
  - be prefaced by a signed formal declaration stating that:
    - it has been composed by the student
    - it is a record of work that has been done by that student
    - if any results were obtained partly in association with others, the nature or extent of this help, if substantial, is specifically acknowledged
    - not have been submitted for another degree awarded by this or any other university
  - contain an abstract not exceeding 300 words.



### **Examination of thesis or equivalent body of work**

- 14b.29 Each examiner must first receive a copy of the thesis or equivalent body of work in advance of the oral examination and independently prepare a report detailing their preliminary assessment. These independent reports must be shared with panel members prior to the oral examination in order to support preparation for the oral examination.
- 14b.30 Oral examinations will normally be held within two months of the date of the initial dispatch of the thesis or equivalent body of work to the examiners.
- 14b.31 An oral examination will normally take place only when a thesis or equivalent body of work is first submitted.
- 14b.32 Oral examinations normally take place at the university or one of its academic partners, but may be held elsewhere or by video conference or similar method by the mutual agreement of the examination panel and the student.
- 14b.33 A member of the supervisory team may attend the oral examination as an observer on the agreement of the examination panel. The observer must take no part in the examination and must withdraw from the examination with the student prior to the deliberations of the examiners.

### **Criteria for assessment**

- 14b.34 The standards to be attained for each degree require that:
- For doctoral degrees, the thesis makes a distinct and original contribution to knowledge in the discipline and contains work which is considered to be worthy of publication
  - For the degree of MPhil, the thesis makes a contribution to knowledge, affords evidence of originality and demonstrates application of independent research
  - For the degree of Masters by Research, the thesis displays evidence of originality or is a satisfactory, orderly and critical exposition of existing knowledge within the field concerned.

### **Outcomes of examination**

- 14b.35 The examination panel will recommend one of the following outcomes:

	<b>Outcome</b>	<b>Criteria</b>
1	Pass	The degree is awarded unconditionally.
2	Pass, subject to minor corrections	The degree is awarded, subject to the completion of minor corrections to the satisfaction of the internal examiner.
3	Pass, subject to major corrections	The degree is awarded, subject to the completion of major corrections to the satisfaction of the internal and external examiners.
4	Resubmit	The student is required to make substantial corrections and to submit the thesis for re-examination by the internal and external examiners. This may require a second oral examination. Resubmission is permitted once only, and only minor corrections are permissible.



Academic Standards and Quality Regulations 2025-26  
Postgraduate regulations

	Outcome	Criteria
5	Award of lower degree	This outcome is available only where the target award is a doctoral degree. The intended degree is not awarded, but an MPhil is awarded instead. Minor corrections will be permitted.
6	Fail	The student is not awarded any degree.

*Table 16: Outcomes of examination*

- 14b.36 Following the oral examination, the panel will provide feedback to the student on its recommendations.
- 14b.37 The panel will submit to RDC for approval a jointly written report detailing its recommendations, supported by evidence to substantiate the outcome. Any corrections and amendments required will be listed, along with any requirement for a second oral examination. This report must be submitted to the university within one week of the oral examination taking place.
- 14b.38 If the examiners on the panel cannot substantially agree regarding the merits of the thesis, they will each be required to submit an independent report to RDC. These reports must include the same detail as required in section 14b.37 above. RDC will determine the most appropriate course of action, which can include recommending the appointment of a further external examiner.
- 14b.39 The student will be given formal confirmation of the outcome and a statement of corrections required if appropriate, normally within two weeks of the oral examination.
- 14b.40 The deadlines for corrections and/or re-submission will normally be:
- three months from the date of the exam outcome notification letter for minor corrections
  - six months from the date of the exam outcome notification letter for major corrections, or
  - twelve months from the date of the exam outcome notification letter for re-submission.
- 14b.41 Students who fail to make the necessary corrections, or to re-submit their thesis, within the stated deadline will not normally be permitted to submit after that date and will be withdrawn.
- 14b.42 The corrected/re-submitted thesis will be signed off by the internal examiner on behalf of the examination panel and confirmation of this sent to RDC for information.
- 14b.43 Once approved by RDC, the university will provide confirmation to the student in writing that they have been awarded the degree.
- 14b.44 If a student seeks to appeal against the outcome of a research degree examination they should follow the appeals procedure.



### **Posthumous awards**

- 14b.45 On application by a Director of Studies, RDC may recommend the award of a posthumous research degree. A posthumous research degree will normally be awarded if a student has, at least, completed all but the last six weeks to two months (one-year degree), three to four months (two-year degree), four to six months (three-year degree); has effectively completed their research / investigation; and has moved into the writing up phase of their work and has submitted most, if not all, of their chapters in draft.

### **Academic misconduct**

- 14b.46 PGR students are subject to the university's academic misconduct policy and procedures.

### **Thesis access, copyright and intellectual property rights**

- 14b.47 Following submission of the final, corrected version of a student's thesis an electronic copy of the thesis will normally be stored within the university's institutional repository. A hard copy of the thesis will also be stored by the university.
- 14b.48 On application by the student, arrangements for confidentiality of theses may be approved by RDC and are normally limited to two years.
- 14b.49 PGR students are subject to the university's intellectual property policy.



## 14C REGULATIONS AND GUIDANCE FOR HIGHER DOCTORATES

---

### Awards

14c.1 The following Higher Doctorates may be awarded by the university:

- Doctor of Letters (DLitt)
- Doctor of Science (DSc)
- Doctor of Divinity (DD)
- Doctor of Technology (DTech)
- Doctor of Engineering (DEng)
- Doctor of Education (DEd)
- Doctor of Social Science (DSocSc)
- Doctor of Arts (DArts)

### Eligibility

14c.2 Candidates must be either or both of the following:

- a current member of staff at any academic partner or the executive office associated with UHI – they must have been in post for a minimum of three years at the time of application
- former UHI staff, providing their previous office in UHI totalled at least three years.

14c.3 A Higher Doctorate will be awarded to applicants who demonstrate:

- command over a particular field of study and a significant contribution to understanding and the advancement of knowledge within that field over an extended period and at the highest academic standard of contribution
- that the research has been carried out over a sustained period of time and led to examples of original, published work of distinction in high impact journals or other material of distinction across that period
- that the candidate is a leading (international) authority in the field of study
- relevant examples of the impact, influence and significance of their contribution in academic terms and/or in broader contribution to society.

### Application for candidature

#### Notification

14c.4 Before making a formal application for an award of a Higher Doctorate, prospective candidates are advised to seek the advice of the Dean of Research. If they are advised not to proceed to *prima facie* submission as a result of the preliminary consideration, they will be advised accordingly, but may still choose to continue to make a submission if they wish to do so.

14c.5 The timetable for application is as follows:

Application process	Deadline
Application deadline	30 September
Panel considers applications and notifies candidates	31 October
Applicant prepares full submission	November-March



Academic Standards and Quality Regulations 2025-26  
Postgraduate regulations

Application process	Deadline
Examiners review submission and submit recommendation report or request viva examination	April-May
Graduate School arranges viva examination where applicable	June
Viva examination takes place (if requested by examiners)	July-August
Examiners provide recommendation report once viva has taken place	August-September
Outcome reported to candidate, depending on whether or not a viva examination has taken place	July-October

Table 17: Higher doctorates application timetable

**Preliminary submission for *prima facie* assessment**

- 14c.6 Complete initial submission form (in English or English and Gaelic<sup>1</sup>) and submit to [gradresearch@uhi.ac.uk](mailto:gradresearch@uhi.ac.uk) by 30 September, with the following attachments:
- The work for consideration: applicants have discretion to select outputs from their corpus of publications and/or other outputs that best represent the significance of their academic contribution to their chosen field according to the criteria above and to list these accordingly. This should be accompanied by a contextualising statement of 1000-2000 words, summarising the primary basis of their case for the Higher Doctorate award. The outputs selected should ideally cover an appropriate timespan but will not ordinarily include all outputs produced. Outputs will be assessed on the basis of their quality, contribution and impact, which should be of the highest order, and not on quantity
  - An abbreviated CV which summarises academic work, including a list of all published works, which can include weblinks if appropriate.
- 14c.7 A panel consisting of the Dean of Research, a representative from the candidate's academic partner (or from another academic partner where necessary) and an individual with expertise in the relevant area from the appropriate research cluster will consider each application and will recommend the application to move forward to examination if the application meets the criteria as outlined above. This will normally be communicated back to the applicant within four weeks following the deadline for submission.
- 14c.8 In the event that an initial application is unsuccessful, that is that the work and evidence submitted does not in principle meet the criteria, the candidate will not be able to register for the degree. In this event a candidate may reapply after a period of not less than three years from first submission.

**Submission of work for a Higher Doctorate**

- 14c.9 If the application is endorsed for examination the candidate will then have up to a further six months to prepare their corpus submission for consideration by the examiners. This should

---

<sup>1</sup> Submission of the initial application should be in English or English and Gaelic, to allow provisional assessment by individuals who may not be Gaelic speakers. However, the full application may be presented in Gaelic alone or Gaelic and English in relevant cases, if a request to do so is included in the initial submission form.



Academic Standards and Quality Regulations 2025-26  
Postgraduate regulations

be submitted in electronic format and should include the portfolio of publications being submitted for the award, together with:

- a. summary of contents
- b. detailed commentary on the candidate's view of the significance of the work (between 10,000-30,000 words); if the submission is in Gaelic there can be a 20% increase on this word limit
- c. an abbreviated CV which summarises academic work and contributions
- d. full statement on the extent of the contributions of all other persons where some or all of the items submitted are collaborative
- e. statement by the candidate as to whether the work(s) or any part thereof has been submitted, successfully or unsuccessfully, for an award of this or any other university. Please note that work that has been presented previously as part of the thesis or dissertation for a taught or research degree will not be considered for the award but can be included for a complete representation of research.

- 14c.10 The portfolio of publications submission may take the form of, for example, books, contributions to journals, patent specifications, reports, creative work and designs, and it may also include other evidence of original work.
- 14c.11 The contents of a submission must be in the English language except where it has been agreed that the full application may be submitted in Gaelic or Gaelic and English, as stated on the preliminary submission (see 14c.6).
- 14c.12 Minimum registration period will be 12 months and maximum registration period will be 24 months.
- 14c.13 The candidate will be invoiced [a fee](#) by UHI to cover examiner and administrative costs. If financial cost is an issue, please discuss with the Dean of Research.

### Assessment and examination

- 14c.14 Two external examiners will normally be appointed, via an examiners nomination form, sent to [gradresearch@uhi.ac.uk](mailto:gradresearch@uhi.ac.uk). The candidate should suggest 2-3 external examiners for the lead of the appropriate research cluster to submit on the nomination form. The research cluster lead should provide a further 2-3 external examiner nominations and these can be recommendations from suggested examiners. At least five nominations will then be considered by the panel who considered the *prima facie* submission and examiners selected either from those nominated or in some cases other examiners may be appointed.
- 14c.15 Examiners will have two months to review the submission and to each provide a report with the recommendation that the degree be awarded or not awarded, with no classification or distinctions, but including a rationale for the recommendation. This report will be submitted on an examiner's report form.
- 14c.16 The examiners may request a viva, in which case an internal assessor will be appointed. The internal assessor should be as close to the academic area of the submission as possible, and they will chair the viva. This may take place by VC if travel costs are prohibitive, not least where international-based experts are involved or for other reasons. Relevant travel expenses will be reimbursed if there is a requirement to travel to the viva. Following review



Academic Standards and Quality Regulations 2025-26  
Postgraduate regulations

of the submission and the viva, a further 1-2 months can be taken to provide the recommendation report as per above.

- 14c.17 These recommendations will be considered by Research Degrees Committee (RDC) and Academic Council for ratification. The RDC chair will take action to inform the candidate of the outcome of RDC's decision (which will be pending formal approval by Academic Council) and publicise as required thereafter. Where examiners cannot reach a joint recommendation, they should submit individual recommendations. A further external examiner shall be appointed, and they shall be given access to the original reports and make a final recommendation.

**Resubmission**

- 14c.18 Resubmission for a Higher Doctorate would be considered providing that a minimum of three years has elapsed since the first application and that the new submission contains significant new material.

**Award**

- 14c.19 Awardees will be able to attend their academic partner graduation ceremony.
- 14c.20 Awardees of Higher Doctorates will be invited to provide a keynote presentation at the UHI Research Conference or similar event.

**Appeals and academic misconduct**

- 14c.21 Academic appeals will only be considered on matters of procedural irregularity. Those involved in considering academic appeals will not review the question of academic judgement.



## **15 APPOINTMENT AND ROLE OF EXTERNAL EXAMINERS**

---

- 15.1 The university is responsible for appointing external examiners to its degree provision and these procedures are designed to ensure that proper consideration is given to the nomination and appointment of external examiners. This section is applicable to all taught degree provision, including that delivered under a collaborative arrangement with an external partner.
- 15.2 Where provision is accredited by a professional, statutory or regulatory body (PSRB), the university will comply with that PSRB's requirements relating to external examiners.

### **Role of external examiners**

- 15.3 The role of external examiners is to provide assurance on:
- whether academic standards are set and maintained at appropriate levels
  - whether the assessment process is appropriate, rigorous, equitable, effective and conducted in line with policies, regulations and guidance
  - whether the standard of student performance is properly judged against the level set, and
  - the comparability of the standard and level of student achievement with those in other higher education institutions.
- 15.4 All external examiners will be expected:
- to make their judgements impartially on the basis of the work submitted for assessment
  - to attend relevant meetings of the board(s) of examiners of which they are members
  - to endorse explicitly the outcomes of the assessment processes they have been appointed to scrutinise, provided that they are satisfied with these outcomes
  - to report annually to the university in accordance with guidance provided
  - to report to the Principal, in confidence, on any matters of serious concern about the academic standards or quality of provision.
- 15.5 External examiners will be appointed to comment and report on all assessments which count towards an award approved by the university. To this end, all modules at SCQF Levels 7, 8, 9, 10 and 11 and all approved programmes of study will be allocated to an external examiner.
- 15.6 External examiners may undertake their role in the capacity of:
- Tier 1 External Examiner - for module resulting and programme delivery issues
  - Tier 2 External Examiner - for awarding and progression.
- 15.7 Tier 1 External Examiners will:
- be consulted on the form and content of proposed coursework and examinations and other assessments and reassessment that count towards an award, so that all students may be assessed fairly in relation to the regulations and in such a way that the external examiner will be able to judge whether they have fulfilled the learning outcomes of the module and reached the required standard
  - have access to an agreed sample of all summatively assessed work on the modules they are responsible for
  - moderate the marks awarded by internal examiners, and



- d. consider all available information relating to modules they are responsible for, and to raise any issues at the Tier 1 Board of Examiners.

15.8 Tier 2 External Examiners will be expected:

- a. to ensure that recommendations for award and progression are reached in accordance with the regulations, and
- b. to participate as required in any review of decisions about individual students' outcomes taken during their term of appointment.

**Appointment of external examiners**

- 15.9 The Faculty Board is responsible for the appointment of external examiners, and will do so in accordance with the criteria and procedure below.

- 15.10 Each Faculty will determine the number of Tier 1 and Tier 2 External Examiners it requires, and the range of expertise they should collectively provide. External examiners may be appointed as either Tier 1 or Tier 2 External Examiners, or both. If an individual is appointed as both Tier 1 and Tier 2 External Examiner, these appointments will be made under separate contracts, to cover the additional reporting and attendance at meetings required.

**Criteria for the appointment of external examiners**

- 15.11 Tier 1 External Examiners' academic and / or professional qualifications and experience will be appropriate to the subject areas to which they are appointed. Tier 2 External Examiners will be from an academic discipline which is in the broad cognate area of the programmes to which they are appointed.

- 15.12 In considering nominations, the Faculty will expect to see evidence of at least some of the following areas of knowledge, qualifications and experience. Not all external examiners will be expected to meet all criteria:

- a. knowledge and understanding of UK sector agreed reference points for the maintenance of academic standards and assurance and enhancement of quality
- b. competence and experience in the relevant subject areas
- c. relevant academic and/or professional qualifications to at least the level of the qualification being externally examined, and/or extensive practitioner experience where appropriate
- d. competence and experience relating to designing and operating a variety of assessment tasks appropriate to the subject and operating assessment procedures
- e. sufficient standing, credibility and breadth of experience within the discipline to be able to command the respect of academic peers and, where appropriate, professional peers
- f. familiarity with the standard to be expected of students to achieve the award that is to be assessed
- g. fluency in English (or Gaelic, where appropriate)
- h. meeting applicable criteria set by professional, statutory or regulatory bodies, where relevant
- i. awareness of current developments in the design and delivery of relevant curricula
- j. competence and experience relating to the enhancement of the student learning experience.



- 15.13 The Faculty will seek to ensure that no conflicts of interest arise, and hence will not appoint as external examiners anyone in the following categories or circumstances:
- a. member of Court or the governing body of any of the academic partners or one of their collaborative partners
  - b. a current employee or any of the academic partners or one of their collaborative partners
  - c. anyone with a close professional, contractual or personal relationship with a member of staff or student involved with the programme of study
  - d. anyone required to assess colleagues who are recruited as students to the programme of study
  - e. anyone who is, or knows they will be, in a position to influence significantly the future of students on the programme of study
  - f. anyone significantly involved in recent or current substantive collaborative research activities with a member of staff closely involved in the delivery, management or assessment of the programme(s) or modules in question
  - g. former staff or students unless a period of five years has elapsed and all students taught by or with the external examiner have completed their programme(s)
  - h. a reciprocal arrangement involving cognate programmes at another institution
  - i. the succession of an external examiner from an institution by a colleague from the same subject area in the same institution
  - j. the appointment of more than one external examiner from the same subject area of the same institution.
- 15.14 If an actual or potential conflict of interest arises during the term of an external examiner's appointment, the Head of Academic Standards and enhancement must be notified of the circumstances at the earliest opportunity.

### **External examiners' reports**

- 15.15 External examiners are required to report annually to Academic Council, using the appropriate proforma, to provide informative comment and recommendations on:
- the academic standards set for awards, in relation to external reference points
  - the assessment process in relation to modules and programmes to which they have been appointed
  - the comparability of academic standards and the achievements of students in the university with those in other UK higher education institutions
  - good practice and innovation relating to learning, teaching and assessment
  - opportunities to enhance the quality of the learning opportunities provided to students.
- 15.16 External examiners are required to submit an electronic copy of their report via email, due by 31 August each year. No fees will be paid to an external examiner until the report has been received.
- 15.17 External examiners' reports will be discussed with relevant staff and student representatives, and will be made available to students. A response will be sent by the Faculty to each external examiner, addressing the issues raised in the report.
- 15.18 Quality Assurance and Enhancement Committee will receive an annual analysis of all external examiners' reports to consider recurrent and institutional-level issues.



### **Term of appointment**

- 15.19 External examiners are normally appointed for a period of four years. Appointments will normally come into effect on 1 September. In exceptional circumstances the Faculty may extend the initial appointment for a period of no more than 12 months.
- 15.20 External examiners may be reappointed in exceptional circumstances but only after a period of five years or more has elapsed since their last appointment.
- 15.21 External examiners may normally hold no more than two external examiner appointments at any one time, whether or not these were within the same institution.

### **Termination of external examiners' contracts**

- 15.22 The university reserves the right to terminate the contract of an external examiner who, without due cause, fails to submit a report, or otherwise fails to carry out the duties of their appointment. In such circumstances, the Deputy Principal will notify the external examiner of the termination in writing.
- 15.23 An external examiner's contract may also be terminated if a conflict of interest arises which cannot be satisfactorily resolved, or if the relevant provision is discontinued.



## **16 ADMISSIONS AND ENROLMENT**

---

### **Principles of admission**

- 16.1 All applications to programmes shall be dealt with in accordance with the university's admissions policy and procedures. The university's admissions policy, practice and procedures shall be aligned with the principles set out in the UK Quality Code.
- 16.2 The principal criterion for determining a candidate's suitability for admission to a programme is that there is a reasonable expectation that they will be able to achieve the learning outcomes of the programme and achieve the standard required for the award.
- 16.3 Entry requirements are intended to facilitate assessment of the candidate's ability to achieve the learning outcomes of the programme. Entry requirements for all programmes are identified at the point of approval and included in the relevant programme documentation.
- 16.4 Applicants for courses leading to professional qualifications must demonstrate they meet the Fitness to Practise standards set by the university and regulatory bodies, ensuring they can fulfil the ethical and professional expectations of their chosen profession.
- 16.5 The university is committed to widening access to higher education and encourages applications from prospective students who do not have standard entry qualifications.
- 16.6 The university is committed to the principle of recognising prior learning, whether certificated or not. Where prior informal learning can be assessed, it may be recognised for the purpose of entry to a programme, and/or for the award of academic credit towards a degree programme (see section 16.24 onwards).
- 16.7 The university operates a fair and open admissions process committed to equality of opportunity and non-discrimination. All applications are considered on merit and on the basis of ability to achieve, without discrimination on grounds of age, disability, gender identity, pregnancy and maternity status, race, religion and/or belief, sex, sexual orientation or socio-economic background. The university welcomes applications from all prospective students and aims to provide appropriate services to students with learning support needs or disabilities.
- 16.8 The university is a data controller as defined in the Data Protection Act 1998. It is required to collect personal data in order to process applications and to reach decisions on entry. Any data provided in relation to an application (including data provided to the university by UCAS) will be treated in confidence by selectors and administrative staff in relevant departments.
- 16.9 In the event of a successful application the data will be held as the basis of the ongoing student record and will only be passed to other organisations outside the academic partnership where it is obliged to do so by law for statistical reporting (e.g. Scottish Funding Council) and to awarding bodies for certification purposes, or as agreed by the student.



## Entry requirements

- 16.10 The university publishes standard minimum entry requirements for its undergraduate degree programmes, which may be reviewed from time to time.
- 16.11 Programme teams may seek approval for specific entry requirements at a higher level than the standard minimum entry requirements, in relation to academic qualifications and/or English language proficiency.
- 16.12 Entry requirements for SQA awards offered by the university are those agreed through the university's SQA programme approval process and not those shown in SQA documentation. SQA guidance will be taken into account when setting entry requirements for SQA awards.
- 16.13 The approved entry requirements and admissions process for each programme, including SQA programmes, will be applied equally by all academic partners providing entry to that programme, ensuring equivalence of opportunity to all applicants regardless of location.
- 16.14 Applicants will be required to meet the entry requirements for the programme on which they initially enrol, regardless of any intention to progress to a higher level qualification (e.g. top-up degree) at a later stage.
- 16.15 Students must provide evidence of their Fitness to Practise, including health declarations and disclosure checks (e.g. PVG Scheme) when applicable. Failure to meet these requirements may result in the withdrawal of an offer or additional conditions for enrolment.
- 16.16 Applicants for undergraduate programmes who do not have standard entry qualifications, but who have relevant academic or professional qualifications or can demonstrate appropriate informal learning may be considered for entry.
- 16.17 Applicants for taught postgraduate programmes will normally require an honours degree, however flexibility may be applied in the case of experienced professionals studying on vocational programmes.
- 16.18 Students whose first language is not English applying for programmes taught through the medium of English must normally reach satisfactory IELTS scores, or the equivalent scores in other recognised Secure English Language Tests:
- For entry at SCQF levels 6-8, overall IELTS score of 5.5 with no element below 5.0
  - For entry at SCQF levels 9-10, overall IELTS score of 6.0 with no element below 5.5
  - For entry at SCQF levels 11-12, overall IELTS score of 6.5 with no element below 6.0.

Continuing students who are progressing from SCQF level 8 to level 9 will not require to be retested.

## Entry with Advanced Standing

- 16.19 Entry requirements for specific degree programmes may be approved which allow entry with advanced standing to a particular level of the programme. This is on the basis of a recognised qualification or combination of qualifications which are deemed to be equivalent to the lower



level(s) of the programme. In this case, the specified qualification(s) enable direct entry into the degree programme and the RPL process will not be applicable.

- 16.20 Decisions on entry with advanced standing will be made through the normal admissions process.

**Articulation from SQA HNC/D to degree programmes**

- 16.21 Most degrees have approved articulation routes from SQA HNC/D awards which enable entry with advanced standing. Such articulation routes may specify particular units and/or a particular level of student achievement.
- 16.22 Where students have successfully met the requirements of an approved HNC/D articulation route, whether with the university or another institution, they may be admitted to the relevant degree programme at the appropriate level, recognising the credit gained through the HNC/D. In some cases, the credit total may require to be supplemented by additional study or appropriate RPL claim for informal learning.
- 16.23 For the avoidance of doubt credit at SCQF Level 6 will only be counted towards the necessary credit totals for a university award where it has been achieved through SQA units as part of an SQA group award which is predominantly at Level 7 or above previously completed by the student.

**Appeals**

- 16.24 If an applicant is dissatisfied with the outcome of an application for admission, they should discuss the matter in the first instance with the relevant programme leader (for degree programmes) or the academic partner applied to (for non-degree programmes). If the matter is not resolved, the applicant may submit an appeal through the assessment appeals procedure, although only on eligible grounds (see Section 18.6). There are no grounds for appeal on the basis of the academic judgement regarding the admissions decision.

**Recognition of prior learning (RPL)**

- 16.25 The university recognises and adopts nationally accepted definitions and principles relating to the recognition of prior learning developed by the Scottish Credit and Qualifications Framework (SCQF Handbook 2015) and QAA Scotland (National RPL Framework for Higher Education 2014). Further information is available in the university's RPL guidance ([www.uhi.ac.uk/rpl](http://www.uhi.ac.uk/rpl)).
- 16.26 Recognition of prior learning (RPL) is the process for recognising learning that has its source in experience and/or previous formal, non-formal and informal learning contexts. This includes knowledge and skills gained within school, college and university and outside formal learning situations, such as through life and work experiences. SCQF RPL guidelines define both formative and summative purposes of RPL.

**Formal and informal learning**

- 16.27 Formal learning refers to previously assessed and certificated learning which may be recognised, as appropriate, for academic purposes. It takes place within the context of programmes delivered by learning and training providers. It is assessed and credit-rated and



leads to recognised qualifications. Recognition of prior formal learning can also be known as Credit Transfer.

- 16.28 Informal learning (or non-formal) refers to learning gained through work or life experience, which may be gained in the workplace, or in community or voluntary settings. Informal learning may be assessed through the RPL process to judge whether the outcomes are comparable to the entry requirements of a programme, or to some of the learning outcomes of the programme which the applicant is seeking credit within.
- 16.29 An applicant may combine formal and informal learning in an RPL claim to seek entry to a university programme, or credit within an award made by the university. Applicants seeking credit towards a SQA award will use SQA's RPL process.

#### **Specific and general credit**

- 16.30 Specific credit is credit which is matched against the learning outcomes of specific modules within a programme. It enables students to be exempted from those modules as they are deemed to have already met the learning outcomes through their prior learning. Specific module exemptions will be recorded on the student record system. This may be relevant where a professional body requires specific criteria to be met and evidenced as being met for a student to gain accreditation with that professional body or for a specific award.
- 16.31 General credit is credit which is awarded at a particular level but not matched to specific module outcomes. This would normally be where an applicant is seeking entry with advanced standing or where there are optional modules as part of the programme structure. General credit does enable exemption from modules but not on the basis of evidencing that the learning outcomes of specific modules have been met.

#### **Recognition of prior learning (RPL) limits**

- 16.32 An award cannot be achieved solely on the basis of assessment of an RPL claim for credit.
- 16.33 The maximum credit that shall be awarded for RPL is as follows (see also Section 14a.19 for entry to postgraduate awards):
- for students registering for a CertHE – 60 credits at SCQF Level 7
  - for students registering for a DipHE – 120 credits at SCQF Level 7
  - for students registering for an Ordinary degree – 240 credits at SCQF Levels 7 and 8
  - for students registering for an Honours degree – 360 credits at SCQF Levels 7-9.

Thus, in order to exit / graduate with an award, apart from a CertHE, students are required to complete successfully at least the 120 credits of the final level of that award.

- 16.34 Where a programme of 120 credits (at SCQF Level 9) is designed to build on another award to achieve a degree, students may not enter the programme with credit beyond that used to enter at that level.
- 16.35 Credit awarded through RPL, whether specific or general, will be ungraded, and therefore excluded when determining the final classification of a university award.



- 16.36 An applicant who already holds an Honours degree will not normally be permitted advanced entry at Level 10 to another Honours degree in a similar subject area. Exceptions may be made where the student is applying to enter a highly industry-specialised award or one accredited by a professional, statutory or regulatory body.
- 16.37 Programme teams may seek approval, exceptionally, to specify higher or lower limits for the award of specific or general credit within a programme.

### **Recognition of prior learning (RPL) process**

#### **The timing of a claim**

- 16.38 Applicants are required to submit RPL claims for entry to a programme or for academic credit prior to commencement of studies. In circumstances where this is not possible, an applicant may be enrolled on a programme, but must be advised that if their claim is wholly or partly unsuccessful they must complete any modules for which credit was not awarded.

#### **Assessment of RPL claims**

- 16.39 RPL claims will be assessed by the programme leader and at least one other RPL assessor. If the RPL claim is for credit, rather than for entry to a programme, they will make a recommendation to the RPL Panel.

#### **RPL Panel membership and remit**

- 16.40 The RPL Panel membership shall include:
- Chair of Tier 2 Board of Examiners (Chair) (or nominee)
  - Head of Academic Standards and Enhancement (or nominee)
  - two associate deans

#### **In attendance:**

- Clerk to the Panel
  - Other staff as required, as agreed by the Chair.
- 16.41 The RPL Panel, having delegated authority from the board of examiners for this process, will consider RPL claims and evidence provided, and the recommendation from the programme team, and determine the level and volume of credit to be awarded.

#### **Award of credit for RPL**

- 16.42 Where general credit is awarded through the RPL process, this will be entered in the student record system in multiples of 20 credits, equivalent to a standard module. General credit awarded for the whole of a level (or a sufficient part thereof) will be represented as a block of credit of the appropriate value.
- 16.43 Where specific credit is awarded, enabling exemption from specific modules, this will be entered in the student record system as equivalent to the credit value of these modules.
- 16.44 Where students have been awarded credit through RPL, this will be recorded on the student record and reported at the board of examiners. Evidence to support RPL claims will be made available to members of the board of examiners on request.



### **Double counting of credit**

- 16.45 Once credit has been granted by the university for specified learning, whether through successful completion of modules or RPL, the credit may normally only be counted towards one university award at this level (ie undergraduate or postgraduate). Exceptionally, the re-use of credit to contribute towards another award at the same or lower level may be permissible where the student is applying to enter a highly industry-specialised award or one accredited by a professional, statutory or regulatory body. The limitations on credit awarded through RPL would be applicable in such cases.
- 16.46 Other awarding bodies, such as SQA, may have different approaches to the use or reuse of credits within their awards.

### **Appeals**

- 16.47 If an applicant is dissatisfied with the outcome of an RPL claim, they should discuss the matter in the first instance with the relevant programme leader. If the matter is not resolved, the applicant may submit an appeal through the assessment appeals procedure, although only on eligible grounds (see Section 18.10-12). There are no grounds for appeal on the basis of the academic judgement regarding the RPL decision.
- 16.48 An appeal against a RPL decision will only be considered where there is an alleged breach of procedure.

### **Enrolment**

- 16.49 Following acceptance on to a programme of study, all students shall enrol at the point of initial admission to a programme. Thereafter, as continuing students, they are required to enrol at the commencement of each subsequent academic year during which they are undertaking study.
- 16.50 All new entrants must provide certificates or equivalent documentary evidence (original or copies) at enrolment as proof of their qualifications, where these are qualifications are not awarded by SQA.
- 16.51 Eligibility criteria for continuing students to enrol at the commencement of each academic year are set out in the Assessment Regulations, Section 17B (provisions for the progression of students).
- 16.52 All students enrolling for a programme of full-time or part-time study are eligible to receive a student ID card.
- 16.53 As part of the enrolment process, a student shall formally acknowledge that they accept and will abide by the *Academic Standards and Quality Regulations* and other relevant university policies. A copy of these regulations will be provided to students on request and is available at [www.uhi.ac.uk/regulations](http://www.uhi.ac.uk/regulations).



### **Home academic partner**

- 16.54 A student will normally be allocated, at the point of application, to the Home Academic Partner (HAP) which is closest to their term-time place of residence. See also Section 9, responsibilities of academic partners in respect of academic provision.
- 16.55 The HAP is the academic partner at which the student is based, ie where they enrol, access learning resources, and sit exams.
- 16.56 A student may request a transfer of HAP if their personal circumstances change. Such a request is subject to approval by both the current and proposed new HAP.
- 16.57 Any request to transfer HAP from an international fee status student must also be approved by executive office admissions due to potential implications for the student's immigration status and / or the university's Student route license.

### **Payment of fees and debt to the university**

- 16.58 Students are personally liable to the university for payment of tuition fees. In the event of any fee-paying authority or other person or body not making payment on their behalf, the student must undertake to make payment of the full amount due.
- 16.59 Where an applicant has previously studied within the university and has an outstanding debt to the university or to any academic partner, they shall not be admitted (or re-admitted after a formal break in studies) to any programme until that outstanding debt is cleared.
- 16.60 For continuing students, any outstanding debt shall normally be cleared prior to enrolment in each academic year (for full-time or structured part-time students semester to semester progression within an academic year is not subject to such constraint). At their discretion the relevant HAP may, in individual cases, permit re-enrolment subject to a plan being agreed with the student for recovery of the outstanding debt.
- 16.61 The university will withhold the final certificate for a university award until any outstanding tuition fee debt has been cleared or the sum at issue consigned pending agreement, arbitration or judicial decision.

### **Re-admission and intermediate awards**

- 16.62 Where a student leaves a programme prior to the final stage, the board of examiners will determine their eligibility for any intermediate award. Students may seek re-admission to the programme at a later date. Re-admission shall be at the discretion of the programme leader, and specifically shall take into account any changes to the programme since the student's previous attendance. Students who are re-admitted to a programme in this way are required to return to the university any award certificate they have received.



## **Attendance and withdrawal**

### **Attendance and exclusion**

- 16.63 It is the responsibility of students to attend scheduled classes and prescribed activities for the modules on which they are enrolled. Programme teams may seek approval for specific module or programme regulations which specify minimum levels of attendance that are required for formal assessment and / or continuation on the programme of study. Where a student's attendance is judged to be unsatisfactory, they may be:
- excluded from formal assessment in that module
  - withdrawn from their programme of study.
- 16.64 Where a student fails to engage with their studies as required (in accordance with current guidance or as otherwise set out in specific module descriptor / programme regulations) the university-led withdrawal process shall be initiated.
- 16.65 Students may appeal their exclusion or withdrawal through the complaints handling procedure.
- 16.66 Where any disciplinary process which may result in loss of registered status has commenced, requests for permanent withdrawal or suspension of studies shall not be submitted, or supported.
- 16.67 Academic partners are responsible for implementing the university policies and regulations regarding the identification of individuals whose registered status should be reviewed, the conduct of such review, opportunities for appeal and the timescales for these processes and for reporting outcomes to student records office.

### **Attendance requirements for international students**

- 16.68 The university and its academic partners are responsible for monitoring the attendance of international students sponsored under Student route of the UK Visas and Immigration (UKVI) processes. Where a sponsored student fails to meet attendance requirements or requests to withdraw / is deemed to have withdrawn from study, this must be managed and reported in accordance with the monitoring requirements set out by UKVI, these being managed by the academic partner or executive office Level 1 user ([Study in the UK - GOV.UK](#)).

### **Permanent withdrawal**

- 16.69 Students seeking to withdraw permanently from their programme of study should contact their Personal Academic Tutor (PAT) or an appropriate student support officer to discuss the matter. Students may initiate the withdrawal process, but it can only be completed by a member of staff. Further information about the withdrawal process can be found on the website ([Thinking of leaving?](#)).

### **Suspension of studies**

- 16.70 A programme of study shall be continuously pursued except that a student may, with the permission of the programme leader, suspend their studies. The period of suspension shall be continuous and will not normally exceed two semesters in the first instance, but subsequent requests for further periods of suspension will be considered. Students seeking to suspend their studies must contact their Personal Academic Tutor (PAT) or an appropriate student support officer to discuss the matter.



- 16.71 If the request is approved, the period of suspension will not count as part of the total time allowed for completion of the programme. The maximum time allowed for approved suspension of studies is four successive semesters.
- 16.72 Students who have suspended study must inform the university of their intention to return, by contacting the student records office at least three months prior to recommencing study. Students not responding to letters enquiring about their intention to return to study will be assumed to have withdrawn permanently. Students are responsible for ensuring that the university has, at all times, valid contact details for them.
- 16.73 Students re-commencing studies after a period of suspension will begin their studies on the first day of the relevant semester. Students may be required to undertake new assessments for any modules which were incomplete at the point of suspension. For example, for any modules which were incomplete at the point of suspension, or to renew expired competencies that are required by professional bodies before attending placement.



## **17A ASSESSMENT REGULATIONS (SQA AND OTHER AWARDING BODIES)**

---

### **Introduction**

- 17a.1 University assessment policy for non-degree programmes and the staff responsibilities, systems and operational procedures that underpin the policy are described in the following sections. (Degree programmes are covered by the regulations in Section 17B.)
- 17a.2 The university operates a 'Centre and candidate malpractice and maladministration policy and procedure' for SQA HE provision in line with awarding body requirements.
- 17a.3 Regulated qualifications are SVQs and other qualifications which assess knowledge, understanding and occupational competence in the workplace. They are regulated by SQA Accreditation or Ofqual. Higher National and National Qualifications are not regulated. There are some specific requirements within SQA's quality assurance criteria which apply only to regulated qualifications.
- 17a.4 Academic Council has final responsibility for ensuring that all provision meets awarding body requirements as set out in their publications.

### **Quality assurance - principles and partnership**

- 17a.5 The university is committed to maintaining national standards through quality assuring all the qualifications that it offers. The university is actively involved in working in partnership with awarding bodies to ensure that the quality of delivery and assessment of provision continues to meet published national standards.

### **Policy - assessment and verification**

- 17a.6 All assessments will be conducted fairly and objectively with equality of treatment for students.
- 17a.7 Quality assurance procedures will be implemented to monitor the assessment process and to ensure the fair and equal treatment of all students.
- 17a.8 Each academic partner providing units and group awards will operate an effective internal assessment and verification process in accordance with awarding body requirements.
- 17a.9 The academic partner quality committee will assume first-line responsibility for the conduct and review of its assessment, re-assessment and verification activity.
- 17a.10 In each academic partner offering SQA provision, appropriately qualified and experienced staff will be allocated clear assessment, re-assessment and internal verification responsibilities on behalf of the academic partner. Staff will receive updating and development in line with awarding body requirements as set out in SQA quality criteria.



## Academic Standards and Quality Regulations 2025-26

### Assessment regulations

- 17a.11 Clear procedures will be in place for devising internal and external assessment instruments as provided in published awarding body guidelines. All assessment instruments will be internally verified (and externally verified if appropriate) and fully approved prior to use.
- 17a.12 Cognate subject groups will work with programme teams across academic partners to develop, approve and implement common assessments such that fair and equivalent arrangements apply for all students.
- 17a.13 Assessment decisions made by internal assessors will be sampled and verified following published awarding body requirements in terms of validity, reliability and record-keeping. Records of candidate achievement and evidence of assessment will be retained for scrutiny in line with published awarding body guidelines.
- 17a.14 Re-assessment will be in accordance with published awarding body guidelines. Normally one summative re-assessment attempt will be allowed before the completion date of a unit. Students will be given clear notice of the final date for receipt of assessments.
- 17a.15 Guidance to assessors and internal verifiers will be provided in respect of candidates who require special assessment arrangements. This guidance will follow published awarding body guidelines.
- 17a.16 Students will be given due notice of assessment, normally at least two weeks (or less than this with prior agreement of students). Students will be given information concerning the conditions of assessment.
- 17a.17 All staff teaching HE SQA courses must comply with the [Assessment Feedback and Feedforward Policy](#), the [Assessment retention policy](#), and use the SQA assessment coversheet.
- 17a.18 All assessments may only be submitted through UHI technologies approved for assessment submission. The recommended technology is the virtual learning environment (VLE). For GDPR and records management reasons externally hosted technologies that have not been approved may not be used. Email may not be used for submitting assessments or for sharing personal data such as assessment feedback and marks.
- 17a.19 Students' work will be marked and feedback given within an appropriate timescale (normally not more than 15 working days). All academic partners will implement progression boards. These will confirm assessment decisions and determine progression arrangements. Students will be informed that all decisions are provisional and subject to internal and external verification.
- 17a.20 Information on the student appeals procedure will be provided to all students at the beginning of their programme of study. Appeals against the decision of a lecturer or programme progression board are subject to the regulations as set out in Section 18.
- 17a.21 A coherent sampling approach following published awarding body guidelines will be adopted by all internal verifiers in order to maintain national standards and achieve a consistency of approach across the university.



Academic Standards and Quality Regulations 2025-26  
Assessment regulations

- 17a.22 Records of internal verification activity will be maintained by academic partners for purposes of internal and external audit.
- 17a.23 Reports on external verification activity will be made available to all staff via the staff intranet so that cross-programme best practice and development areas can be reviewed.

**Progression boards**

- 17a.24 The university will operate a system of at least two progression boards per year. These will be held on either a network basis or singly, within each academic partner offering SQA higher education provision. Each board will operate in accordance with the current approved progression board guidance.



## **17B ASSESSMENT AND PROGRESSION REGULATIONS (DEGREE PROGRAMMES)**

---

### **Boards of examiners**

#### **Introduction**

- 17b.1 The university operates a two-tier system for boards of examiners: Tier 1 for module outcomes and discussion of programme delivery and Tier 2 for programme outcomes in terms of awards and progression. Collectively these boards will consider every module and programme of study approved through the university's approval processes.
- 17b.2 SQA programmes, which have a separate system of progression boards, are not subject to these regulations.
- 17b.3 The purpose of these boards is:
- to consider module performance and issues arising from the learning, teaching and assessment approaches adopted by the modules
  - to review students' overall performance on their programme of study
  - to make recommendations on awards to Academic Council, and
  - actively to facilitate reflection, review and dialogue within the module and programme teams and between these teams and external examiners, in order to encourage quality enhancement at each level.

#### **Subject Groups and Boards of Examiners**

- 17b.4 All modules will be allocated to a subject group (SG) as determined by the Faculties. Faculties will ensure that the workload for each subject group is appropriate. A cognate subject group may contain one or more subject groups, according to the range of academic disciplines, programmes and number of modules it encompasses and a cognate subject group may include modules from more than one Faculty. Each cognate subject group will convene Tier 1 Board of Examiners for the modules and programmes for which it is primarily responsible three times a year: at the end of each semester (in January/February and May/June) and to consider the results of reassessments taken over the summer (August/September).

#### **Membership of Tier 1 Boards**

- 17b.5 Membership of a Tier 1 Board of Examiners, based around the cognate subject groups noted above shall include:
- the dean of the relevant faculty or nominee (who will normally chair the board – but note that a member of staff may not serve as the chair of a Tier 1 Board of Examiners when it is considering a module in whose assessment he or she has been involved)
  - the associate dean for the cognate subject group
  - the programme leaders and depute programme leaders for the programmes lying primarily within the cognate subject group
  - all module leaders for modules to be considered by the board
  - Tier 1 External Examiner(s) with responsibility for modules and programmes primarily within the cognate subject group.

In attendance:

- clerk to the Tier 1 Board of Examiners.



Others with a right to attend as observers:

- the chair of Academic Council or nominee
- the chair of Quality Assurance and Enhancement Committee or nominee.

The following may be in attendance:

- an appropriate administrator from an academic partner or executive office
- other academic staff who are part of the module team for a module or modules to be considered by the board. Such staff will have the right to speak to the meeting when modules in which they have been involved are being considered.

17b.6 All those attending a Tier 1 Board of Examiners shall make a declaration of interest if they have any involvement with the matters to be considered beyond that stipulated by their official role.

17b.7 The Faculty Board is responsible for approving membership of Tier 1 Boards of Examiners annually, and for approving any subsequent changes.

#### **Responsibilities of the Tier 1 Board of Examiners**

17b.8 The Tier 1 Board of Examiners is responsible for:

- a. satisfying itself that all results presented are correct
- b. agreeing the result for each student on each module being considered
- c. where necessary, deciding on the type of reassessment to be taken
- d. approving when reassessments shall take place
- e. if necessary, scaling the results in any component of assessment of a module (i.e. moving the marks for every student in the module up or down by an agreed percentage, while retaining the relative placing of each student's mark
- f. reviewing module results by mode of study and by Home Academic Partner, to address any variation which may be attributable to these factors
- g. taking account of any recommendations of the mitigating circumstances panel
- h. submitting verified and confirmed results for modules together with recommendations for pass or fail to Tier 2 Boards of Examiners
- i. in addition, the Tier 1 Board of Examiners will, at the end of the meeting, invite external examiners to provide comment on any issues relating to the delivery, resourcing or design of programmes. These comments should be recorded and where appropriate conveyed in writing to the Tier 2 Board of Examiners (see below).

17b.9 The Tier 1 Board of Examiners does not consider the overall performance of individual students.

#### **Information flow**

17b.10 The timely flow of accurate information between the various bodies in the board of examiners system is vital:

- it is the responsibility of each module leader to ensure that the provisional results for each module are entered into SITS in time to allow the preparation of module result sheets
- the relevant clerk to the board will provide relevant completed module result sheets to each meeting of the Tier 1 Board of Examiners
- it is the responsibility of the chair of the Tier 1 Board of Examiners, working with the



clerk to the board, to ensure that the agreed module results are entered into SITS timeously following each meeting of the board of examiners.

- 17b.11 Module results should be entered into SITS as whole numbers, i.e. rounded down to the nearest whole number where the assessment result is less than XX.5 and rounded up where the assessment result is XX.5 or greater.

### **Tier 2 Boards of Examiners**

- 17b.12 Tier 2 Boards of Examiners shall be convened at least twice in each academic session: normally this will be in May / June and in August / September. For programmes which do not follow the usual semester pattern, the Faculty Board will agree an appropriate calendar of meetings.

- 17b.13 A Tier 2 Board of Examiners will be responsible for one or more programmes. The Faculty Board, following liaison with the responsible academic partners for the programmes in its area, will be responsible for approving a list of Tier 2 Boards of Examiners annually.

### **Membership of Tier 2 Boards of Examiners**

- 17b.14 Membership of Tier 2 Boards of Examiners shall include:
- the Dean of Faculty or nominee (who will normally chair the board – but note that a member of staff may not serve as the chair of a Tier 2 Board of Examiners when it is considering a programme in whose assessment he or she has been involved)
  - the relevant associate dean or nominees
  - the relevant programme leader(s) and depute programme leader(s)
  - a senior representative of the responsible academic partner(s) for the programme(s) concerned
  - Tier 2 External Examiner(s) appointed for each cognate subject group

In attendance:

- clerk to the Tier 2 Board of Examiners

Others with a right to attend as observers:

- the chair of Academic Council or nominee
- the chair of Quality Assurance and Enhancement Committee or nominee

The following may be in attendance:

- an appropriate administrator from an academic partner or executive office
- module leaders for modules which contribute to the programme(s) concerned.

- 17b.15 All those attending a Tier 2 Board of Examiners shall make a declaration of interest if they have any involvement with the matters to be considered beyond that stipulated by their official role.

- 17b.16 The Faculty Board is responsible for approving membership of Tier 2 Boards of Examiners annually, and for approving any subsequent changes.

### **Responsibilities of Tier 2 Boards of Examiners**

- 17b.17 The Tier 2 Board of Examiners is responsible for:
- a. considering the profile of each student studying on the programme(s) for which it is



- responsible, taking account of the confirmed results and recommendations made by the Tier 1 Boards of Examiners
- b. taking account of any recommendations of the mitigating circumstances panel(s) for the programme(s)
  - c. considering whether poor performance in a module can be condoned in accordance with the regulations
  - d. confirming for students with poor performance in a module or modules where condonement is not possible the reassessment that must be taken
  - e. deciding if a student will progress to the next stage of study, continue at the same stage of study, or leave the programme with or without a relevant award
  - f. deciding on the award and any classification as appropriate
  - g. reviewing programme results by mode of study and by Home Academic Partner, to address any variation which may be attributable to these factors
  - h. considering any issues relating to the delivery, resourcing or design of programmes reported from Tier 1 Boards of Examiners.

### **Condonement**

- 17b.18 Tier 2 Boards of Examiners may exercise their discretion in condoning a fail in any module at SCQF Levels 7-11. In doing so they should be closely guided by the Dean of Faculty, associate dean and programme leader for the relevant award. Where condonement is being recommended for a module lying outwith the scope of the Tier 2 Board of Examiners and its related cognate subject groups this should be communicated to the chair of the relevant Tier 2 Board of Examiners.
- 17b.19 In considering whether to allow a condoned fail, the board will take account of the student's overall performance profile across the programme of study.
- 17b.20 Where a fail in a module is condoned, the student will not be allowed to take the reassessment for that module, as specified by the Tier 1 Board of Examiners, with the aim of improving the mark in his or her record.
- 17b.21 Where a condoned fail is agreed, the student's original mark for the module will stand in the record but be annotated to note that the fail mark has been condoned. The original mark, annotated to show that the failure was condoned, will appear on the student's transcript.
- 17b.22 The student will be given the appropriate credit for the module in which failure has been condoned.
- 17b.23 Tier 2 Boards of Examiners have the power to condone failure by a student in a maximum of two modules in any academic year.

### **Information flow**

- 17b.24 The relevant clerk to the board of examiners will provide programme result sheets to each meeting of the Tier 2 Board of Examiners.
- 17b.25 It is the responsibility of the chair of the Tier 2 Board of Examiners, working with the clerk to the board, to ensure that confirmed results for each student are entered into SITS timeously following each meeting of the board, and to provide recommendations of



awards to Academic Council.

- 17b.26 Module results should be entered in SITS as whole numbers, i.e. rounded down to the nearest whole number where the assessment result is less than XX.5 and rounded up where the assessment result is XX.5 or greater.

**Recording and reporting the outcomes from boards of examiners**

- 17b.27 Each cognate subject group will retain a full set of minutes and papers for each Tier 1 Board of Examiners. Each faculty will retain a full set of minutes and papers for each Tier 2 Board of Examiners. The minutes, signed by the chairs, will be held in a paper minute book and electronically. The clerk to the board will be responsible for creating and maintaining these records. The minutes of boards will include information on non-standard decisions made about individual students, for example, the consideration of mitigating circumstances. The reports of Tier 2 Boards of Examiners will be made available to the relevant Tier 1 External Examiners, and they will be invited to comment on the approved outcomes in their annual reports.

**Quorum and chair's action**

- 17b.28 The quorum for boards of examiners will be one third of the approved membership including the chair and at least one external examiner.
- 17b.29 Where chair's action on behalf of a board of examiners involves a change in a module or award decision, and is anything other than a correction to an error in processing decisions, it should be confirmed in liaison with an appropriate external examiner. All instances of chair's action must be reported to the next meeting of the board of examiners.
- 17b.30 Decisions on changes affecting progression or reassessment decisions are normally taken by the chair. In special cases it may be necessary to convene an exceptional meeting of the relevant board of examiners comprising members as appropriate. The remit and membership of such a board will be agreed, in advance, by the Faculty Board and the meeting will be minuted.

**Management of assessment**

- 17b.31 All teaching staff must comply with the [Assessment Feedback and Feedforward Policy](#), the [Assessment retention policy](#), and use the undergraduate assessment coversheet. Assessments may only be submitted through UHI technologies approved for assessment submission. The recommended technology is the virtual learning environment (VLE). For GDPR and records management reasons externally hosted technologies that have not been approved may not be used. Email may not be used for submitting assessments or for sharing personal data such as assessment feedback and marks.
- 17b.32 Students shall be given, at the beginning of their programme, a programme handbook that will include a section on the most up-to-date regulations pertaining to that programme. Students should be given detailed information in their handbook on how to submit electronically and, if required, in hard copy.
- 17b.33 Students shall be given, at the beginning of each level of the programme, details of the



dates for assessment of that level and the requirements to progress or achieve an award. Students must attempt all components of assessment; non-submission of any component of assessment will result in a fail mark for the overall module.

- 17b.34 Programme leaders shall endeavour to ensure that the assessment schedule facing students is sequenced in such a way that it is evenly distributed and avoids a bunching of assessment submission dates. However, it is recognised that this can become difficult to achieve in an increasingly modularised system but that programme leaders will liaise with module leaders to minimise the difficulties that students might otherwise face.
- 17b.35 Students are responsible for checking their module marks online using their student record, and for ensuring that they are aware of reassessment arrangements where necessary.
- 17b.36 Students shall be informed of their progress throughout the programme and have the opportunity of regular contact with their personal academic tutor (PAT). Students' work will be marked and feedback given with an appropriate timescale (normally not more than 15 working days from the submission date). Where this is not deemed to be possible, students should be informed of when the work will be returned.
- 17b.37 Students who fail a programme or any of the programme modules shall be given the opportunity to be advised of the reasons underlying the failure(s) and what they have to do to redeem the position. At the module level, this will come from the member of staff who is delivering the module and at the programme level from the student's PAT and / or programme leader.

**Anonymous and second marking**

- 17b.38 University policy normally requires, wherever achievable, that anonymous marking exists in respect of all written course work and examination scripts but not for other forms of assessment.
- 17b.39 The university requires a significant sample of all assessed work to be second-marked. Unless the regulations of a validating body determine otherwise, a significant sample of all assessed work, including examination scripts, course work, projects etc, will be subject to second-marking by a second internal marker. For clarification, a script includes all of a student's answers. The role of the second-marker is to assure and confirm the appropriateness of standards, i.e. the second-marker may receive annotated scripts from the first marker.
- 17b.40 The sample of assessed work should include a minimum of 10% or six scripts, whichever is the greater, of the total. This sample should be taken from across the module teaching team. This must include a sample of work considered by the first marker to be failed, mid-range for each grade and worthy of distinction for each individual assessment. Where a module is delivered in more than one academic partner by different staff, then second-marking should take place across the partners and markers concerned.
- 17b.41 All dissertations contributing towards honours classification should be blind double-marked, ie the second-marker receives no grade information from the first, nor are they required to provide detailed feedback to the student.



- 17b.42 Where discrepancies on individual scripts or assignments arise between the first and second internal markers and cannot be resolved through dialogue, the module leader should seek to involve a third internal marker to achieve an internally agreed mark.
- 17b.43 All provision validated for the first time and all provision which has changed level is subject to more extensive sampling for second-marking during the first year of operation. This sample will include a minimum of 25% or 12 scripts, whichever is the greater, of the total scripts submitted. This sample should be taken from across the module teaching team. This must include a sample of work considered by the first marker to be failed, mid-range for each grade and worthy of distinction for each individual assessment. Where a module is delivered in more than one academic partner by different staff, then second-marking should take place across the partners and markers concerned. Thereafter the sample outlined in 17b.40 is allowable.
- 17b.44 When a marker is new to a programme or scheme and therefore marking for that programme/scheme for the first time the sampling of marked work detailed in 17b.43 should be applied.

**Students with disability**

- 17b.45 Under current equalities legislation, the university has an anticipatory duty to make 'reasonable adjustments' to ensure that disabled students are not substantially disadvantaged relative to non-disabled peers.
- 17b.46 Students who disclose additional needs will be invited to have an assessment of their needs with student support services at their HAP. This assessment will allow a Personal Learning Support Plan (PLSP) to be set up, if appropriate, which details the adjustments, including those relating to academic assessment, that have been approved in light of a student's specific needs.
- 17b.47 An approved adjustment that entails a variation from the standard academic regulations, or those specific to a module or programme, is acceptable as long as:
- the adjustment is necessary to enable the student to demonstrate achievement of learning outcomes and
  - the adjustment has been approved following a contextualised assessment of need by authorised staff in HAP student support services, and is/will be documented in the student's agreed PLSP. The anticipatory nature of the reasonable adjustments duty requires these to be identified and implemented prior to a PLSP being constructed, where appropriate.
- 17b.48 Non-standard adjustments (including those relating to academic assessment) are similarly permissible on an individual (exceptional) basis with approval from the student's Programme Leader, so long as the needs assessor has an assurance in advance from the Programme Leader and relevant others that the arrangement is viable and compliant in terms of academic standards, professional body requirements, and learning outcomes.
- 17b.49 Assessments should be marked in accordance with normal marking criteria, notwithstanding any adjustments in place as part of a PLSP and / or needs assessment



report.

- 17b.50 Students, by reason of disability proven by acceptable evidence, may be assessed by methods other than those approved for the programme. Where formal diagnostic evidence is unavailable, pending or yet to be obtained, the student's needs assessor (HAP student services):
- should, wherever possible, obtain third party confirmation (e.g. from the student's GP or other relevant professional) that the student is diagnosed or is awaiting or pursuing diagnosis
  - may seek evidence of need from teaching staff and/or the student's PAT
  - may still determine the need for reasonable adjustments based on their professional judgement of the (likely) impact of the student's needs on their learning
  - must recognise that in extremis (especially in relation to mental health) a student's actions and behaviours can be taken as evidence.

- 17b.51 The needs assessor's professional judgement will be shaped by their knowledge and awareness of the student's needs at the time and other forms of evidence and considerations relevant to the needs assessment process.

- 17b.52 Alternative assessment methods shall be contracted between the programme leader, HAP student services and the student and be reported to the board of examiners. Additional requests to be assessed by methods other than those approved for the programme, if not already documented in the student's agreed PLSP, should normally be made by the student to the Programme Leader at least six weeks prior to the date of the submission of an assessment or the sitting of an examination. Reasonable requests and adjustments should be supported wherever possible.

#### **Postgraduate research students**

- 17b.53 Postgraduate research (PGR) assessment and examination processes are different from assessments at undergraduate and taught postgraduate level. For PGR students, reasonable adjustments are permissible so long as the student's needs assessor (HAP student services) adopts the same contextualised approach to needs assessment and thus:
- pays due regard to the formal assessment and examination points within the research degrees journey
  - seeks advice from the student's Director of Studies and secures assurances from them as appropriate, to ensure viability and compliance with academic standards and learning outcomes. The Director of Studies is equivalent to the student's PAT or Programme Leader in this context
  - advises the UHI Graduate School when adjustments are being considered or have been recommended, so that approval can be sought from the Research Degrees Committee as required. This is particularly important when adjustments relate to the final oral examination/viva.

#### **Marking of assessed work or examination carried out under special arrangements**

- 17b.54 Adjustments may be made to assessments, or the mode of delivery of assessments, to enable students with disabilities to demonstrate their achievement of the academic standards. Adjustments should be made during the assessment rather than during the marking. Where assessment or examination has been undertaken under special



arrangements, examiners should mark the work without regard to the fact that special arrangements were made for the assessment. Any necessary consideration of the candidate's circumstances will be undertaken by the board of examiners as appropriate.

#### **Dyslexia Sticker Scheme**

- 17b.55 The university operates a dyslexia sticker scheme to ensure that the work of diagnosed students is assessed in a way which neither penalises nor compensates for dyslexic attributes.
- 17b.56 A concise version of the marking guidelines is available from the website ([www.uhi.ac.uk/dyslexia](http://www.uhi.ac.uk/dyslexia)) along with the full guidance document, explaining how work should be assessed.

#### **Feedback**

- 17b.57 All course work assessments should provide students with guidance on the criteria that will be applied when they are marked. Students should be provided with written feedback, not normally later than 15 working days from the submission date, on their assessments that relate to the marking criteria, normally using a feedback proforma (see Section 17b.36 above).

#### **Components of assessment**

- 17b.58 All assessed work will normally be marked according to the following performance criteria and conventions:

Description	Mark	Grade
Excellent	70+	A
Above average	60-69	B
Average	50-59	C
Satisfactory (pass)	40-49	D
Unsatisfactory	0-39	F

*Table 18: UG performance criteria and conventions*

- 17b.59 In determining the mark / grade to be awarded, written criteria should exist for each module.

#### **General assessment provisions**

- 17b.60 These provisions apply to assessment in undergraduate programmes at Scottish Credit and Qualifications Framework (SCQF) Levels 7-10.

#### **Language used for examinations and assessments**

- 17b.61 The language to be used in examinations and assessments will normally be that of the language of instruction.

#### **Use of language or technical dictionaries by students in examinations**

- 17b.62 In general, students may not normally use a dictionary in examinations unless the directions on the examination paper explicitly state otherwise. However, certain



categories of student may apply for permission to use a dictionary:

- students whose first language is not English, at SCQF Levels 7 and 8 only
- exchange or incoming study abroad students whose first language is not English, at any SCQF level.

- 17b.63 NB Separate arrangements may pertain for modules and programmes where Gaelic is the medium of teaching and assessment.
- 17b.64 The relevant programme leader is authorised to grant permission for use of a dictionary, by providing a signed letter to the student confirming student details and stating the ISBN number or the specific details of the approved dictionary(ies). This letter must be presented at all examinations to certify that they may use a dictionary.
- 17b.65 Where such permission is granted, students using a dictionary will be given ten minutes extra for each hour of the examination, e.g. 30 minutes extra for a three-hour examination. The use of electronic dictionaries is not allowed.
- 17b.66 Students who are eligible to use a dictionary under this regulation, will be expected to provide their own dictionary for each of their examinations. The dictionary must be clean from written notes or materials. Students should arrive 30 minutes prior to the start of their examination so that the letter and dictionary can be checked by the invigilator. In the examination room, students should place their dictionary on the desks in front of them for checking by an invigilator at any time.
- 17b.67 Any student found using a dictionary without a letter of permission, or using a dictionary with written notes or materials, will have the dictionary confiscated for the duration of the examination period and may be reported for suspected cheating. If such a dictionary is confiscated, the university will be under no obligation to issue the candidate with a replacement dictionary for the remainder of the examination or any other examination.
- 17b.68 Under no circumstances are translators allowed, either for assessments, or during an examination.
- 17b.69 Students with special needs may, on an individual basis, be granted special provision as provided for in these regulations and in existing university policy (eg Disability policy).

**Student withdrawal from a programme**

- 17b.70 Students who fail to give formal notice in writing by 31 March of their intention to withdraw from the programme and who fail to complete assessments will normally be deemed to have failed the programme.

**Mitigating circumstances**

- 17b.71 If, by reason of absence, failure to submit work or poor performance, students fail programme modules and it is established, to the satisfaction of the board of examiners, that this was due to proven illness or other circumstances found valid on production of evidence, the board shall use its discretion to ensure that the students are not disadvantaged (nor advantaged) as a result. Further guidance on dealing with mitigating circumstances can be found in an appendix of these regulations.



- 17b.72 In exercising its discretion, the board of examiners may decide to allow students to be assessed as for the first time and to vary the form of assessment to be used.
- 17b.73 Where a student has submitted work, either on time or late, the preparation of and / or submission of which has been affected by mitigating circumstances, a claim should be submitted by the student setting out these circumstances. The internal examiner should mark the work without regard to these circumstances and the student informed that these will be made known to the board of examiners.
- 17b.74 Where a student feels that their performance was adversely affected by illness or other factors which they were unable or, with valid reason, unwilling to divulge, prior to the meeting of the board of examiners the appeals procedure may be followed (see Section 18).

#### **Late submission of assessments**

- 17b.75 Students who do not submit assessments by the prescribed date will be penalised by a deduction of a percentage of the mark achieved as below.
- 17b.76 Penalties for late submission apply equally to full-time and part-time students. 'Days' refers to actual days, not working days.
- 17b.77 Cases of persistent late submission shall be brought to the attention of the board of examiners, which shall exercise its discretion to determine the student's final results.

<b>Timescale</b>	<b>Penalty (%age)</b>
Up to 1 day late [i.e. up to 24hours after the submission time/date, if a time was specified, or by 23.59hours on the day following the submission date if no time was specified.]	5% of final mark will be deducted e.g. $65 - 3 = 62$
2-5 days late	10% of final mark will be deducted e.g. $65 - 6.5 = 58.5$ ( <b>59</b> rounded)
6-10 days late	20% of final mark will be deducted e.g. $65 - 13 = 52$
More than 10 days late	Work will not be accepted and will be marked as <b>0</b>

*Table 19: Late submission of assessment and the penalty to be applied*

#### **Word counts**

- 17b.78 Assessments will normally have a word count set at the point of approval, with regard to the level of the module and its overall assessment load, and in line with the indicative guidance below. Programme teams are required to provide a rationale if they seek to vary significantly from the indicative guidance.
- 17b.79 Indicative word counts for total summative assessment load for a 20-credit point module are as follows:



SCQF Level	Word Count
SCQF Level 7	2500 to 3000 words
SCQF Level 8	3000 to 3500 words
SCQF Level 9	3500 to 4000 words
SCQF Level 10	4000 to 4500 words
SCQF Level 11	4500 to 5000 words

*Table 20: Indicative word counts by SCQF level*

- 17b.80 Word counts will normally include all text in the main body of the assignment, including headings, footnotes, tables, citations, quotes, lists. However, titles, table of contents, bibliographies, lists of references, appendices, indices will not normally be included in the word count.
- 17b.81 These word counts are intended to be a proxy guide to workload. Where summative assessment tasks include artefacts, pictorial, mathematical or other non-verbal output, programme teams will have to make judgements about how such output is to be mapped onto the word limits above. Similarly, where a module has a written examination as part or all of its assessment, this will need to be mapped onto the word count guidance. For example, a three-hour examination might be suitable if it was the sole form of summative assessment in a 20-credit point module; or a Level 7 module with two pieces of summative assessment might use a 1000-word assignment plus a one-hour examination. For work-based learning programmes, word count equivalency should accommodate the time and engagement required for work-based learning activities.
- 17b.82 Work which significantly exceeds the set word (or other equivalent such as time) count (i.e. by 10% or more) will normally be penalised by a deduction of a percentage of the mark achieved as follows (unless specified otherwise in the assessment brief):

Exceeding word/time (or other equivalent) count	Deduction (%age)
Exceeded by 11-20%	5% of final mark will be deducted e.g. 65 – 3 = <b>62</b>
Exceeded by 21-30%	10% of final mark will be deducted e.g. 65 – 6.5 = <b>58.5 (59 rounded)</b>
Exceeded by 31-40%	20% of final mark will be deducted e.g. 65 – 13 = <b>52</b>
Exceeded by 41-50%	30% of final mark will be deducted e.g. 65 – 19.5 = <b>45.5 (46 rounded)</b>
Exceeded by 51% or more	50% of final mark will be deducted e.g. 65 – 32.5 = <b>32.5 (33 rounded)</b>

*Table 21: Exceeding the word count and penalties*

- 17b.83 There is not normally a penalty for submitting work significantly under the word count; work will be assessed as normal against the marking criteria and learning outcomes.



**Professional Standards and Fitness to Practise**

- 17b.84
- a. students on courses accredited by Professional, Statutory, and Regulatory Bodies (PSRBs) are also subject to the PSRB's professional standards, which may include a Fitness to Practise Policy
  - b. serious professional misconduct constitutes grounds for referral to a Fitness to Practise Committee, which may lead to student dismissal from the programme if the student is deemed unfit to continue professional training
  - c. any breach of the Student Code of Conduct or relevant professional standards may be reported directly to the PSRB and/or trigger a Fitness to Practise procedure.

**Academic misconduct**

- 17b.85 Cases of suspected cheating or plagiarism shall be investigated according to the procedure as set out in Section 19.

**Viva voce assessment**

- 17b.86 The viva voce form of assessment may be used as an alternative or additional means of assessment in exceptional circumstances. It will be used only to raise or confirm, and not to lower, a student's marks.

**Student academic appeals**

- 17b.87 Appeals against the decisions of boards of examiners shall be subject to the university regulations as set out in the assessment appeals procedure in Section 18.

**Electronic submission of assessments**

- 17b.88 Where students are permitted or required to submit assessments electronically, they must use their university student account to do so.

**Semester assessment**

- 17b.89 Assessments of modules delivered in each semester shall be marked and internally moderated and students may be informed of the internally moderated marks. The final marks will be confirmed at the board of examiners which will involve external examiners.

**Module assessment**

- 17b.90 The minimum overall pass mark on each module is 40% (weighted average). Students must attempt all components of summative assessment; non-submission of any component of assessment will result in a fail mark for the module overall. In order to avoid over-assessment, module leaders are encouraged to limit the total number of components of assessment to a normal maximum of three (e.g. one exam and two pieces of coursework).
- 17b.91 A module may additionally, subject to approval, have one or more components of assessment which require a minimum mark of 30% in order to achieve a pass. This should always be on the basis that the assessment is linked to a specific learning outcome of the module and satisfactory acquisition of an essential skill or competency. Module leaders may also wish to consider mechanisms for marking such exercises as a straightforward pass or fail judgement with no formal grade carrying forward to the final module mark. Where any such minimum threshold requirement is made, students must be notified in the module descriptor and all related materials.



- 17b.92 Where a student is required to resit a particular assessment, it is recommended that this should normally take the form of a new piece of work, rather than resubmission of the original piece of work with revisions.

**Module reassessment**

- 17b.93 Where a student does not pass a module at the first attempt, they are entitled to one reassessment opportunity. This will normally take place within the same academic session. The maximum module mark that can be obtained at reassessment shall be 40%.
- 17b.94 The board of examiners will determine the nature, conditions and timing of the required reassessments. Normally, where a module is assessed by more than one component of assessment then any component(s) that have been passed will not require to be attempted again, and the original mark will stand. Boards of examiners shall not withhold permission for students to be reassessed for a module(s) without good cause.
- 17b.95 If a student fails to pass a module at SCQF Level 7-9 at the reassessment, the board of examiners may permit the student to repeat the module, as if studying it for the first time, for a second and final time.
- 17b.96 If a student fails to pass a module at SCQF Level 10 at the reassessment, the board of examiners may permit the student to repeat the module, for a second and final time, and the maximum module mark that can be obtained at the repeat shall be 40%.
- 17b.97 Students failing to achieve the minimum requirements for passing in any optional module at SCQF Level 10 may be permitted by the board of examiners to take an alternative optional module, subject to approval. In reaching a decision, the board will have regard for the availability of an appropriate module, and for the overall standard and integrity of the final award. The maximum module mark that can be obtained under these circumstances will be 40%. Students may normally only take one such alternative optional module.

**Study abroad**

- 17b.98 Students may seek to undertake a period of study abroad through an approved inter-institutional agreement supporting student mobility, and gain academic credit counting towards their award.
- 17b.99 Study abroad periods, and the student's proposed study at the host institution, must be approved by the Dean of Faculty (or nominee) prior to departure, and demonstrate sufficient equivalence with regard to credit volume and level and subject.
- 17b.100 Study abroad periods will only be approved where there is an existing inter-institutional exchange or study abroad agreement between the university and the host institution.
- 17b.101 Students will remain registered with the university during the study abroad period and are entitled to appropriate access to student support and academic advising.

**Grading of credit**

- 17b.102 Academic credit gained through a study abroad period will be ungraded, i.e. recorded as



Pass / Fail, except where programme-specific exceptions have been approved relating to specific inter-institutional agreement(s).

- 17b.103 Academic credit gained through a study abroad period will not be included in degree classification calculations for Honours degrees, nor for the award of distinction for other awards (other than where programme-specific exceptions have been approved).

**Limitations on volume of credit and timing**

- 17b.104 Academic credit gained through a study abroad period may not contribute to SCQF Level 7.
- 17b.105 Academic credit gained through a study abroad period may not contribute to the final level of study of the undergraduate award for which the student is registered (except where programme-specific exceptions have been approved relating to specific inter-institutional agreement(s)). Thus, for students registered on an Honours degree or integrated Masters degree, credit may only be counted towards SCQF Level 8 or 9. For students registered on an ordinary degree, credit may only be counted towards SCQF Level 8.
- 17b.106 The total amount of credit gained through a recognised study abroad programme may not exceed 120 SCQF credit points towards an undergraduate award.
- 17b.107 For students registered on a Masters degree, credit may only be counted towards SCQF Level 11, and may not exceed 60 SCQF credit points of the 'taught' component of the award. Credit may not be counted towards intermediate awards of PGCert or PGDip.

**Provisions for the progression of students**

- 17b.108 These provisions apply to all full-time, sandwich and part-time programmes where the progression of students from one level to another is under consideration. References are made throughout the remainder of this section to the levels associated with the Scottish Credit and Qualifications Framework (SCQF).
- 17b.109 For continuing students there is an expectation that outstanding debt should be cleared before commencing a further year of study (for full-time and structured part-time students semester to semester progression within academic year should not be subject to such constraint). See admissions and enrolment (16.55-16.58).

**Progression from SCQF Level 7 to SCQF Level 8**

- 17b.110 The requirement for progression from SCQF Level 7 to SCQF Level 8 is normally:
- a minimum of 40% in each of six modules or their equivalent (equating to 120 SCQF points of which a minimum of 100 must be at SCQF Level 7 or higher).
- 17b.111 Students failing to achieve the normal requirements for progression from Level 7 to Level 8 may nonetheless be permitted to progress, at the discretion of the board of examiners, while carrying forward up to 40 SCQF points. The board will take into account the extent and nature of the modules outstanding and decide, on all of the evidence available, whether the student has a reasonable chance of redeeming their position if progression is permitted. In reaching its decision, the board will consider whether:



- a. any outstanding modules are designated core
- b. any outstanding modules are designated prerequisites to core modules in the next level
- c. there are any PSRB accreditation requirements or programme-specific regulations regarding progression.

17b.112 Students failing to achieve the minimum requirements for passing in any optional module may be permitted by the board of examiners to take an alternative optional module as for the first time. In reaching a decision, the board will have regard for the overall objectives of the level. Students may normally only take one such alternative optional module in each level.

17b.113 In-programme assessments contributing to an award, or to progression, that are internally marked as fails, these will normally be resubmitted by a date fixed by the board of examiners. However, where prior agreement has been sought from the external examiners, a date prior to the meeting of the board of examiners can be fixed for the work to be resubmitted. The maximum mark that the student will be able to achieve for the module in question in such circumstances will be 40%.

**Progression from SCQF Level 8 to SCQF Level 9**

17b.114 The requirement for progression from SCQF Level 8 to SCQF Level 9 is normally:

- o a minimum of 40% in each of an additional six modules or their equivalent (equating to 240 SCQF points of which a minimum of 100 must be at SCQF Level 8 or higher).

17b.115 Students failing to achieve the normal requirements for progression from Level 8 to Level 9 may nonetheless be permitted to progress, at the discretion of the board of examiners, while carrying forward up to 40 SCQF points. The board will take into account the extent and nature of the modules outstanding and decide, on all of the evidence available, whether the student has a reasonable chance of redeeming their position if progression is permitted. In reaching its decision, the board will consider whether:

- a. any outstanding modules are designated core
- b. any outstanding modules are designated prerequisites to core modules in the next level
- c. there are any PSRB accreditation requirements or programme-specific regulations regarding progression.

17b.116 Students failing to achieve the minimum requirements for passing in any optional module may be permitted by the board of examiners to take an alternative optional module as for the first time. In reaching a decision, the board will have regard for the overall objectives of the level. Students may normally only take one such alternative optional module in each level.

17b.117 In-programme assessments contributing to an award, or to progression, that are internally marked as fails, these will normally be resubmitted by a date fixed by the board of examiners. However, where prior agreement has been sought from the external examiners, a date prior to the meeting of the board of examiners can be fixed for the work to be resubmitted. The maximum mark that the student will be able to achieve for the module in question in such circumstances will be 40%.



**Progression from SCQF Level 9 to SCQF Level 10 (Honours)**

- 17b.118 The requirement for progression from SCQF Level 9 to SCQF Level 10 is normally:
- a minimum of 40% in each of an additional six modules or their equivalent (equating to 360 SCQF points of which a minimum of 100 must be at SCQF Level 9 or higher).
- 17b.119 Students failing to achieve the normal requirements for progression from Level 9 to Level 10 may nonetheless be permitted to progress, at the discretion of the board of examiners, while carrying forward up to 40 SCQF points. The board will take into account the extent and nature of the modules outstanding and decide, on all of the evidence available, whether the student has a reasonable chance of redeeming their position if progression is permitted. In reaching its decision, the board will consider whether:
- a. any outstanding modules are designated core
  - b. any outstanding modules are designated prerequisites to core modules in the next level
  - c. there are any PSRB accreditation requirements or programme-specific regulations regarding progression.
- 17b.120 Students failing to achieve the minimum requirements for passing in any optional module may be permitted by the board of examiners to take an alternative optional module as for the first time. In reaching a decision, the board will have regard for the overall objectives of the level. Students may normally only take one such alternative optional module in each level.
- 17b.121 In-programme assessments contributing to an award, or to progression, that are internally marked as fails, these will normally be resubmitted by a date fixed by the board of examiners. However, where prior agreement has been sought from the external examiners, a date prior to the meeting of the board of examiners can be fixed for the work to be resubmitted. The maximum mark that the student will be able to achieve for the module in question in such circumstances will be 40%.

**Provisions for the conferment of final awards**

- 17b.122 These provisions apply when students are being considered for the final award for which they have registered. In addition, Certificate or Diploma of Higher Education may be recommended by way of an exit award, even where these awards are not formally approved as part of the programme.
- 17b.123 Average (mean) mark will be calculated as a whole number, ie rounded down to the nearest whole number where the average mark is less than XX.5 and rounded up where the average mark is XX.5 or greater.
- 17b.124 Certificates and Diplomas of Higher Education will not be named (eg Cert HE in Mathematics) unless such a named award has been formally approved as part of the programme. This applies to final awards, and to both Aegrotat and posthumous degrees.
- 17b.125 The university will withhold the final certificate for a university award until any outstanding debt has been cleared or the sum at issue consigned pending agreement, arbitration or judicial decision. See admissions and enrolment 16.55-16.58.



**Certificate of Higher Education (CertHE)**

- 17b.126 The minimum requirements for the award of a Certificate of Higher Education are normally:
- a minimum of 40% in each of six modules or their equivalent at Level 7 (equating to 120 SCQF points at SCQF Level 7 or higher), and
  - satisfactory completion of any designated core modules.

**Diploma of Higher Education (DipHE)**

- 17b.127 The minimum requirements for the award of a Diploma of Higher Education are normally:
- satisfactory completion of Level 7 of the programme, or its equivalent, and
  - satisfactory completion of any designated core modules, and
  - a minimum of 40% in each of six modules or their equivalent at Level 8, and
  - 240 SCQF points at SCQF Level 7 or higher, of which a minimum of 100 must be at SCQF Level 8 or higher.

**Ordinary Degree**

- 17b.128 The minimum requirements for the award of an Ordinary Degree are normally:
- satisfactory completion of Levels 7 and 8 of the programme, or their equivalent
  - satisfactory completion of any designated core modules, and
  - a minimum of 40% in each of six modules or their equivalent at Level 9, and
  - 360 SCQF points at SCQF Level 7 or higher, of which a minimum of 100 must be at SCQF Level 9 or higher.

**Distinction**

- 17b.129 Students may be recommended for the award of Certificate of Higher Education, Diploma of Higher Education or degree with distinction if they attain an average mark of 70% on the relevant level of programme. [NB double modules are counted as two instances of the same mark.]

**Honours degree**

- 17b.130 The minimum requirements for the award of a degree with honours are normally:
- satisfactory completion of Levels 7, 8 and 9 of the programme, or their equivalent
  - satisfactory completion of any designated core modules, and
  - a minimum of 40% in each of six modules or their equivalent studied during Level 10, and
  - 480 SCQF points at SCQF Level 7 or higher, of which a minimum of 200 must be at SCQF Levels 9 and 10, including at least 100 at Level 10
  - for Joint Honours, there should normally be equal balance in credits between two subjects.
  - if switching from Joint Honours to Single Honours, there should normally be an appropriate level of module credit in the subject chosen, meeting the requirements of the programme descriptor for that subject (or equivalent), which may require taking additional modules whereby standard module fees will apply.
  - if switching from Single Honours to Joint Honours, there should normally be equal balance in module credit between two subjects (or equivalent) to achieve the award, which may require taking additional modules whereby standard module fees will apply.

- 17b.131 For all of the above awards, where credit has been achieved through prior completion for



HN awards and recognised through RPL, SQA units at SCQF Level 6 that formally constitute part of a named award completed by the student may contribute to the SCQF Level 7 credit requirements. No other credit below SCQF Level 7 should be counted towards a university award (see section 16.19-16.21).

### **Honours classification**

- 17b.132 These regulations set out the minimum requirements normally expected of a student in each classification category. A board of examiners may exercise its discretion in making a classification decision where there are exceptional circumstances which may have affected a student's performance, and which have not already been taken into account while marking their assessed work. Such discretion may only be applied to raise a student's classification, not to lower it.
- 17b.133 Students will be awarded a first class honours degree if they achieve an average (mean) mark of 70% or more across all SCQF Level 10 credits.
- 17b.134 Students will be awarded an upper second class honours degree if they achieve an average (mean) mark between 60-69% across all SCQF Level 10 credits.
- 17b.135 Students will be awarded a lower second class honours degree if they achieve an average (mean) mark between 50-59% across all SCQF Level 10 credits.
- 17b.136 Students will be awarded a third class honours degree if they achieve an average (mean) mark between 40-49% across all SCQF Level 10 credits.
- 17b.137 Modules will be weighted according to their credit value, e.g. 40-credit modules will be counted as two instances of the same mark. If the student has completed more than 120 credits at Level 10, all module marks will be included in the mean mark calculation. If a student has completed only 100 credits at Level 10, the mean mark of **all** Level 9 modules will be calculated and included as the sixth mark. Any failed modules will be excluded from the mean mark calculation.

### **Double counting of credit**

- 17b.138 Simultaneous double counting of credit for the same module towards degree awards is not permitted. Therefore, once credit has been counted towards one degree award, it cannot be used towards another degree award. In circumstances where exemptions cannot be granted, alternative modules should be selected on advice from the programme team. See Admissions regulations.

### **Conferment of intermediate awards**

- 17b.139 These provisions apply when students are progressing from one level to the next and inter alia qualify for an intermediate award.
- 17b.140 Intermediate awards shall not normally be conferred on students proceeding to some higher award.
- 17b.141 Students who fail to achieve the minimum requirements for an award shall be recommended for a lower award for which they have qualified.



### **Aegrotat awards**

- 17b.142 When a board of examiners does not have enough evidence of a student's performance to be able to recommend the award for which the student was registered, or a lower award specified in the programme regulations, but is satisfied that, but for illness or other valid cause, the student would have reached the standard required, an Aegrotat award may be recommended.
- 17b.143 Aegrotat awards are not intended to be posthumous, and the student must have signified in writing that they are willing to accept the award and understands that this implies waiving the right to be reassessed. Where a student has died prior to completing an award, the regulations for posthumous awards should be followed.
- 17b.144 Aegrotat awards are, therefore, exit awards by definition and students must be clearly advised that temporary withdrawal from their studies may be a better option in some circumstances. Aegrotat awards should only be applied in cases where it is not anticipated that the student will be able to re-engage with study in a reasonable timeframe.
- 17b.145 In recommending an Aegrotat award, the board of examiners must assure themselves that, but for illness or other serious circumstances, the student would have completed the award. Students being recommended for an Aegrotat award must, therefore, have commenced study at the level at which the award will be made, and some assessed work must be available for review. Normally, it would be expected that the student would have completed at least a full semester's study at their level.
- 17b.146 Where an Aegrotat award is not supported by the board of examiners, the student should be recommended for an exit award at a lower level based on credit gained from studies undertaken at the university. This may be a recommendation for the awarding of a Certificate or Diploma of Higher Education, even where such awards are not formally a validated part of the programme of study.
- 17b.147 Aegrotat Ordinary degrees will not be recommended with merit or distinction.
- 17b.148 Aegrotat Honours degrees will be unclassified in all cases.
- 17b.149 Any recommendations for Aegrotat awards should be forwarded to the Deputy Principal immediately following the relevant board of examiners with a note of support from the relevant external examiners(s).

### **Posthumous awards**

- 17b.150 These regulations apply in circumstances in which a posthumous award is to be made. The making of a posthumous award should not be confused with the making of an award posthumously, i.e. to a candidate who has died after qualifying for, but before admission to, the award. In the latter case, the award will not be distinguished in any way from those given to other graduates.



- 17b.151 Posthumous awards will include the words ‘has been admitted to the posthumous degree / award of...’. No distinguishing wording is included on certificates issued to graduands who, having completed the usual requirements and having qualified for the award, die before admission to their award.

#### **Overview**

- 17b.152 A board of examiners should consider the specific regulations below for the award in question before recommending the award of a posthumous degree, diploma or certificate, and should take into consideration any other evidence to support a posthumous award, including the possible impact of mitigating circumstances, the candidate’s level of commitment and participation, and the quality of work submitted by the candidate prior to death.
- 17b.153 Where it is not possible to award a posthumous degree, diploma or certificate for which the candidate was enrolled because there is insufficient evidence to support doing so, an alternative lower level award should be considered as described in the paragraphs below, irrespective of whether that lower level award had been approved at validation for the programme in question.
- 17b.154 Where a student was registered for an SQA award, or in any other case where it is not permitted by an external validating or professional body to award posthumously the qualification, or one of its exit awards, for which the candidate was enrolled, a board of examiners may consider an alternative award at an equivalent level of achievement.
- 17b.155 A written proposal for any posthumous award should be directed to the Deputy Principal immediately following the relevant board of examiners with a note of support from the relevant external examiners(s).

#### **Undergraduate awards**

- 17b.156 A board of examiners may recommend that a posthumous degree, diploma or certificate be awarded, provided that the candidate has (i) progressed into, or been admitted directly to, the relevant year of study for that award and (ii) has completed at least 60 credits at the relevant SCQF Level, ie:
- 60 credits or more at SCQF Level 7 or above must have been completed for recommendation of a posthumous Certificate of Higher Education
  - 180 credits or more at SCQF Level 7 and above, including not fewer than 60 credits at SCQF Level 8, must have been completed for recommendation of a posthumous Diploma of Higher Education
  - 300 credits or more at SCQF Level 7 and above, including at least 100 credits at SCQF Level 8 and at least 60 credits at SCQF Level 9, must have been completed for recommendation of an Ordinary degree
  - 420 credits or more at SCQF Level 7 and above, including at least 100 credits at SCQF Level 8, at least 60 credits at SCQF Level 9 and at least 60 credits at SCQF Level 10, must have been completed for recommendation of an Honours degree.
- 17b.157 A board of examiners may use discretion in whether to recommend an Ordinary degree with distinction. There should be a clear indication in the student’s completed module results that such a recommendation is appropriate. Where a board of examiners wishes to request an award with distinction, they should forward a detailed request to the Deputy



Principal outlining the basis for the request.

- 17b.158 Posthumous Honours degree will normally be recorded as unclassified unless there is clear evidence to allow confident assessment of the likely degree class had the student completed the programme. Where a board of examiners wishes to request such classification, they should forward a detailed request to the Deputy Principal outlining the basis for the request.
- 17b.159 A board of examiners may consider recommending the award of a Certificate or Diploma of Higher Education, even if this award has not been approved at validation for the programme in question, and providing that this lower level award is based on credit gained from studies undertaken at the university.
- 17b.160 Certificates and diplomas may also be recommended in the case of students who had been studying on SQA programmes, including HNC, HND or PDA awards. In these cases, the principles of credit accumulation outlined above should be applied to credit from any SQA units completed.

**Taught Masters programmes - postgraduate certificate and diplomas**

- 17b.161 A board of examiners may recommend that a posthumous postgraduate certificate or diploma be awarded, provided that the candidate has achieved no fewer than two-thirds of the credits required.
- 17b.162 A board of examiners may consider recommending the award of a postgraduate certificate, even if this award has not been approved at validation for the programme in question, where it is not possible to award the postgraduate diploma.
- 17b.163 A board of examiners may use discretion in deciding whether to recommend the award of a postgraduate diploma with either merit or distinction.

**Taught Masters programmes - modular Masters degrees by examination and dissertation**

- 17b.164 A Board of Examiners may recommend the award of a posthumous postgraduate diploma to a candidate registered on a full taught Masters programme who has died:
- (i) before successful completion of the taught element (typically represented by the postgraduate diploma exit point), but after having achieved no fewer than two-thirds of the credits require to complete successfully the taught element
  - (ii) before commencing the dissertation phase of the award, but after successful completed of the taught element.
- 17b.165 A board of examiners may recommend that a posthumous Masters degree be awarded to a candidate on the dissertation phase of a Masters programme, who has died prior to the submission of a dissertation, provided that the following criteria are satisfied:
- (i) enough of the research project must have been completed to allow a proper assessment to be made of the scope of the dissertation
  - (ii) the standard of research work completed must be of that standard normally required for the award of a Masters degree in question, and must demonstrate the candidate's grasp of the subject
  - (iii) any written work available (e.g. draft chapters, work published or prepared for



publication, presentations, progress reports) must demonstrate the candidate's ability to write a dissertation of the required standard.

- 17b.166 The board of examiners must be provided by the candidate's supervisor, with evidence of the research work completed, draft chapters etc. The supervisor shall also submit a report for consideration by the examiners.
- 17b.167 A board of examiners may use discretion in deciding the grade for the dissertation and whether to award the Masters degree overall with Distinction.



## **18 ASSESSMENT APPEALS PROCEDURE**

---

### **Introduction and scope**

- 18.1 These procedures aim to provide a fair, accessible and timely process for students to request a review of an assessment decision made by the university, where there are grounds to do so.
- 18.2 These procedures are applicable to all higher education students, including those enrolled on programmes leading to qualifications of SQA and other awarding bodies, and postgraduate research students. All students will be provided with information about the appeals procedure at induction.
- 18.3 Students have the right to appeal against an assessment decision made by an academic assessment body authorised to make decisions on student progression, assessment and awards, i.e. a progression board, a board of examiners or Research Degrees Committee. A student must have reasonable grounds on which to base an appeal (Section 18.10 below).
- 18.4 All assessment decisions on SQA provision (or other awarding bodies) are subject to internal verification procedures and may be selected for external verification. Final ratification of assessment outcomes is by the relevant awarding body.
- 18.5 Without prejudice to the outcome of the appeal, a student may continue with their programme of study without disadvantage, and access the facilities and services of the university and their HAP while their appeal is in progress. However, students who have submitted an appeal will be unable to graduate until the appeal process has been fully completed.
- 18.6 Applicants may appeal an assessment decision relating to admission to a programme or Recognition of Prior Learning through the appeals procedure, although only on the grounds for appeal below.
- 18.7 Students who believe they may have grounds for appeal can seek advice and guidance from their students' association at the earliest opportunity.
- 18.8 These procedures are not applicable to decisions made through other university processes, such as non-academic disciplinary or academic misconduct procedures, nor to procedures undertaken by or with relevant professional, statutory or regulatory bodies, such as fitness to practise processes.
- 18.9 These procedures do not cover student complaints. The complaints handling procedure can be found at <https://www.uhi.ac.uk/complaints>.

### **Grounds for appeal**

- 18.10 Appeals against the decision of an academic assessment body will normally only be considered on one or more of the following grounds:



Academic Standards and Quality Regulations 2025-26  
Assessment appeals procedure

- a. that a student's performance was adversely affected by illness or other factors which they were unable or, with valid reason, unwilling to divulge, prior to the meeting of the academic assessment body. The appeal must be accompanied by documentary evidence acceptable to the senior manager who considers the appeal in the first instance (see Section 18.13 below)
  - b. evidence of material administrative error or that an assessment was not conducted in accordance with the university's procedures and regulations
  - c. evidence of prejudice or bias or improper/inadequate assessment on the part of any of the examiners (PGR students only).
- 18.11 Appeals that question the academic judgement of a member of staff or an academic assessment body will not be considered.
- 18.12 Appeals will not normally be accepted from third parties.

### Appeals procedure

#### Stage 1 – Informal Procedure

- 18.13 A student who believes that they have grounds for appealing against the decision of an academic assessment body should, in the first instance, discuss the matter with the appropriate staff in their HAP. This is likely to be the lecturer, Personal Academic Tutor or programme leader, or Director of Studies (for PGR students). This should normally be done within ten working days of the assessment decision being notified to the student.

#### Stage 2 – Formal Procedure

- 18.14 If the matter is not resolved through the informal procedure, a student who wishes to appeal should do so in writing, setting out the reasons for the appeal and including documentary evidence, using the appeals proforma. This should be sent to the appropriate senior manager in the student's HAP (students will be provided with this person's name and contact details at induction), normally within 15 working days of the assessment decision being notified to the student.
- 18.15 The senior manager will acknowledge receipt of the appeal immediately to the student. The senior manager will then, normally within ten working days, consider the grounds for appeal and the evidence presented and determine whether there is a *prima facie* case to be referred to the chair of the academic assessment body which made the original assessment decision. The senior manager who handles the appeal must be an individual who had no involvement in the original assessment decision. This decision will normally be communicated to the student within five working days of being made.
- 18.16 If the senior manager decides that there is no *prima facie* case, and the student is dissatisfied with this decision, then the student may appeal directly to the chair of Academic Council (Stage 3), normally within ten working days. If the senior manager decides that there is a *prima facie* case, they will refer the matter to the chair of the academic assessment body for review.
- 18.17 The chair has delegated authority from the academic assessment body to reconsider the validity of the original assessment decision in the light of new evidence, submitted as the grounds for the appeal, and decide whether or not to uphold the appeal, normally within ten



working days. The chair may consult with relevant members including external examiners (but is not obliged to) or may decide to convene a meeting of the full academic assessment body.

- 18.18 The chair of the academic assessment body will communicate the decision on the case to the senior manager who originally received the appeal. The senior manager will communicate this decision to the student, together with information on how the appeal has been investigated. The decision, and any accompanying information, will be formally reported to the next meeting of the academic assessment body, and copied to the Dean of Learning, Teaching and Students for the purposes of institutional monitoring and enhancement.
- 18.19 If the student is dissatisfied with the decision communicated at Section 18.18, they may appeal directly to the chair of Academic Council (Stage 3), normally within ten working days. The appeal must be in writing, and stating the reason(s) why the student believes the decision should be revisited.

### **Stage 3 – Appeal to chair of Academic Council**

- 18.20 On receipt of an appeal referred from Stage 2, the chair of Academic Council (or nominee) will refer the case to the Dean of Learning, Teaching and Students, who will review the student's request, the evidence in the case file compiled at Stage 2 and any additional evidence submitted.
- 18.21 A student would normally be expected to provide new information, or evidence of procedural irregularity or bias as a rationale for seeking a review of the Stage 2 outcome.
- 18.22 If the Dean of Learning, Teaching and Students accepts that the student has reasonable grounds for seeking a review of the Stage 2 outcome, they will either:
- (i) refer the appeal to the chair of the assessment body if it has not previously been considered, or
  - (ii) convene an appeals panel if the appeal has been previously heard at Stage 2, but not upheld. The appeals panel will normally be convened within thirty working days. The Dean of Learning, Teaching and Students is responsible for all communications with students, panel members and any other persons involved in the appeal, both before and after an appeals panel hearing. The Dean of Learning, Teaching and Students does not sit on the panel themselves, nor review the evidence submitted to the panel.
- 18.23 If the Dean of Learning, Teaching and Students does not accept that the student has reasonable grounds for seeking a review of the Stage 2 outcome, they will notify the student in writing of this decision, and the reasons for it.

### **Membership and remit of the appeals panel**

- 18.24 The appeals panel, acting on behalf of Academic Council, is authorised to consider and decide on appeals against assessment decisions which have not been resolved through Stage 2 of the appeal process.
- 18.25 The appeals panel has the power to confirm the decision of an academic assessment body, or to overturn or revoke that decision if it upholds the appeal. This power includes decisions



Academic Standards and Quality Regulations 2025-26  
Assessment appeals procedure

on module marks, the outcome of a PGR progression decision or viva examination, conferral of an award or the classification of an award, eligibility to progress on a programme, failure or exclusion/withdrawal on academic grounds.

- 18.26 Where an appeal is upheld, the appeals panel may determine, *inter alia*, that the student is entitled to proceed on the programme of study and/or to be reassessed in accordance with any specified conditions, as deemed to be in the best interest of the student while ensuring academic standards are maintained. These provisions are subject to the continued availability of the programme in a suitable form.
- 18.27 The appeals panel will consist of individuals who have had no prior involvement in the case:
- a. the chair of Academic Council (or a nominee appointed from the membership of Academic Council, which will normally be a Dean of Faculty not involved in Stage 2 or the Deputy Principal (Academic and Research))
  - b. two senior members of staff
  - c. president of students' association, or nominee
  - d. officer and clerk to the panel, nominated by the Dean of Learning, Teaching and Students.
- 18.28 If the appeals panel does not reach unanimous agreement on whether to uphold an appeal or not, its decision will be made by majority vote. If the appeals panel is evenly split, the chair has a casting vote. The decision of the appeals panel is final.
- 18.29 The Dean of Learning, Teaching and Students will inform the student in writing of the outcome of the hearing no later than five working days after the hearing has taken place.
- 18.30 The Dean of Learning, Teaching and Students is responsible for ensuring that the outcome of the appeals panel is satisfactorily implemented through communicating with all relevant staff.

**Appeals panel hearing procedures**

- 18.31 Members of the appeals panel will receive the following documentation at least five working days before the date of the hearing:
- a. the student's appeal proforma and supporting evidence
  - b. the results of the initial investigation carried out by the senior manager, the outcome from Stage 2 of the appeals procedure, and any other documents pertinent to the case, as appropriate
  - c. any statement received from the chair of the relevant academic assessment body
  - d. the results of all students taking the particular assessment (where relevant)
  - e. the programme assessment regulations (if these differ from the standard academic regulations).
- 18.32 Documentary evidence submitted on the day of the hearing will not normally be considered.
- 18.33 The appeals panel has the power to require the attendance of any member of staff, providing a reasonable period of notice is given for such attendance, and to access any records and documents which it regards as necessary to its conduct.
- 18.34 The chair of the appeals panel, in consultation with other members of the appeals panel, is



responsible for managing the proceedings at the hearing. According to the circumstances, the parties to the appeal may be seen separately (in whatever order is deemed appropriate) or together. The appeals panel will normally ask the student, the relevant staff member(s) involved and any witnesses to leave the hearing before considering the evidence and reaching a decision.

### **Rights of students**

- 18.35 The student has the right to attend the hearing, and will be informed in writing of its date and place, and their rights under the appeals procedure, at least ten working days prior to the hearing.
- 18.36 It is not mandatory for the student to attend the hearing. However, the student should be aware that if they do not attend (without good reason), they will forgo the opportunity to present their case directly to the panel.
- 18.37 The student will receive in advance of the hearing all papers circulated to members of the appeals panel, except any documents deemed by the chair to be confidential to the appeals panel.
- 18.38 The student and any other person(s) cited in the appeal, each accompanied if they wish by a friend or students' association representative, has the right to appear before, and be heard by, the appeals panel. Under this procedure the definition of 'friend' excludes members of the legal profession engaged to act in their professional capacity.
- 18.39 Students' privacy and confidentiality will be respected, wherever possible. However, unless specifically stated otherwise, it will be assumed that students have given permission to disclose to the appeals panel as necessary any information provided. If a student wishes any matter to remain confidential they must state this when submitting their appeal. In such cases, it may not be possible to consider the appeal fully.

### **Rights of staff**

- 18.40 The member of staff or the chair of the academic assessment body whose decision is being reviewed has the right to submit a statement prior to the appeals panel hearing.
- 18.41 The member of staff or the relevant academic assessment body has the right to be represented at the appeals panel. It is the responsibility of the chair of the academic assessment body to determine who will represent the academic assessment body at the hearing.

### **Outcome of the appeals panel**

- 18.42 The Dean of Learning, Teaching and Students is responsible for providing the student, and any other relevant parties, with a 'completion of procedures' letter within five working days of the hearing. The letter will include a clear statement confirming that internal appeal procedures have been completed, the decision that has been reached and the reasons for the decision. Information on next steps, such as how and when any reassessment will take place, will also be included.



Academic Standards and Quality Regulations 2025-26  
Assessment appeals procedure

- 18.43 The 'completion of procedures' letter will also advise the student of their external right of appeal in the event that they remain dissatisfied with the final outcome or response to their appeal.
- 18.44 A report of the hearing will be made available to the members of the appeals panel, the student concerned, and to all relevant parties involved, including the chair of the relevant academic assessment body.
- 18.45 The proceedings of appeals panel hearings and the report are confidential to the parties involved.

**External right of appeal**

- 18.46 Students enrolled on programmes leading to a non-regulated qualification (see also 17a.3) awarded by SQA (including HNC, HND and PDA awards) do not have a further right of appeal to SQA.
- 18.47 Students enrolled on programmes leading to a regulated qualification (including SVQs) (see also 17a.3) awarded by SQA or other awarding body have further access to their appeals procedure, normally only when the university's internal appeals procedure has been exhausted.
- 18.48 Students undertaking a regulated qualification, have a further right of appeal to SQA Accreditation, or Ofqual as appropriate, once they have exhausted the university's and the awarding body's appeals procedures. SQA Accreditation does not have the power to overturn a decision based on academic judgement or assessment, only to consider whether or not the university has failed to follow an appropriate administrative process.
- 18.49 Students have further recourse to the [Scottish Public Services Ombudsman](#) (SPSO) if they remain dissatisfied with how the appeal was processed, and only once the university's complaints handling procedure has been exhausted. SPSO will consider complaints made about service failure and maladministration which may include issues surrounding programme delivery. SPSO does not have the power to overturn a decision based on academic judgement or assessment, only to consider whether or not the university has failed to follow an appropriate administrative process.

**Reporting and monitoring**

- 18.50 The Dean of Learning, Teaching and Students will collate an annual overview report to Academic Council on the appeals process, including all appeals submitted, regardless of the stage in the procedure at which they are resolved. The report may make recommendations and observations concerning any matters of detail or principle arising from consideration of appeals cases.
- 18.51 Academic Council is responsible for monitoring and reviewing the effectiveness of the appeals procedure regularly, and identifying any opportunities for enhancement and sharing good practice.



Academic Standards and Quality Regulations 2025-26  
Assessment appeals procedure

**Timescale of assessment appeals procedure**

Stage	Timescale	Appeals procedure	Outcome
<b>1</b>	Within ten working days of notification of assessment result	<b>Informal procedure</b> Student tries to resolve matter through discussion with appropriate staff  Appeal still unresolved	Possible resolution
<b>2</b>	Within 15 working days of notification of assessment result	<b>Formal procedure</b> At this stage, the student must supply an appeal proforma to the senior manager, with evidence where appropriate, who will immediately acknowledge receipt	
	Within ten working days of receipt of an appeal	The senior manager will consider the grounds for appeal and determine if there is a <i>prima facie</i> case to be submitted to the chair of the relevant academic assessment body	
	Within five working days of senior manager's decision	The decision of the senior manager will be confirmed in writing to the student within five working days of the decision having been made	Possible resolution
		If the senior manager decides that there is no <i>prima facie</i> case and the student is dissatisfied with this decision, then they may submit an appeal to the chair of Academic Council within ten working days	
	Within ten working days of receipt of appeal from senior manager	If there is a <i>prima facie</i> case, the senior manager will refer the matter to the chair of the academic assessment body, who will decide whether or not to uphold the appeal, consulting with others as appropriate  The chair will advise their decision to the senior manager, who will then inform the student and provide information on how the appeal has been investigated	Possible resolution
		If the student is dissatisfied with this decision, then they may submit an appeal to the chair of Academic Council within ten working days	



Academic Standards and Quality Regulations 2025-26  
Assessment appeals procedure

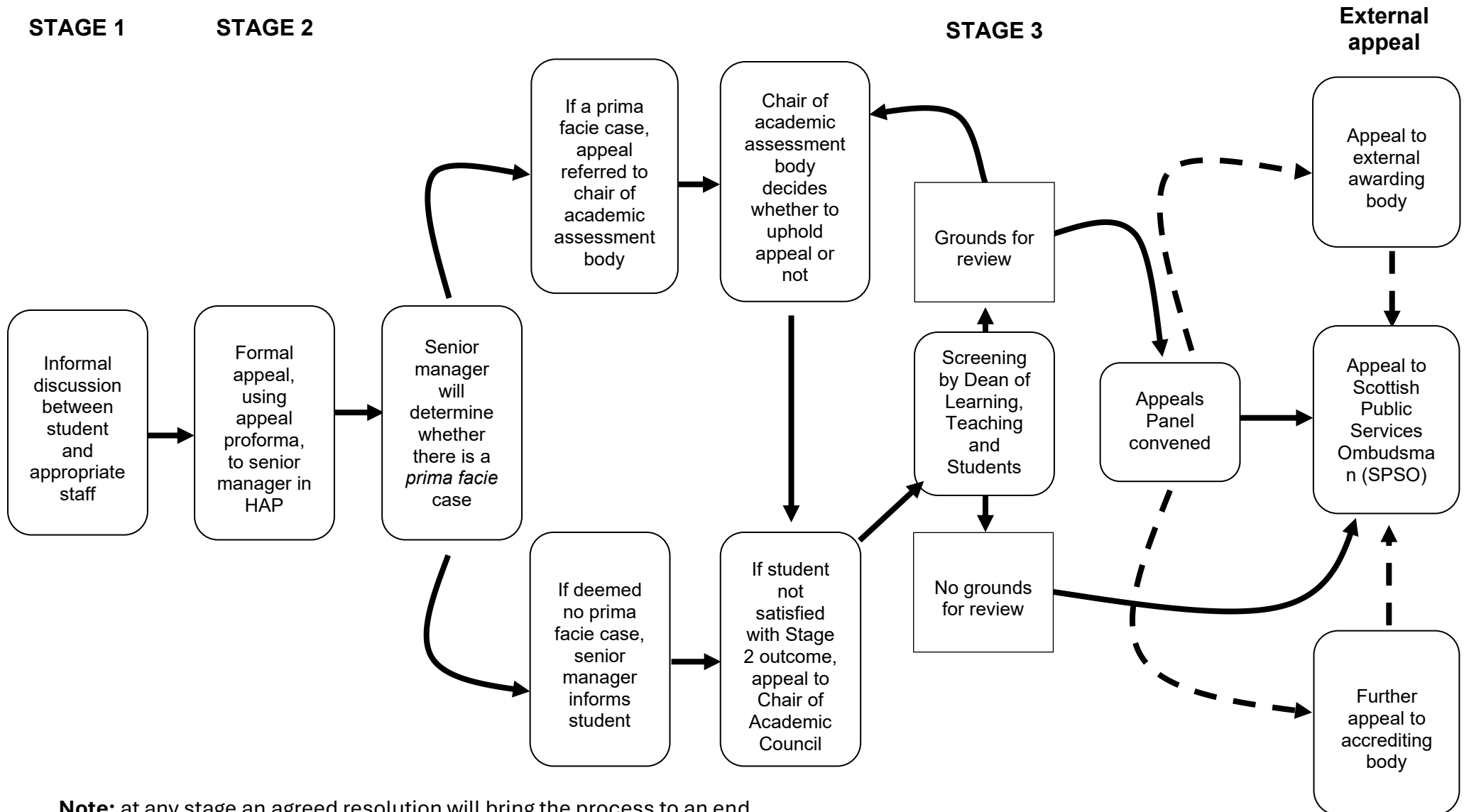
Stage	Timescale	Appeals procedure	Outcome
<b>3</b>	Within 30 working days of request  Prior notice given of ten working days	<b>Appeals Panel</b> The chair of Academic Council will request the Dean of Learning, Teaching and Students to review the case if an Appeals Panel is to be convened The student will be given written notice of the date and place of the hearing and their rights at least ten working days prior to hearing	
	Within five working days of the hearing	The Dean of Learning, Teaching and Students will inform the student in writing of the outcome of the hearing no later than five working days after the hearing has taken place	Possible resolution
		Student has a further right of appeal to awarding body (where this is not UHI) for some awards (see 18.46-47)	
		Student undertaking regulated qualification has a further right of appeal to SQA Accreditation or Ofqual, if appropriate (see 18.48)	
		Student has further recourse to the Scottish Public Services Ombudsman, once internal complaints handling procedure has been exhausted (18.49)	

*Table 22: Timescale of assessment appeals procedure*



Academic Standards and Quality Regulations 2025-26  
Assessment appeals procedure

Assessment appeals procedure flowchart





## **19 ACADEMIC MISCONDUCT POLICY AND PROCEDURE**

---

### **Introduction**

- 19.1 Students must ensure that all assessed work presented is their own and that it fully acknowledges the work and opinions of others. It is the student's responsibility to ensure that they do not commit any form of academic misconduct or gain unfair advantage in any other way. Academic misconduct may be proven to have taken place even if the student has not gained any unfair advantage by doing so.
- a. Students enrolled in PSRB-accredited programmes must adhere to professional conduct expectations in addition to academic misconduct. Breaches of professional standards, including serious misconduct, may result in Fitness to Practise proceedings.
  - b. If the student is deemed unfit to enter professional practise, outcomes may include additional supervision, placement suspension, or permanent removal from the programme.
- 19.2 Academic misconduct is considered to be a serious offence by the university, and action will be taken against any student who contravenes these regulations through negligence, foolishness or deliberate intent.
- 19.3 Accessibility requirements can be considered on a case-by case basis.
- 19.4 Allegations of academic misconduct will be addressed fairly and consistently, using a three-stage process of informal and formal investigation and action.
- 19.5 An allegation of academic misconduct that has been dismissed as a disciplinary offence may still incur an academic penalty for poor scholarship.
- 19.6 An allegation of academic misconduct may be made at any point during the student's period of registration, or after an award has been made.
- 19.7 The academic misconduct policy applies to all higher education students.
- 19.8 Procedures for investigation of allegations and penalties for students on taught programmes (or studying taught modules as part of a postgraduate research degree) are set out in Section 19.15-32 and 19.56-58. Where a student is registered on a programme validated by another awarding body, including SQA, the specific action to be taken may be influenced by the requirements of that body. See also the 'Centre and candidate malpractice and maladministration policy and procedure' for SQA HE provision.
- 19.9 Procedures for investigation of allegations and penalties for students on postgraduate research degrees are set out in Section 19.35-44 and 19.64.
- 19.10 The university considers the issue of academic misconduct very seriously; accordingly the opportunity of a Repeat Year cannot be used to remove or avoid an academic misconduct penalty or to have a proven academic misconduct removed from a student's profile.



## **Forms of academic misconduct**

19.11 Academic misconduct may take different forms including, but not limited to, those listed below. Further guidance is provided in an appendix to these regulations:

- i plagiarism
- ii cheating
- iii collusion
- iv falsification or fabrication of data
- v personation
- vi bribery.

## **Minor and serious academic misconduct**

19.12 The university distinguishes between minor and serious cases of academic misconduct depending on the gravity of the offence and the circumstances in which it was committed. The penalty applied in each case will be determined by the staff investigating the case, or the Academic Misconduct Panel. Deciding whether an offence is minor or serious is a matter of professional judgement and staff will take into account the following factors:

- whether the student has previously committed academic misconduct
- level of study
- impact of offence on other students eg in groupwork assessments, examinations
- evidence that the student sought to gain unfair advantage
- material impact of the academic misconduct on the quality of the work
- proportion of the assessment that has been plagiarised
- whether or not critical aspects of the assessment have been plagiarised (ie key ideas central to the assessment and associated learning outcomes)
- credit value and weighting of the assessment.

19.13 Minor academic misconduct presents a minimal threat to the integrity of the assessment process and may be the result of a student's poor understanding of referencing or academic practice. Minor academic misconduct will normally incur one or more of the penalties listed in Section 19.60(a-d) or 19.64(a-c).

19.14 Serious academic misconduct presents a significant threat to the integrity of the assessment process, and may reflect evidence that the student has knowingly contravened regulations. Serious academic misconduct will incur one or more of the penalties listed in Section 19.60(d-i) or 19.64(d-i).

19.15 Where academic misconduct has been admitted or proven on one occasion, a second instance of academic misconduct by that student will normally be treated as serious.

19.16 In any instance where the academic misconduct appears to be serious, then the formal investigation procedure below must be followed.



## **Procedures for investigation of alleged academic misconduct (taught provision)**

### **Informal procedure**

#### **Academic Misconduct in Coursework**

- 19.17 When academic misconduct is suspected in an assessment, the lecturer will initially advise the student(s) of the suspicion and that further investigation will take place. They will investigate the detail of the submitted work using their professional judgement. They may draw on supporting evidence from the university's originality checking software program, but only if this has been used for the assessment in question in accordance with current university policy. No mark or result should be entered onto the student's record until the suspicion of academic misconduct has been resolved.
- 19.18 In dealing with suspected academic misconduct, staff will take into account instances of poor referencing or scholarship, for example, and have due regard for new students' need to develop familiarity with scholarly practice, particularly at SCQF levels 7-8. Using their professional judgement as to the circumstances of the case, staff may decide not to initiate any formal procedures, but to admonish the student(s) and counsel them with regard to good academic practice. Notification will be sent to the student's Personal Academic Tutor and Quality Manager.

### **Formal investigation**

*NB throughout this section, 'programme leader' refers to the role fulfilled by the degree programme leader or the AP programme leader or curriculum leader in the case of SQA provision.*

- 19.19 The lecturer and / or module leader shall make a written report providing evidence of alleged academic misconduct to the programme leader, which triggers the formal investigation procedure. If the lecturer is also the programme leader, the written report should be submitted to the AP head of department responsible for the unit or associate dean responsible for the module.
- 19.20 If the lecturer and programme leader are in agreement that academic misconduct appears to have taken place, they will discuss the matter in a formal interview with the student(s) concerned in order to gauge the student's knowledge and ascertain if they are the author of the assessment. The interview also provides an opportunity for the student(s) to present their case. The interview will be held within five working days of receipt of the report from the lecturer.
- 19.21 The student will be informed of details of the process and the purpose of the interview as soon as possible and at least three working days prior to the interview. They will also be advised where they may seek advice, ie the students' association, and that they may wish to be accompanied at the interview by a friend or the students' association representative.
- 19.22 Where the student declines to, or does not, attend an interview without good reason, the programme leader will report the matter and the circumstances to the Dean of Learning, Teaching and Students who will convene the Academic Misconduct Panel.



- 19.23 If the allegation of academic misconduct is proven and deemed to be minor, the lecturer and programme leader will determine an appropriate penalty (see guidance). The student will be advised in writing of the outcome within two working days of the interview, and that details of the offence and the penalty will be held on their student record for five years, or the normal duration of the programme, whichever is the longer. Notification will be sent to the student's Personal Academic Tutor and Quality Manager.
- 19.24 The programme leader is responsible, where relevant, for ensuring that the student record system is updated in accordance with the outcome of the panel, including modification to marks.
- 19.25 Where an allegation of academic misconduct is made after the relevant progression / exam board has met to consider the student's assessment, the procedure set out above will be followed. The chair of the progression / exam board will be advised of the outcome as soon as practicable, and will be responsible for ensuring that the student record system is updated accordingly.
- 19.26 If the allegation of academic misconduct is proven and deemed to be serious, the programme leader will report the matter and the circumstances to the Dean of Learning, Teaching and Students who will convene the Academic Misconduct Panel.
- 19.27 Each report should contain details of any other instances of academic misconduct in the student's record. In cases of plagiarism, collusion or falsification, the report should also contain a statement from the first marker for the module / unit on whether or not there is evidence of the learning outcomes for the assessment having been met by the student(s) involved, despite the student's resort to academic misconduct.
- 19.28 The proceedings and report of the academic misconduct investigation shall be confidential to the parties involved and the Quality Manager.
- 19.29 All cases of academic misconduct which are formally investigated, and the penalties applied, will be reported to the Dean of Learning, Teaching and Students on an annual basis.

#### **Academic Misconduct in Examinations**

- 19.30 Suspected academic misconduct during an examination will automatically be formally investigated, in accordance with the procedure set out in 19.19-29.
- 19.31 Where academic misconduct is suspected in an examination, the invigilator(s) will inform the student of their suspicions and clearly annotate the student's script. The student will also be advised by the invigilator(s) that a full report will be submitted to the examination officer in the academic partner following the examination. This should be conducted with the minimum of disruption to other candidates in the examination room.
- 19.32 The invigilator(s) will seek to confiscate any relevant evidence (for example, any unauthorised material) and allow the student to continue with the examination. However, if the student persists with the irregularity or if they refuse to submit any suspected material to the invigilator(s) they will be expelled from the examination room.
- 19.33 Immediately following the examination, the invigilator(s) will submit a report of the matter



(using the Invigilator Report Form) to the examination officer of the relevant academic partner along with the scripts and other examination stationery. The examination officer will ensure that the report is immediately sent to the programme leader and the Quality Manager. The invigilator's report should be accompanied by any relevant evidence.

- 19.34 If a student believes academic misconduct to be taking place during an examination, it is their responsibility to bring this to the attention of the invigilator(s). However, no action can be taken unless the suspected academic misconduct is subsequently verified by the invigilator(s).

### **Procedures for investigation of alleged academic misconduct (PGR provision)**

- 19.35 Allegations of academic misconduct will be investigated as soon as it is practical to do so.
- 19.36 Where academic misconduct is suspected in the thesis or progress monitoring reports and/or associated work, the member of staff / examiner should submit a written statement, together with all related documentation, directly to the Dean of Research.
- 19.37 If academic misconduct is alleged or suspected in the actual thesis during the examination process, the examination process must be stopped immediately, even if this is on the day of the ORAL examination.
- 19.38 If academic misconduct is alleged or suspected in the actual thesis after the oral examination has taken place, but before the award has been made, the award or conferment process shall be suspended pending the outcome of the investigation.
- 19.39 Investigations can be conducted after an award has been made if credible evidence comes to light which suggests misconduct may have taken place.

### **Informal procedure**

- 19.40 The Dean of Research will undertake an initial informal investigation, including meetings with the student and the Director of Studies. They may seek advice from other internal or external subject specialists and/or draw on supporting evidence from the university's originality checking software programme (if this has been used in accordance with current university policy).
- 19.41 Given the complexity of research programmes, for allegations involving more than one student, individual hearings should normally be convened.
- 19.42 If, as a result of the initial informal investigation, the Dean of Research concludes there is no case to answer, no further action will be taken.
- 19.43 If an internal examiner, external examiner or supervisor makes an allegation of academic misconduct, and it is found there is no case to answer, the examiner or supervisor should be replaced, where practicable, unless both the student and the examiner or supervisor agree otherwise.



## **Formal investigation**

19.44 If, as a result of the initial informal investigation, there is a potential case of serious academic misconduct, the Dean of Research will report the matter and the circumstances to the Dean of Learning, Teaching and Students, who will convene an Academic Misconduct Panel in accordance with the procedures below. The Panel will normally be chaired by the Dean of Research.

## **Academic misconduct panel**

19.45 Where an allegation of serious academic misconduct has been made, or where a student(s) has not attended for formal interview, the matter will be investigated as soon as reasonably practicable by an Academic Misconduct Panel.

19.46 The Dean of Learning, Teaching and Students is responsible for convening the Academic Misconduct Panel, but this is solely a coordination role. The Dean of Learning, Teaching and Students does not sit on the panel themselves, nor review the evidence submitted to the panel.

19.47 The panel will comprise:

- a. Chair - the Dean of Faculty responsible for the module/unit on which the academic misconduct is alleged to have taken place, Dean of Research or their nominee
- b. two other members of staff not directly involved with the student
- c. president of the students' association (or nominee) not directly involved with the student
- d. clerk to the panel.

19.48 The staff initially involved in the discovery of the alleged academic misconduct shall not sit on the panel; however they must submit a written statement concerning the alleged academic misconduct for consideration by the panel.

19.49 The Academic Misconduct Panel is responsible for establishing whether or not academic misconduct has taken place and, thereafter, to determine what penalty should be imposed. The Dean of Learning, Teaching and Students will convene the panel within ten working days of receipt of notification from the programme leader / Dean of Research.

19.50 Notification of the date, time and place of the hearing will be provided, in writing, to members of the panel and the student(s) concerned at least five working days prior to the hearing. Both the panel and the student(s) will be provided with full details of the alleged academic misconduct and any supporting documentation. The panel has the right to request the attendance of relevant staff members.

19.51 The student(s) will be advised of their rights and, if attending the hearing, that they may be accompanied by a friend or the students' association representative. Under this procedure, the definition of 'friend' does not include members of the legal profession engaged to act in their professional capacity.

19.52 The student(s) will have the opportunity to identify any adjustments to meeting arrangements so that they can fully and fairly participate in the hearing.



- 19.53 The student(s) may submit a written statement of mitigation concerning the alleged academic misconduct.
- 19.54 It is not mandatory for the student(s) to attend the hearing. However the student(s) should be aware that if they do not attend (without good reason), they will forgo the opportunity to present their case directly to the panel.
- 19.55 The panel will hear the student(s), staff, and witnesses as appropriate, and consider the student's statement. The student(s), staff and witnesses shall withdraw while the panel deliberates. In reaching its conclusion, the panel will also determine the penalty to be imposed. The panel will report its conclusion to the Dean of Learning, Teaching and Students, including information about any other instances of academic misconduct in the student's record. The penalty will be held on their student record for five years, or the normal duration of the programme, whichever is the longer.
- 19.56 The Dean of Learning, Teaching and Students will, within two working days, advise the student(s) in writing of the outcome of the panel, and that, where relevant, details of the offence and the penalty will be held on their student record. The Dean of Learning, Teaching and Students will also inform the programme leader, Personal Academic Tutor and quality manager of the outcome of the panel. For PGR students, the Dean of Learning, Teaching and Students will advise the Director of Studies, quality manager and Graduate School.
- 19.57 The programme leader is responsible, where relevant, for ensuring that the student record system is updated in accordance with the outcome of the panel, including modification to marks or the student's enrolment status. Where necessary, the programme leader will communicate with the quality manager of the student's HAP.
- 19.58 The proceedings and report of the Academic Misconduct Panel shall be confidential to the parties involved, the programme leader/Director of Studies, Personal Academic Tutor and quality manager.

#### **Penalties for academic misconduct (taught provision)**

- 19.59 The general principle is that the penalty should be appropriate to the scale of the offence and to the stage reached in the student's academic career.
- 19.60 A student who is deemed to have committed academic misconduct may be liable to one or more of the following penalties:
- a. an admonition (informal warning)
  - b. a reprimand (a formal written warning which will remain on the student's record for a specified period)
  - c. a reduction in the mark awarded for one or more assessments in one or more modules / units (see guidance), with the opportunity to resit where appropriate
  - d. a mark of zero / fail grade for one or more assessments in one or more modules / units, with the opportunity to resit
  - e. a mark of zero / fail grade in one or more modules / units with no opportunity to resit
  - f. a reduction in the classification of award at honours level (only where the offence relates to honours level provision)
  - g. suspension from the university for a specified period



- h. permanent exclusion from the university
- i. revocation of university award.

19.61 For students on awards of other awarding bodies, they may be subject to the regulations and penalties of that awarding body relating to academic misconduct.

#### **Reassessment after academic misconduct is proven**

19.62 A penalty for academic misconduct may or may not result in a fail mark for a module / unit, depending on the other assessed components in the module / unit. Where a penalty is imposed but the module / unit is passed, the student will not have the opportunity to re-submit the penalised work for a higher mark.

19.63 Where further attempts are allowed at assessments, the student's work should be marked without reference to the academic misconduct of the previous assessment, but will be subject to normal regulations relating to reassessment.

#### **Penalties for academic misconduct (PGR provision)**

19.64 A student who is deemed to have committed academic misconduct may be liable to one or more of the following penalties:

- a. an admonition (informal warning)
- b. a reprimand (a formal written warning which will remain on the student's record for a specified period) with potential requirement to amend submitted work
- c. student's upgrade to PhD is deferred
- d. transfer to lower degree
- e. thesis to be revised and resubmitted (with or without second oral examination)
- f. suspension from the university for a specified period
- g. de-registration from research programme
- h. permanent exclusion from the university
- i. revocation of university award.

#### **Communication with external funding agencies**

19.65 The university will inform an external funding agency, in confidence and at the earliest opportunity, of allegations of serious academic misconduct where there are reasonable grounds for the allegation. Exceptionally, external funding agencies may wish to undertake their own investigation into allegations which concern their funded researchers, for example, where it deems there is reputational risk, or where it is dissatisfied with the investigation undertaken by the university. Any investigation undertaken by an external funding agency would normally only be undertaken following consultation between the agency and appropriate university staff.

#### **Students' right of appeal**

19.66 The student has a right of appeal against the outcome of the formal investigation or the decision of the Academic Misconduct Panel.

19.67 A student may appeal in writing to the Deputy Principal. The appeal must be submitted within



ten working days of the receipt of the decision and may be made on the following grounds:

- the penalty was outwith the scope of the academic misconduct policy and procedures
- the penalty imposed was unreasonable
- there was a procedural irregularity in the process undertaken by a member of staff or the Academic Misconduct Panel
- the decision reached was unreasonable as a result of actions or omissions by a member of staff or the Academic Misconduct Panel
- new evidence is now available which might have caused the panel to reach a different conclusion, but could not have been made available at the time of the hearing.

19.68 The Deputy Principal will consider the written appeal together with the documented proceedings of the panel, and shall notify their decision within fifteen working days of receipt of the appeal.

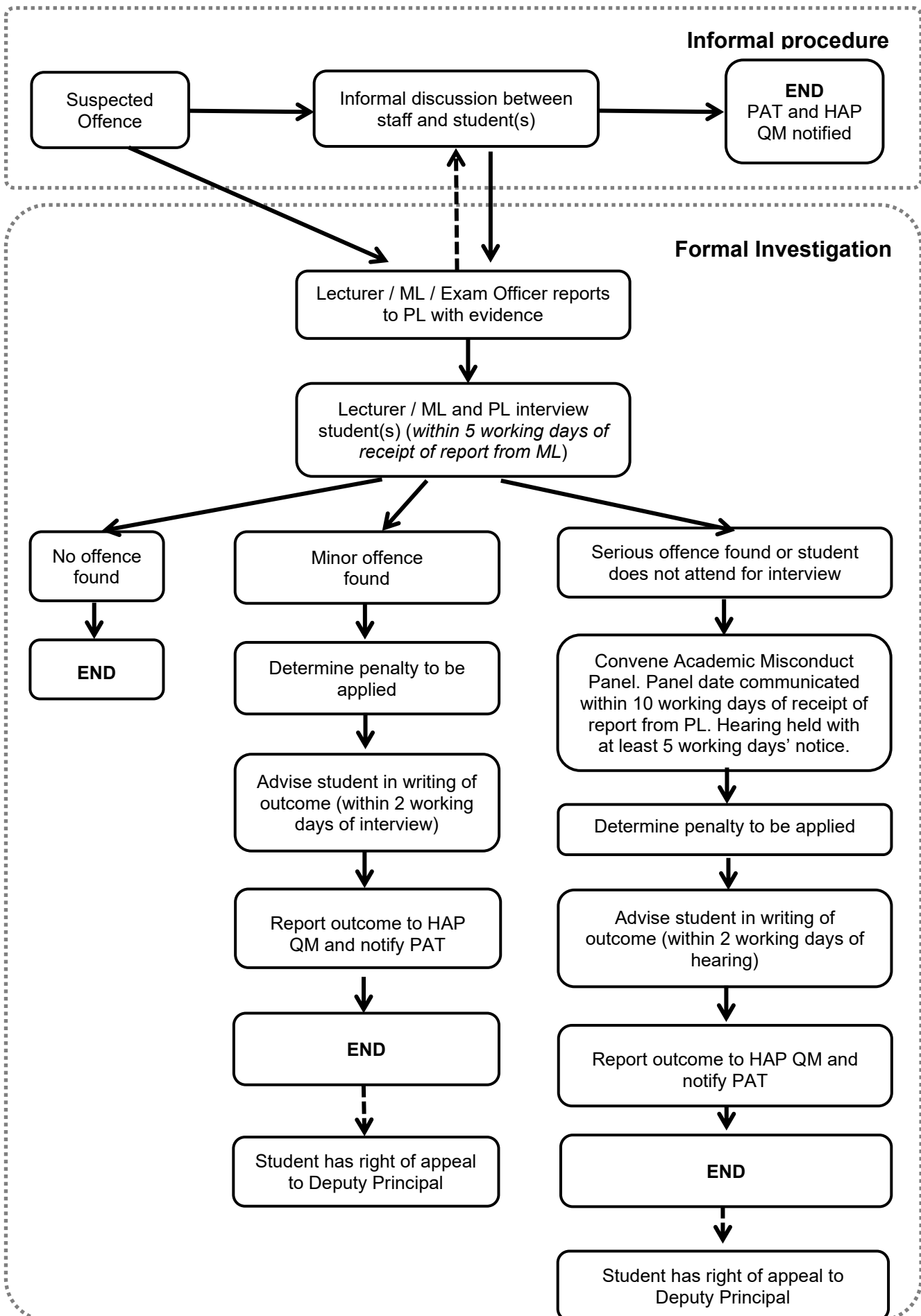
19.69 If the Deputy Principal allows the appeal they may review or rescind the penalty imposed.

19.70 The decision of the Deputy Principal will be final in this regard.

19.71 If the student believes that the university has not correctly followed this process, they have a right of appeal to the Scottish Public Services Ombudsman.



## Academic misconduct procedure flowchart (taught provision)





Academic Standards and  
Quality Regulations  
2025-26

APPENDICES



## **A TERTIARY QUALITY ENHANCEMENT FRAMEWORK**

---

The Tertiary Quality Enhancement Framework (TQEF) is the quality assurance and enhancement framework for Scotland's colleges and universities. It comprises a shared set of Principles, delivery mechanisms, and outputs that can be applied to the different contexts of our colleges and universities to give assurance on academic standards and the quality of the student learning experience, and ensure accountability for public investment in learning and teaching.

The TQEF is founded on the following set of shared Principles that are designed to put students at the heart of the Framework:

- Excellence in learning, teaching and assessment
- Supporting student success
- Student engagement and partnership
- Enhancement and quality culture
- Externality

There are five interconnected delivery mechanisms within the TQEF that, taken together, will provide the assurance on quality and support institutional and sector wide enhancement:

- Tertiary Quality Enhancement Review
- Annual Quality Engagement (AQE)
- Scotland's Tertiary Enhancement Programme
- Institution-led quality activity
- Institutional reporting on quality

Further information is available at [SFC Guidance on Quality for Colleges and Universities 2024-25 to 2030-31 - Scottish Funding Council](#).

### **Tertiary Quality Enhancement Review**

The TQER is the new external peer-led and enhancement focused review method for Scotland's tertiary sector. The TQER is a single method for colleges and universities, replacing both the How Good is our College (HGIOC) progress and/or annual engagement visits for colleges, and Enhancement Led-Institutional Review (ELIR) for universities.

The university has achieved positive judgements in all ELIR cycles. At the Quality Enhancement Systems Review in May 2024, the review team concluded that they were confident that the University of the Highlands and Islands is making effective progress in continuing to monitor, review and enhance its higher education provision to enable effective arrangements to be in place for managing academic standards and the quality of the student learning experience. The university's TQER is planned to take place in academic year 2026-27.

### **Scottish Credit and Qualifications Framework (SCQF)**

The Scottish Credit and Qualifications Framework set out a nationally recognised hierarchy of qualification levels and describes the general achievement expected of holders of the main qualification type at each of the levels.



SCQF uses two measures - the level of a programme and the number of credit points awarded. This supports understanding and comparison of Scottish qualifications, and the progression routes between them. SCQF levels are from 1-12, with Levels 7-12 recognised as higher education. All university programmes, including those awarded by SQA, are explicitly placed within the framework. Further details can be found at [www.scqf.org.uk/](http://www.scqf.org.uk/).

### **UK Quality Code for Higher Education**

The Quality Code is a sector-led reference point which can be used in a range of flexible ways. It enables providers to evaluate their policies and practices with reference to Sector-Agreed Principles and it aligns with key international reference points including the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG).

Built on a shared understanding across the UK, the Quality Code enables providers to see what is expected of them and what they can expect of each other, irrespective of the specific regulatory framework in which they operate. It informs the public, protects students' interests and champions the UK's world-leading reputation for high-quality education provision.

A new edition of the Code was launched in June 2024. it comprises two elements: Sector-Agreed Principles and Key Practices. It is supported by a suite of Advice and Guidance. The Sector-Agreed Principles identify the fundamental nature of quality and standards in UK higher education. There are 12 Principles and each has a set of Key Practices which providers can follow to demonstrate how they are adhering to that Principle.

Further information about the UK Quality Code for Higher Education can be found at [UK Quality Code for Higher Education 2024](#).

A diagram showing the Principles and the framework on which to design, develop, implement and enhance the quality of provision can be found at [UK Quality Code for Higher Education 2024 - Sector-Agreed Principles](#).

### **Subject Benchmarks**

These are used by external examiners, approval panels and reviewers across the UK to make judgements on national standards. Subject benchmarks define the expectations of the standards for the award of qualifications at Masters or honours degree level in a particular subject. They include guidance on the knowledge, skills and abilities expected of a graduate at that level. See [www.qaa.ac.uk](http://www.qaa.ac.uk) for full details of the subject benchmark statements.



## Academic Standards and Quality Regulations 2025-26

### Tertiary quality enhancement framework

#### UK Quality Code for Higher Education 2024 – Sector Agreed Principles

The UK Quality Code comprises 12 Sector-Agreed Principles which offer a framework on which to design, develop, implement and enhance the quality of provision regardless of regulatory approach, precise educational setting or level or mode of study. This document shows these 12 Principles.

See the [Quality Code 2024](#) for full information including the Key Practices that support these Principles.

Strategic approach	<b>Principle 1 – Taking a strategic approach to managing quality and standards</b> Providers demonstrate they have a strategic approach to securing academic standards and assuring and enhancing quality that is embedded across the organisation.		<b>Principle 2 – Engaging students as partners</b> Providers take deliberate steps to engage students as active partners in assuring and enhancing the quality of the student learning experience. Engagement happens individually and collectively to influence all levels of study and decision making. Enhancements identified through student engagement activities are implemented, where appropriate, and communicated to staff and students.		<b>Principle 3 – Resourcing delivery of a high-quality learning experience</b> Providers plan, secure and maintain resources relating to learning, technology, facilities and staffing to enable the delivery and enhancement of an accessible, innovative and high-quality learning experience for students that aligns with the provider’s strategy and the composition of the student body.	
	<b>Principle 4 – Using data to inform and evaluate quality</b> Providers collect, analyse and utilise qualitative and quantitative data at provider, departmental, programme and module levels. These analyses inform decision-making with the aim of enhancing practices and processes relating to teaching, learning and the wider student experience.		<b>Principle 5 – Monitoring, evaluating and enhancing provision</b> Providers regularly monitor and review their provision to secure academic standards and enhance quality. Deliberate steps are taken to engage and involve students, staff and external expertise in monitoring and evaluation activity. The outcomes and impact of these activities are considered at provider level to drive reflection and enhancement across the provider.		<b>Principle 6 – Engaging in external review and accreditation</b> Providers engage with external reviews to give assurance about the effectiveness of their approach to managing quality and standards. External reviews offer insights about the comparability of providers’ approaches and generate outcomes that providers can use to enhance their policies and practices. Reviews may be commissioned by providers, form part of a national quality framework or linked to professional recognition and actively include staff, students and peers. They can be undertaken by representative organisations, agencies or professional, statutory and regulatory bodies (PSRBs) with recognised sector expertise according to the provision being reviewed.	
Evaluating quality and standards	<b>Principle 7 – Designing, approving and modifying programmes</b> Providers design, develop, approve and modify programmes and modules to ensure the quality of provision and the academic standards of awards are consistent with the relevant Qualifications Framework. Providers ensure their provision and level of qualifications are comparable to those offered across the UK and, where applicable, The Framework of Qualifications for The European Higher Education Area.		<b>Principle 8 – Operating partnerships with other organisations</b> Providers and their partners agree proportionate arrangements for effective governance to secure the academic standards and enhance the quality of programmes and modules that are delivered in partnership with others. Organisations involved in partnership arrangements agree and communicate the mutual and specific responsibilities in relation to delivering, monitoring, evaluating, assuring and enhancing the learning experience.		<b>Principle 9 – Recruiting, selecting and admitting students</b> Providers operate recruitment, selection and admissions processes that are transparent, fair and inclusive. Providers maintain and publish accurate, relevant and accessible information about their provision, enabling students to make informed choices about their studies and future aspirations.	
	<b>Principle 10 – Supporting students to achieve their potential</b> Providers facilitate a framework of support for students that enables them to have a high-quality learning experience and achieve their potential as they progress in their studies. The support structure scaffolds the academic, personal and professional learning journey, enabling students to recognise and articulate their progress and achievements.		<b>Principle 11 – Teaching, learning and assessment</b> Providers facilitate a collaborative and inclusive approach that enables students to have a high-quality learning experience and to progress through their studies. All students are supported to develop and demonstrate academic and professional skills and competencies. Assessment employs a variety of methods, embodying the values of academic integrity, producing outcomes that are comparable across the UK and recognised globally.		<b>Principle 12 – Operating concerns, complaints and appeals processes</b> Providers operate processes for complaints and appeals that are robust, fair, transparent and accessible, and clearly articulated to staff and students. Policies and processes for concerns, complaints and appeals are regularly reviewed and the outcomes are used to support the enhancement of provision and the student experience.	
Implementing the approach to quality enhancement and standards						



## **B EXAMINATION GUIDELINES**

---

### **B.1 CONDUCT OF WRITTEN EXAMINATIONS**

#### **INTRODUCTION**

B.1.1 All academic partners are responsible for operating appropriate examination procedures to ensure that examinations are conducted fairly and securely at the locations they are responsible for. The Examination Centre is responsible for the coordination of examinations, working in conjunction with module leaders and programme leaders.

B.1.2 This guidance sets out procedures to be followed in relation to examinations. While the guidance does not have regulatory status, it is deemed to be good practice and should be adhered to as far as possible.

#### **CO-ORDINATION OF EXAMINATIONS**

B.1.3 For each semester:

<b>Week number</b>	<b>Action</b>	<b>Responsibility</b>
<b>0</b>	Issue draft examination timetable to Module Leaders and Programme Leaders	Examinations Centre
<b>1</b>		
<b>2</b>	Ensure exam papers (main diet and resit) have been approved by External Examiner	Module Leaders
<b>3</b>	Produce exam attendance registers (data from UHI Records)	Module Leaders
<b>4</b>		
<b>5</b>	<b>All finalised exam materials sent to Examinations Centre (main exam paper, attendance registers and resit paper)</b>	<b>Module Leaders</b>
	Issue confirmed examination timetable to staff	Examinations Centre
<b>6</b>	Send alternative venue forms to Examinations Centre	Programme Leaders
<b>7</b>		
<b>8</b>		
<b>9-10</b>	Issue of exam packs to academic partners to include attendance registers, exam papers, marker address labels (where applicable), script books and instructions to Exams Officers, Invigilators and announcement to candidates	Examinations Centre
<b>10</b>	Exam timetable, including details of rooms etc. for each exam site to be made available to students	Academic Partners



Academic Standards and Quality Regulations 2025-26  
Examination guidelines

Week number	Action	Responsibility
11		
12		
13-14	Examination weeks	
15-17	Marking, internal moderation and mark entry	Module Leaders
17 + 1 / 17 + 2	T1 Exam Boards meet	

Table 23: Co-ordination of examinations

## PREPARATION OF EXAMINATION PAPERS

B.1.4 Preparation of exam papers may be undertaken well in advance, potentially in the previous semester, to ensure that sufficient time is allowed for:

- the setting of the examination paper and resit paper
- the secure typing of the paper
- preparation of the front sheet (the rubric) – see below
- checking of the papers by internal examiners
- consultation with the external examiners
- revision as appropriate.

## RUBRIC OF EXAMINATION PAPERS

B.1.5 The rubric on the front sheet of each examination paper should include the following details:

- a. module title in full
- b. module code
- c. programme(s) using this examination paper (if applicable)
- d. date of examination
- e. start and end time of examination
- f. duration of examination
- g. the type of exam, i.e. 'open' or 'closed' book
- h. the type of paper, i.e. 'seen' or 'unseen'
- i. reading time **OF NO MORE THAN FIVE MINUTES** should be permitted at the start of the exam. You must indicate whether or not the students may make notes during this time. Reading time will begin 5 minutes before the official exam start time e.g. 0925hrs/1325hrs
- j. number of questions to be attempted, including any restrictions on the number that may be attempted from any one section
- k. the allocation of marks between questions
- l. details of any equipment and other materials that are permitted for use during the examination, e.g. in the case of open book exams, use of calculators is permitted
- m. any other instructions to candidates, e.g. start each question at the top of a new page.

B.1.6 Exemplars of examination and assessment front covers can be found on [SharePoint](#).



## **CONDUCT OF EXAMINATIONS**

- B.1.7 Examinations are conducted in accordance with the instructions for invigilators, candidates and exams officers outlined in these regulations.
- B.1.8 The confirmed timetable will be published for each diet of examinations at least six weeks before the start of the diet and should be made available to students at this time.
- B.1.9 An examination pack, containing the appropriate examination papers, script books and other materials as well as a list of candidates eligible to take the examination should be collected by the invigilator thirty minutes before the start of the examination.
- B.1.10 The procedure for the invigilation of examinations is detailed in Appendix B2.
- B.1.11 The responsibilities of candidates are detailed in Appendix B3 and B4.
- B.1.12 The procedures for Exams Officers are detailed in Appendix B5.

## **RESPONSIBILITIES OF MODULE LEADERS IN RELATION TO EXAMINATIONS**

- B.1.13 The module leader has the following responsibilities in relation to examinations:
- a. the design and content of examination papers
  - b. ensuring draft examination papers are sent to the relevant external examiner for comment
  - c. providing Examinations Centre with finalised examination papers and resit papers, attendance registers and any other materials by Week 5 of each semester
  - d. informing students of exam dates, including resit exam dates
  - e. ensuring that completed examination scripts are accounted for, are marked and a suitable sample is retained for quality assurance processes.
- B.1.14 For each exam, the following information must be sent to the Examination Centre.
- a. Examination paper (with completed front sheet). All papers must be produced in Arial 12 font
  - b. Resit examination paper
  - c. Attendance Registers for each location where students are taking the exam (NB this may not necessarily be the Home Academic Partner)
  - d. the names of the first (and where applicable) second markers for each exam.

## **RESPONSIBILITIES OF PROGRAMME LEADERS IN RELATION TO EXAMINATIONS**

- B.1.15 Programme leaders are responsible for:
- a. checking the draft examination timetable for any potential clashes
  - b. providing the Examinations Centre with details of students who have requested to take their exam(s) at an alternative venue i.e. outwith the main academic partner or Learning Centre sites using the Alternative Venue Request Form which includes:
    - student's name and number along with a list of exams to be taken
    - name and address of alternative venue



Academic Standards and Quality Regulations 2025-26  
Examination guidelines

- name and email address (and telephone number if available) of the contact at the alternative venue

This should be provided as early as possible, and at least 8 weeks before the date of the first exam.

## **RESPONSIBILITIES OF THE EXAMINATIONS CENTRE**

B.1.16 The Examinations Centre will:

- recommend policies and procedures to ensure the integrity of examinations
- support and guide academic partners in making examination arrangements
- publish the examinations timetable for each examination diet
- receive examination papers and cover sheets (including re-sit papers), attendance registers and other required materials by Week 4 of each semester
- copy the required number of examination papers, and other materials where required, and distribute these to all examination sites as advised by module leaders, for secure storage
- distribute invigilator instructions and administrative requirements, including directions for copying and/or posting of scripts to markers/second markers as advised by module leaders, to examination sites approximately 3 weeks before the examination diet is due to begin
- for each examination being held at each examination site, the Examinations Centre will provide:
  - attendance registers, showing the names and student numbers of candidates
  - the correct number of question papers
  - sufficient answer books, additional paper and other materials
  - an invigilator's report form
  - copies of the Instructions for Invigilators
  - copies of the Announcement to Candidates
  - copies of the Instructions for Candidates
  - a set of set of envelopes and/or address labels for forwarding the examination scripts to markers
  - an addressed envelope (1 per day) for the return of completed attendance register(s) and Invigilator report form(s) to the Examinations Centre, immediately after each examination.
- provide and promote an exams advice centre/help desk service, via phone and email to all members of staff
- provide exam related statistics/information as requested, particularly for the purposes of compliance monitoring
- where necessary, the Examinations Centre staff will refer queries to the Head of Academic Standards and Enhancement.

## **RESPONSIBILITIES OF AN EXAMS OFFICER**

B.1.17 Whether or not allocated to a particular member of staff, the following duties need to be carried out:

- a. ensuring that students are informed of the examination arrangements in each semester, and the resit diet



- b. ensuring the security of all examination papers, on receipt of exam packs from the Examinations Centre, prior to the examination being held
- c. ensuring the provision of written instructions to invigilators and to candidates
- d. ensuring that examination rooms have adequately spaced seating, that any unauthorised material likely to be of assistance to candidates is removed, and that a clock is provided
- e. ensuring that they, or other administrative staff, are available to be contacted at all times during the main diets of examinations and that the invigilator is aware of who to contact and a means of summoning assistance if required
- f. ensuring that an invigilator's report is completed and signed by the invigilator for each examination
- g. ensuring that all examination materials, including completed and unused answer books, have been returned by the invigilator, for storage and distribution to markers. Where completed answer books are collected by the marker directly from the examination room, the relevant section of the attendance register should also be completed and signed by the marker
- h. that exam packs from the Examinations Centre and completed scripts are dealt with in accordance with the instructions for Exams Officers.

B.1.18 The instructions for Exams Officers are detailed in Appendix B.5.

## **DIGITAL AND ELECTRONIC DEVICES**

B.1.19 During the exam, candidates must not have access to any device which can store or access data or any other file formats including music (unless these are used by students who have additional support needs and approval has been sought and permission given for their use). The list includes, although is not limited to:

- Mobile phones
- Calculators (other than those specifically permitted)
- MP3/4 players
- Devices which can store or access data, or any other file formats including tablets or similar devices
- Personal electronic aids
- Smart watches
- Calculators (other than those specifically permitted as mentioned on the rubric).

## **PERMITTED/PROHIBITED ITEMS AND MATERIALS**

### **Permitted items and materials**

B.1.20 During the exam, candidates must only retain permitted items on their desks. These items are:

- Pens and pencils and other appropriate exam stationery
- Dictionary (if permission has been given for the candidate to use one)
- Additional pages of notes and/or books, articles etc if noted on the exam paper cover sheet that these are allowed
- Bottle of water (or other drink which can be kept in a bottle with a lid)
- Small packet of sweets e.g. mints, providing they do not cause a disturbance when being taken (e.g. paper rustling)



Academic Standards and Quality Regulations 2025-26  
Examination guidelines

- Medication (approval should have been given in advance)
- Defined additional support need (e.g. batteries for hearing aids).

**Prohibited items and materials**

- B.1.21 Candidates must not retain on their desks and/or have access to the following prohibited items during the exam:
- Pencil cases
  - Calculator cases
  - Books, notes or any other papers unless specifically permitted (see above)
  - Food
  - Drinks which are not contained in a bottle with a lid.

**EXAMINATION CLASHES**

- B.1.22 PLs should check, as far as possible, for any clash of exams when the examination timetables are being drafted. This is particularly important if existing exams are being moved and/or new exams are being added.
- B.1.23 Clashes identified at this stage can be dealt with by re-scheduling one of the exams with the agreement of the responsible PL(s) and ML(s) where necessary. Care should be taken to ensure that further clashes are not created by moving the exam.
- B.1.24 The Examinations Centre must then be notified of the revised arrangements.
- B.1.25 Very rarely a clash may not be identified until after the confirmed timetable has been issued/published. These clashes are mainly, although not exclusively, picked up by the student(s) themselves (which is why it is very important for the timetable to be circulated as early as possible). The Examinations Centre must be notified as soon as possible in order to resolve this.
- B.1.26 At this stage the action taken will depend on the number of students affected however generally and as far as possible, examinations will not be moved in order to alleviate a clash once the final timetable has been published (although there are exceptions to this). (Please note that all clashes must be dealt with through the Examinations Centre. The decision on how to resolve the situation must not be made 'locally'.)

**Resolving an exam clash where only a few students are affected:**

- B.1.27 Once notified of the clash the Examinations Centre will contact the PLs / MLs responsible for the Modules concerned. Generally the student will be permitted to sit one of the exams during the morning session and one during the afternoon session, providing both the MLs and PLs agree.
- B.1.28 Under these circumstances, in order to ensure the integrity of both exams the candidate **must** be supervised **at all times** from the time the morning exam ends (or the student leaves the exam room) to the time the afternoon exam begins (or the student is delivered to the exam room).



Academic Standards and Quality Regulations 2025-26  
Examination guidelines

- B.1.29 The responsibility for arranging supervision of the candidate lies with the Exams Officer (or equivalent) at the Centre where the candidate is sitting their exam. These arrangements can be made in line with local operational requirements providing the supervision period is unbroken.
- B.1.30 During the supervision period exam conditions still apply therefore the candidate is not permitted to use their phone (unless previously arranged and approved or there is an emergency); is not permitted to access e-mail etc; and may not interact with other students unless the student(s) is in the same position as themselves, in which case they can be supervised together.

**Resolving an exam clash where several students are affected:**

- B.1.31 This happens very rarely and in these instances the most effective way to resolve the problem may be to reschedule one of the examinations ideally to another date and/or time during the exam diet, avoiding further clashes.
- B.1.32 The Examinations Centre will contact the responsible PLs and MLs to discuss a resolution, and where this course of action has been agreed, determine which of the exams should be moved.
- B.1.33 In this situation it is **vital** that all students affected by the change of date/time of the affected exam are notified by the ML/PL.
- B.1.34 The Examinations Centre will also arrange for the published timetable to be updated as soon as possible.

**ALTERNATIVE EXAM VENUES**

- B.1.35 Students are required to be available for every diet of examinations (including re-sit exams) unless there are exceptional circumstances. It is expected that they will sit their exams at either an academic partner or a Learning Centre. It is recognised however that in some cases this may not be possible e.g. if the student is based in another country, the student has work commitments elsewhere etc and under these circumstances it may be possible for the student to sit their exam at an alternative approved venue (please note that a Q & A sheet to assist with this process is available for both staff and students from the Examinations Centre).
- B.1.36 to the use of an alternative exam venue being agreed, the student should approach the Programme Leader in order to seek approval to sit their exams outwith the university. (In cases where the student has requested to take their exams overseas they must also seek permission from the relevant Dean to not only sit their exams but to study abroad (unless the Programme has been validated for overseas delivery)).
- B.1.37 The responsibility for locating a suitable venue and establishing whether or not they would be willing to host their exam(s) lies **with the student**. It is **not** the responsibility of the student's Home Academic Partner, the Programme Leader/Module Leader, course teams or the Examinations Centre to source alternative exam accommodation.



Academic Standards and Quality Regulations 2025-26  
Examination guidelines

It is also the student's responsibility to ensure that the alternative venue form is completed by the chosen venue and returned to the Examinations Centre.

- B.1.38 It would be strongly preferable if the venue selected was another educational establishment (a school, college or university or associated learning centre) or, failing that, a local authority run learning centre. Any venue which is subject to HMIE or QAA approval (or overseas equivalent) and where staff are familiar with running exams and all this entails means that the university can be assured fairly easily that invigilation and security will be taken seriously. If this is not possible then the chosen venue must have, as a minimum, a facility to hold exam papers securely and also provide a suitable, quiet space for the exam. The Venue must also have current public liability insurance.
- B.1.39 Venues which will **not** be approved to host exams are, for example, private residences, commercial premises (unless they have a dedicated educational centre which is approved by one of the major examination bodies), libraries.
- B.1.40 It is the student's responsibility to meet any costs levied by the alternative venue (unless otherwise agreed by the programme leader or enrolling academic partner). Neither the Examinations Centre nor the student's Home Academic Partner is responsible for paying exam fees to an alternative exam venue.
- B.1.41 The student must complete an Alternative Exam Venue Authorisation Form which is available from their Home Academic Partner (or the student can contact the Examinations Centre directly for a copy. The form must be signed by the person who will be responsible for overseeing the administration of the exams at their chosen venue otherwise the arrangements will not be approved.
- B.1.42 The completed form should be returned to the Examinations Centre as early as possible and **no later than 8 weeks before the exam diet** is due to start. This is to allow sufficient time for the Examinations Centre to check the suitability of and approve the use of the chosen venue. Once approval has been given the Examinations Centre will ensure that all the necessary papers reach the venue in plenty of time for the first exam and will make arrangements for the return of the completed exam scripts.

## RETENTION AND DISPOSAL OF EXAM SCRIPTS

- B.1.43 All assessment materials for degree programmes should be held securely where they will remain in good condition in accordance with the university's records management policy and retention schedule. After that time, the scripts and other work should be disposed of in a manner which ensures confidentiality. A sample of student work must be retained for the purposes of subject review (see Section 4.11-12).

## B.2 INSTRUCTIONS TO INVIGILATORS OF EXAMINATIONS

### GENERAL

- B.2.1 Invigilators are responsible for the proper conduct of examinations in accordance with the instructions given below.



Academic Standards and Quality Regulations 2025-26  
Examination guidelines

- B.2.2 For each examination room containing up to thirty candidates one invigilator will be required with a further invigilator for each additional 30 candidates thereafter (preferably a mix of male and female).
- B.2.3 In all instances, examination rooms must have a telephone (outgoing calls only) or other suitable method of communication, and at least one additional member of staff should be available at all times should they be required to assist in any way.

**CONDUCT OF INVIGILATORS - GENERAL**

- B.2.4 Invigilators should be firm but fair and you are expected to maintain a professional distance between yourself and the candidates.
- B.2.5 Invigilators must behave in an appropriate manner at all times and treat everyone with dignity and respect. Remember that someone else might misinterpret your actions, no matter how well intended.
- B.2.6 Invigilators must treat people equally and show no favouritism.
- B.2.7 Invigilators must not engage candidates in personal discussions, particularly where they are in a one-to-one situation. Invigilators must ensure that anything you say cannot be misinterpreted by the candidate(s), colleagues or by centre staff, and in particular avoid statements which may be construed as aggressive, hostile and/or impatient.
- B.2.8 Invigilators are responsible for maintaining security over all paperwork from the time it is collected from the Exams Officer until the time it is returned to them.
- B.2.9 Invigilators are expected to maintain the highest levels of discretion in dealing with confidential information. Invigilators must not divulge any confidential information to any third party. This information must be kept secure at all times and must not be placed in such a way as may give rise to inadvertent disclosure.
- B.2.10 Invigilators must not make comments that are disparaging of the university and/or their academic partner or that could cause damage to the university and/or their academic partner's reputation.

**PREPARATION BEFORE EXAMINATIONS BEGIN**

- B.2.11 Invigilators are responsible for collecting the exam pack from the Exams Officer or designated member of staff at least 30 minutes before the start of the exam. They should ensure that they are given some spare black and blue pens.
- B.2.12 All Invigilators should be present in the exam room at least 20 minutes before the exam is due to start.
- B.2.13 Invigilators should record the title and start & finish times of each examination on a board which is visible to all candidates.



Academic Standards and Quality Regulations 2025-26  
Examination guidelines

- B.2.14 The answer books, question papers, scrap paper and any other required material, which will all be contained in the exam pack, should be laid out on each desk before candidates are allowed to enter the room. Question papers should be laid out face downwards.
- B.2.15 Even if they have been advised by the Exams Officer, Invigilators should still read the rubric of each exam paper to check for any specific instructions pertaining to the exam(s) and in particular whether candidates are permitted to bring additional materials for use during the exam, e.g. books, notes etc. If a candidate insists that they are permitted to use notes during the examination, but this has not been recorded on the exam paper coversheet, Invigilators must contact the Exams Officer immediately. They must not make the decision to allow students to use additional materials during the exam unless it is recorded on the exam paper cover sheet.

### **ADMISSION TO THE EXAM ROOM**

- B.2.16 Candidates should normally be admitted to the exam room 10-15 minutes before the start of the examination, or whenever preparations are complete.
- B.2.17 Invigilators must ensure that candidates sign the attendance register on admission to the exam room, otherwise they may be marked as absent from the exam. If a student arrives late they must sign the register even if this has to be done as they leave.
- B.2.18 If any candidates require additional time it is advisable (where possible) to seat them furthest from the exit and the front of the room to ensure the minimum disruption when the scheduled exam time has ended.

### **CANDIDATES' PERSONAL POSSESSIONS AND MOBILE PHONES**

- B.2.19 After they have signed the Attendance Register direct candidates to leave all personal possessions (bags etc) at either the front or the back of the exam room prior to the start of the exam as appropriate (taking into account Health & Safety requirements).
- B.2.20 Invigilators must ask candidates to ensure that they have switched off their mobile phones. These must be left on the Invigilator's desk until the end of the exam. Candidates must not leave their mobile phones in their bags. Where a candidate may need to be contacted in an emergency he or she will have made arrangements with the Exams Officer, and the Invigilator will be informed of this possibility.
- B.2.21 If an emergency call is received the Exams Officer will collect the candidate and accompany them at all times during their absence from the Exam Room. If applicable the candidate may then be permitted to return to the room and complete the exam, however, no extra time will be given unless this has been agreed by the ML/PL.
- B.2.22 Under no circumstances are candidates permitted to retain their mobile phones.



## **PERMITTED/PROHIBITED ITEMS AND MATERIALS**

### **Permitted items and materials**

B.2.23 During the exam, candidates must only retain permitted items on their desks. These items are:

- Pens and pencils and other appropriate exam stationery
- Dictionary (if permission has been given for the candidate to use one)
- Additional pages of notes and/or books, articles etc if noted on the exam paper cover sheet that these are allowed
- Bottle of water (or other drink which can be kept in a bottle with a lid)
- Small packet of sweets e.g. mints, providing they do not cause a disturbance when being taken (e.g. paper rustling)
- Medication (approval should have been given in advance)
- Defined additional support need (e.g. batteries for hearing aids).

### **Prohibited items and materials**

B.2.24 Candidates must not retain on their desks and/or have access to the following prohibited items during the exam:

- pencil cases
- calculator cases
- books, notes or any other papers unless specifically permitted (see above)
- food
- drinks which are not contained in a bottle with a lid.

## **INSTRUCTIONS TO CANDIDATES PRIOR TO THE START OF THE EXAM**

B.2.25 Invigilators should always read out the Announcement to Candidates along with any special or specific instructions, prior to the start of each exam. Invigilators must emphasise to the candidates that they are not permitted to leave the exam room during either the first 30 minutes or the last 15 minutes of the exam.

B.2.26 It is advisable to remind Candidates again at this stage that they must ensure that all mobile phones are switched off and have been placed on the Invigilator's desk.

B.2.27 If any candidates require extra time, Invigilators should also ask students to leave the room as quietly as possible in order to cause the minimum disruption to those remaining.

B.2.28 Exam conditions operate from the start of reading time which is additional to the total time for the examination. Candidates **MUST NOT** commence writing in the answer books (or question paper if applicable) during reading time unless it is specifically mentioned on the front page of the question paper that they are permitted to make rough notes.

## **LATE ADMISSION OF CANDIDATES**

B.2.29 A candidate who arrives late for an exam should be admitted without question during the first 30 minutes. They are not required to seek permission from the Exams Officer.



- B.2.30 Admission after the first 30 minutes may only be permitted with the prior permission of the Exams Officer or another member of the exams office. This will only happen if there are exceptional circumstances.
- B.2.31 Invigilators should refuse requests from other members of staff to allow a candidate entry to the exam room after the first 30 minutes unless they are satisfied that the Exams Officer has given their approval.
- B.2.32 Extra time will not normally be allowed to a candidate who arrives late for an exam session, unless there are exceptional circumstances. The Exams Officer or another member of the exams office will decide whether or not the reasons for the candidate arriving late are acceptable and they will advise you accordingly. However, if the candidate arrives during the first 30 minutes and they have not spoken to the Exams Officer first, the Invigilator should contact the Exams Officer immediately if they think that the Candidate may be entitled to extra time. The Exams Officer will make a decision based on the reasons for the candidate's late arrival. The Invigilator must not make this decision.

#### **CANDIDATES UNDER SUPERVISION**

- B.2.33 Very rarely a candidate may have a clash of exams. Under these circumstances the usual course of action is to permit the candidate to sit both exams on the same day but take one at the normal time and the other in either the morning or afternoon as required.
- B.2.34 The candidate must then be supervised at all times between the first exam ending and the second exam beginning. This means that they will be required to remain in the exam room until the time the exam is scheduled to end. The Exams Officer will have made arrangements for someone to 'collect' the candidate from the exam room at this point therefore under no circumstances should the Invigilator permit the candidates to leave the room until the nominated member of staff arrives. The candidate will be aware of this. The Exams Officer will advise the Invigilator of the specific arrangements on the day of the exam.

#### **CONDUCT OF INVIGILATORS – DURING AN EXAM**

- B.2.35 Invigilators should be alert and unobtrusive at all times. Private reading, working on lap tops or any other activity which may prevent your full attention being given to the candidates is not permitted.
- B.2.36 In instances where the room is small and it would not be possible to move around without disturbing the candidates Invigilators must ensure that they have a good, unobstructed view of all areas of the room.
- B.2.37 Where the size of the exam room permits Invigilators may move around discreetly but should avoid standing behind a particular candidate for long periods as this can be off-putting.



Academic Standards and Quality Regulations 2025-26  
Examination guidelines

- B.2.38 If an Invigilator is required to conduct essential conversation whilst an exam is in progress this must be done as quietly as possible. If a candidate wishes to leave the exam room early (providing it does not fall within the first 30 minutes), the Invigilator must not query their decision or engage in any other conversation, apart from providing necessary instruction.
- B.2.39 The Invigilator is not permitted to leave the exam room unless replaced by another Invigilator, Exams Officer or nominated member of centre Staff.
- B.2.40 Invigilators should inform the candidates when there is 30 minutes of the exam remaining and again 15 minutes before the exam is due to end.

### **EXTERNAL NOISE**

- B.2.41 Occasionally noise from external sources may disrupt the candidates during the exam. Invigilators may be able to deal with this themselves however, if they are unsure they should contact the Exams Officer for advice.
- B.2.42 If the disruption is caused by something which can be easily resolved eg people standing outside the exam room talking, someone working nearby with a radio on etc, the Invigilator should politely request that they move away/turn off the source of the noise as there is an exam in progress.
- B.2.43 If, for whatever reason, the Invigilator is unable to resolve this issue and the disruption continues for longer than a few minutes, (eg grass cutting etc), contact the Exams Officer and advise them that the candidates are being disturbed and ask if there is anything which can be done to resolve it. Under these circumstances the Invigilator should give consideration to adding time on at the end of the exam to compensate the students.
- B.2.44 In all cases Invigilators should record on the Invigilator's Report Form the type and duration of the disruption and the action taken.

### **CANDIDATE MISCONDUCT**

- B.2.45 If the Invigilator suspects a candidate of cheating or other misconduct (or this is brought to your attention by another candidate), proceed as follows:
- a. remove the candidate's exam answer book and any unauthorised associated materials (which should then be secured to the book you have removed)
  - b. provide the candidate with a new answer book and instruct them to continue. However, if the candidate refuses to submit the unauthorised materials (where applicable) or persists with their previous behaviour they should be expelled from the exam room. (The Exams Officer should be contacted if assistance is required.)
  - c. record, in the answer book you confiscated, the time it was removed and the reason why, making a note that a new answer book was issued to the candidate from the time the incident occurred.



Academic Standards and Quality Regulations 2025-26  
Examination guidelines

- B.2.46 If a candidate is causing a disturbance and/or is disrespectful to other candidates and/or anyone else who has permission to be in the exam room, the Invigilator must advise them that they will be removed from the exam room if they continue to be disruptive. They should also be advised that if this happens they will not be permitted to re-enter. If necessary the Invigilator should contact the Exams Officer for advice/support.
- B.2.47 In all instances the Invigilator's Report Form must be clearly annotated with the details of the misconduct/disruption and the Invigilator must notify the Exams Officer of the incident immediately after the exam has ended.

### **EVACUATION AND ILLNESS DURING AN EXAM**

- B.2.48 If an exam room has to be evacuated for any reason (such as a fire alarm), the Invigilator should instruct candidates to leave all exam papers and materials on their desks and proceed to the nearest exit. They should also advise them that they are not permitted to talk to each other.
- B.2.49 The Invigilator should be the last person to leave the room and must ensure that the candidates are supervised at all times as far as possible, bearing in mind their safety and the safety of the candidates.
- B.2.50 On re-admittance to the exam room, the Invigilator should advise the candidates at what time they intend to re-start the exam and should also inform them of the remaining duration. The exam should then proceed as normal.
- B.2.51 If a candidate becomes ill during an examination, the Invigilator should take any action necessary and contact the Exams Officer as soon as possible.
- B.2.52 If any other issues arise the Invigilator should seek guidance from the Exams Officer if they are unsure how to proceed
- B.2.53 In all instances the Invigilator must record the details clearly on the Invigilator's Report Form, including the duration of the disruption (if any) and the action taken.

### **END OF THE EXAMINATION**

- B.2.54 The Invigilator should stop the examination punctually.
- B.2.55 The Invigilator should remind candidates that their student number must be recorded on the front of their answer book and to secure any additional materials to their book.
- B.2.56 Candidates should follow the instructions issued by the Invigilator at the start of the exam regarding returning their answer books and any other relevant materials.
- B.2.57 Candidates are permitted to take the exam paper with them when they leave the exam room unless **specifically stated** otherwise on the exam paper rubric and/or if they leave



Academic Standards and Quality Regulations 2025-26  
Examination guidelines

within the first 30 minutes of the start of the exam (or the first hour if the examination starts early).

B.2.58 Please note however that candidates are **not** permitted to remove the HN Graded Unit or BSc Oral Health exam papers from the exam room under any circumstances

B.2.59 If any candidates within the group are entitled to extra time, the Invigilator may use their discretion, and allocate an additional few minutes to their time to compensate for any disruption caused at the end of normal exam time.

B.2.60 The Invigilator should count the number of answer books collected and compare this to the Attendance Register. They should complete and sign the Invigilator's Report Form, then return all completed scripts, Registers and all other materials to the Exams Officer at the end of the exam.

B.2.61 Occasionally the marker may collect the scripts directly from the exam room. The Invigilator will be informed by the Exams Officer if this is to happen and must ensure that the marker completes and signs the relevant section of the Attendance Register which must then be returned to the Exam Officer.

### **B.3 INSTRUCTIONS TO CANDIDATES FOR EXAMINATIONS**

#### **GENERAL INFORMATION**

B.3.1 Candidates must notify their registered college of any change of permanent address/contact details to as early as possible. This is essential to ensure examination information is sent to the correct person.

B.3.2 Candidates must ensure that they are aware of the published examinations timetable for all diets including re-sit examinations, and the requirement to attend.

B.3.3 Candidates must check the published exam timetable and notify the Programme or Module Leader of any clashes as early as possible and **at least 6 weeks** before the exams begin

B.3.4 Candidates who are unable to attend an examination because of illness or other reason must inform their studies adviser as soon as possible. If a candidate becomes ill on the day of the exam it would be helpful if they contacted the Examinations Centre who will advise the relevant people of the candidate's absence. The candidate must submit a Mitigating Circumstances form along with a medical certificate and/or other documentary evidence to their studies adviser within 2 weeks of the exam taking place.

B.3.5 Candidates must attend for an examination no later than fifteen minutes before the published start time, or as otherwise advised.

B.3.6 All mobile phones must be switched off and handed to the Invigilator until the end of the examination.



Academic Standards and Quality Regulations 2025-26  
Examination guidelines

- B.3.7 Candidates who need to be contacted in an emergency should arrange to either leave their mobile phone with the Exams Officer or ask the Exams Officer for an emergency contact number at the centre where the exams are being taken. Under no circumstances are candidates permitted to retain their mobile phone.
- B.3.8 If an emergency call is received for a candidate the Exams Officer will collect them to enable them to receive the message. If the candidate intends to return to the exam room to complete the examination they will be accompanied whilst making the call. Note that no extra time will be given.
- B.3.9 Candidates must sign the attendance register on admission to the exam room. Failure to sign may result in a candidate being marked as absent from the exam.
- B.3.10 Candidates who require provision of special examination arrangements must inform their programme leader as soon as possible and normally not later than eight weeks before the first examination.
- B.3.11 If additional time has been allocated to a candidate, as agreed in their support plan, they should make themselves known to the invigilator who will try to make sure they are seated in an area which is likely to cause the candidate the minimum disruption.
- B.3.12 Candidates should refer to the Academic Standards and Quality Regulations in relation to assessment, and any programme-specific regulations.

### **EXAM CLASHES**

- B.3.13 If a candidate has a clash of exams once the final version of the timetable has been issued, they must notify their MLs and/or Exams Officer/and/or the Examinations Centre as soon as possible. Generally at this stage neither exam will be moved (unless the clash affects a large number of students) therefore candidates will normally be permitted to sit both exams on the same day – one in the morning and one in the afternoon.
- B.3.14 The Examinations Centre will contact the candidate to confirm arrangements. (Please note that all clashes must be dealt with through the Examinations Centre. The decision on how to resolve the situation, including permitting a student to sit both exams in the same day, must not be made locally.)
- B.3.15 Where it has been agreed that the candidate can take both exams on the same day, where possible or practical, in order to ensure the integrity of both exams the candidate **MUST** be supervised **AT ALL TIMES** from the time the morning exam ends (or the candidate leaves the exam room) to the time the afternoon exam begins (or the candidate is delivered to the exam room).
- B.3.16 The Exams Officer (or equivalent) at the Centre where the candidate is sitting their exam will inform them of the arrangements which can be made in line with local operational requirements providing the supervision period is unbroken.



B.3.17 During the supervision period exam conditions still apply therefore the candidate is not permitted to use their phone (unless previously arranged and approved or there is an emergency) is not permitted to access e-mail etc and may not interact with other candidates, unless the candidate(s) is in the same position as themselves, in which case they can be supervised together.

### **LATE ADMISSION OF CANDIDATES TO THE EXAM ROOM**

B.3.18 If a candidate knows that they will arrive late for an examination, where possible they should contact the Exams Officer as soon as they can to advise them of the situation and give them an approximate time given for their arrival as well as the reason why they will be late.

B.3.19 If a candidate arrives late they will be admitted without question during the first 30 minutes of the examination. Extra time will not normally be added unless there are mitigating circumstances which are accepted by the Exams Officer. If the candidate has not spoken to the Exams Officer but feels that their late arrival is due to exceptional circumstances, they should inform the Invigilator immediately. The Invigilator will consult the Exams Officer regarding whether or not extra time will be added.

B.3.20 Candidates who arrive after the first 30 minutes will only be permitted to enter the exam room with the prior permission of the Exams Officer or other nominated member of staff, and only if there are exceptional circumstances. Candidates must speak to the Exams Officer as soon as they arrive.

### **CONDUCT IN THE EXAMINATION ROOM**

B.3.21 Candidates must place all belongings either at the front or the back of the room as directed by the invigilator.

B.3.22 Candidates may only retain permitted materials on their desks during each examination as follows:

- Pens and pencils and other appropriate exam stationery
- Dictionary (if permission has been given for the candidate to use one)
- Additional pages of notes and/or books, articles etc if noted on the exam paper cover sheet that these are allowed
- Bottle of water (or other drink which can be kept in a bottle with a lid)
- Small packet of sweets e.g. mints, providing they do not cause a disturbance when being taken (e.g. paper rustling)
- Medication (approval should have been given in advance)
- Defined additional support need (e.g. batteries for hearing aids).

B.3.23 Candidates must not retain must not retain on their desks and/or have access to the following prohibited items during the exam:

- Pencil cases
- Calculator cases
- Books, notes or any other papers unless specifically permitted (see above)
- Food



Academic Standards and Quality Regulations 2025-26  
Examination guidelines

- Drinks which are not contained in a bottle with a lid.

B.3.24 Candidates are advised that they should complete the front cover(s) of the examination answer book(s) before the start of the examination.

B.3.25 Candidates must ensure that they have been issued with the correct question paper and attachments (where applicable), and note the duration of the examination.

B.3.26 Once the examination has started, communication or any other irregular practice between candidates is strictly not permitted. The Invigilator has the authority to remove from the room anyone suspected of causing a disruption during the exam. If this happens they will not be permitted to re-enter. For the avoidance of doubt the examination begins at the start of the reading time.

B.3.27 For the duration of reading time (this will be five minutes) candidates should not commence writing in the answer books, but may be permitted to write on the question paper (unless required to answer on the question paper) or on scrap paper. The invigilator will instruct candidates when to commence writing in the answer books.

B.3.28 If a candidate wishes to attract the attention of the invigilator at any time during the examination they should do so by raising their hand.

B.3.29 Candidates are not permitted to leave the examination room during the first thirty minutes or the last 15 minutes of the examination, other than for personal reasons. Any candidate wishing to leave the examination room temporarily must be accompanied by the Exams Officer or other nominated member of staff.

B.3.30 If a candidate becomes ill during an examination they must inform an invigilator.

B.3.31 Candidates will be reminded of the time thirty minutes and 15 minutes before the end of the examination.

#### **END OF THE EXAMINATION**

B.3.32 Candidates must follow the instructions given by the invigilator at the start of the exam regarding collection of exam books. Care should be taken to ensure that each candidate returns all relevant materials.

B.3.33 All answer books and other relevant material to be submitted should be clearly marked with the candidate's name and student number.

B.3.34 It is the candidate's responsibility to ensure that all relevant material for marking is submitted to the invigilator.

#### **B.4 ANNOUNCEMENT TO CANDIDATES BEFORE THE START OF EXAMINATIONS**

B.4.1 The following announcement should be made to candidates before the start of the examination.



Academic Standards and Quality Regulations 2025-26  
Examination guidelines

- B.4.2 Only authorised materials as indicated on the exam paper rubric and/or outlined in the Instructions for Candidates should be retained on your desk during the examination. All other materials and all other belongings should be placed at the front/back of the room as directed by the Invigilator.
- B.4.3 Please complete the front cover of the answer book before the start of the examination, including student ID number.
- B.4.4 Please check that you have been given the correct question paper and that you have received any additional materials that you require.
- B.4.5 Please note the duration of the examination and read all the instructions on the question paper carefully.
- B.4.6 Any queries regarding the question paper should be raised during reading time (ie the first five minutes). The answer to any query will be announced to all candidates taking the examination.
- B.4.7 You must not record any answers on the question paper unless you have been specifically asked to do so.
- B.4.8 You must record all answers in black or blue pen. Do not use a pencil.
- B.4.9 Please do not leave the examination room during the first thirty minutes or the last 15 minutes of the examination, other than for personal reasons. If you require to leave the room temporarily, please raise your hand to attract the invigilator's attention who will then arrange for a member of staff to accompany you.
- B.4.10 You will be informed when there are 30 minutes of the examination remaining and informed again 15 minutes before the examination is due to end.
- B.4.11 Once the examination has been completed, you must follow the instruction given by the invigilator at the start of the exam to either remain in your seat until answer books are collected or to leave books on desks.
- B.4.12 Where there are any students who have been allocated extra time, please leave the room at the end of the examination quickly and quietly to ensure the minimum disruption to the remaining student(s).
- B.4.13 You may take your copy of the question paper with you when you leave the examination unless this is within the first 30 minutes of the start of the exam, or it states on the rubric that you are not permitted to do so. Under **no circumstances** must you remove the exam paper for any **BSc Oral Health** exam.

**B.5 INSTRUCTIONS FOR EXAMS OFFICERS**



## RECEIPT OF EXAMINATION PACK FROM EXAMINATION CENTRE

- B.5.1 Approximately 3 weeks before the first exam is due to take place the Examinations Centre will send you an exam pack for each exam your centre is hosting. Each pack will contain some or all of the following items:
- a. exam Pack Checklist which summarises the contents of the pack
  - b. a record of Exam Papers and Registers enclosed
  - c. an attendance register and Invigilator's report form for each exam your centre is hosting
  - d. a supply of Exam Papers for each exam your centre is hosting (based on the number of candidates recorded on each Attendance Register)
  - e. answer booklets, additional paper and any other materials required for the exams which are to be provided by the Examinations Centre (if your centre is expected to provide the additional materials this will be noted on the checklist)
  - f. copies of the 'Instructions for Invigilators'
  - g. copies of the 'Announcement to Candidates'
  - h. copies of the 'Instructions for Candidates' for all students sitting at your centre (unless you have previously requested this in a different format and/or have already received these)
  - i. a set of envelopes and/or address labels for forwarding the examination scripts to markers
  - j. envelopes (1 per week) for the return of completed attendance registers and Invigilators Report Forms to the Examinations Centre.
- B.5.2 As soon as it arrives you should check the contents of the pack carefully to ensure that you have received all of the materials that you require for the examination diet.
- B.5.3 If anything is missing, please contact the Examinations Centre immediately [examinations.centre.moray@uhi.ac.uk](mailto:examinations.centre.moray@uhi.ac.uk).
- B.5.4 Once you have checked the contents of the exam pack you must ensure that the examination papers and associated materials are stored securely until the day of the examination.

## PREPARATION FOR THE EXAM DIET

- B.5.5 You should ensure that a copy of the Instructions to Candidates has been issued to all students sitting at your Centre in advance of the exam.
- B.5.6 For each exam room containing up to 30 candidates you must provide one invigilator. Exam rooms with 30-60 candidates should have two invigilators with one further invigilator being appointed for each additional 30 candidates thereafter.
- B.5.7 To ensure consistency and accountability all appointed invigilators must be under contract to your centre. It is important to ensure that **lecturers DO NOT** invigilate however, in exceptional cases e.g. where only a small pool of invigilators is available, lecturers may act as Invigilators providing they have no involvement with the Module, and if possible, the Programme(s) it relates to.



- B.5.8 You must provide the Invigilator with a suitable method of communication in case of emergencies during the exam. This could include access to a telephone in the examination room (outgoing calls only), a radio or mobile phone etc. A member of staff must be available at all times should assistance be required in any way.
- B.5.9 As part of their instructions, candidates have been told they must switch off their mobile phones and leave them on the Invigilator's desk until the end of the exam. However, if exceptionally, the candidate needs to be contacted in an emergency, they should either arrange to leave their mobile phone with you or they should ask you for an emergency contact number. Under no circumstances are candidates permitted to retain their mobile phones on their desks.
- B.5.10 If you receive an emergency call, providing the candidate is kept under supervision while taking the call, they may return to the Exam Room to complete the examination (if requested), however, note that no extra time will be given.

#### **DEALING WITH EXAM CLASHES**

- B.5.11 If a clash of exams is identified once the final version of the timetable has been issued, the Examinations Centre must be notified as soon as possible. Generally at this stage neither exam will be moved (unless it involves a large number of students) therefore the affected students will normally be permitted to sit both exams on the same day – one in the morning and one in the afternoon.
- B.5.12 The Examinations Centre will contact you to confirm the arrangements. (Please note that all clashes must be dealt with through the Examinations Centre. The decision on how to resolve the situation, including permitting a student to sit both exams in the same day, must not be made locally.)
- B.5.13 Where it has been agreed that the student can take both exams on the same day, where possible or practical, in order to ensure the integrity of both exams the candidate **MUST** be supervised **AT ALL TIMES** from the time the morning exam ends (or the student leaves the exam room) to the time the afternoon exam begins (or the student is delivered to the exam room).
- B.5.14 You should advise the Invigilator on the day of the exam of the arrangements in place, and in particular that the candidate is not permitted to leave the exam room until the nominated member of staff has arrived at the exam room to 'collect' them (which should be at the end of the scheduled exam time).
- B.5.15 The responsibility for arranging supervision of the candidate lies with the Exams Officer (or equivalent) at the Centre where the candidate is sitting their exam. These arrangements can be made in line with local operational requirements providing the supervision period is unbroken.
- B.5.16 During the supervision period exam conditions still apply therefore the candidate is not permitted to use their phone (unless previously arranged and approved or there is an



Academic Standards and Quality Regulations 2025-26  
Examination guidelines

emergency) is not permitted to access e-mail etc and may not interact with other students, unless the student(s) is in the same position as themselves, in which case they can be supervised together.

B.5.17 On the very rare occasion a clash of exams affects a large number of students it is possible that one of the exams may be moved. If this happens the Examinations Centre will notify all affected academic partners/host Centres and will issue a revised timetable.

**On the day of the exam**

B.5.18 Invigilator(s) have been asked to collect the pack for each exam they are overseeing from you – at least 30 minutes before the start of the exam. You are also asked to provide them with some spare blue and black pens.

B.5.19 Check the attendance register to ensure that for each exam taking place that day you have set aside sufficient copies of:

- the exam paper
- answer books
- additional materials (if not supplied by the Examinations Centre)
- additional paper.

B.5.20 Remind Invigilators that all students must sign the Attendance Register, even if this has to be done as they leave the room at the end of the exam. This is important for two reasons:

- they may be marked as absent for the exam
- if their completed script goes missing there is no way to confirm that they attended for the exam.

B.5.21 Draw the Invigilator's attention to any specific instructions pertaining to the exam(s) including whether or not the candidates are permitted to bring additional materials eg notes for use during the exam.

B.5.22 Remind Invigilators that if the candidate has any queries with regard to what is or is not permitted during the exam, and/or they have queries during 'reading time', and the answer is not available from either the information you have given them or the instructions on the exam rubric, then they must contact you as a matter of urgency. You in turn should contact the Examinations Centre for clarification/advice. Under NO circumstances must Invigilators decide what action should be taken themselves.

B.5.23 You should inform the Invigilator if any candidates require additional time and confirm the total duration of the exam for each student this affects.

B.5.24 If, exceptionally, a candidate has advised you that they may need to be contacted in an emergency, and you are happy to make the appropriate arrangements (with the approvals of the relevant PL) you should inform the Invigilator that you may have to disrupt the exam if a call comes through.



- B.5.25 Invigilators should also be reminded that any additional materials pertaining to the examination must be collected from the candidates, along with the exam scripts, at the end of the examination, although the candidates may take the exam paper with them at the end of the exam.
- B.5.26 Finally, if you have agreed that the relevant marker will collect the scripts directly from the exam room, inform the Invigilator and ask them to ensure that whoever collects these must sign the bottom of the Attendance Register to say that they have done so. The Invigilator will then return the Register to you.

## **DURING THE EXAM**

### **Queries regarding the exam paper and/or instructions**

- B.5.27 If a student queries the content of the exam paper or the instructions contained in the rubric, you must contact the Examinations Centre in the first instance. **Do not** approach the Programme Leader/Module Leader/Lecturer otherwise it cannot be guaranteed that all students taking the exam will be given the same information.
- B.5.28 You should remind Invigilators that they are not permitted to explain questions/words to the candidates and neither must they make decisions if there is a query regarding the content of the exam paper. Instead they must contact you immediately if this situation arises.

### **Late admission of candidates**

- B.5.29 If a candidate arrives late for an exam the Invigilator should admit them without question during the first 30 minutes.
- B.5.30 If a candidate arrives for an exam after the first 30 minutes they may only be permitted to enter with your prior authorisation and only if there are extenuating circumstances, for example if there has been an accident or issues with traffic which has affected their travel; or if their transport has broken down and they have been unable to continue without assistance (both of these cases assume they have allowed ample time to reach the venue before the exam was due to begin); or if they have been delayed in leaving the house due to their own or a dependant's illness/sickness (you should use your own discretion to determine whether or not this is genuine)
- B.5.31 If the student contacts you to let you know about their delay you should consider this as further support of their claim for extenuating circumstances in respect of their late arrival for the exam.
- B.5.32 If you are not satisfied that the candidate's reason(s) for being late is/are as a result of factors out with their control you may refuse to admit them to the exam. If you take this course of action you should explain the reasons why to the candidate referring to the academic standards and quality regulations.
- B.5.33 Extra time will not normally be allowed where a candidate arrives late for an exam, again unless there are extenuating circumstances. If you are happy that the reason for their delay is genuine you should inform the invigilator and the candidate that the candidate



will be entitled to the full exam time. If the candidate arrives during the first 30 minutes and the Invigilator thinks that they may be entitled to the extra time, they have been advised to contact you immediately so that you may make a decision based on the reasons given by the candidate for their late arrival. Under no circumstances is the Invigilator permitted to make this decision themselves.

**B.5.34** Under no circumstances should another member of staff permit a candidate to enter the exam room without having first discussed the matter with you (or another member of the exams office) and you have agreed that they may do so.

**B.5.35** In all cases of late admission you must also ensure that you provide a report outlining the situation and include the reasons given by the student (where applicable) and the actions taken. This should be submitted to the relevant module leader and programme leader.

**Unforeseen circumstances (including evacuation/illness)**

**B.5.36 Evacuation:** If an exam room has to be evacuated for any reason (eg a fire alarm), the invigilator is responsible for ensuring the safety of the candidates and the integrity of the exam. However, if possible once you have left the building, you should attempt to locate the group to ascertain whether or not the invigilator requires any assistance.

**B.5.37 Illness:** If a candidate becomes ill during an exam the invigilator has been advised to take appropriate action including contacting you for assistance if they are unable to deal with the situation without disrupting and/or compromising the exam. If, for any reason, a student requires to leave the exam room they must be accompanied at all times if they are to return to complete the exam.

**B.5.38** In all unforeseen circumstances ensure that the Invigilator has recorded the details on their Report Form. You should add any additional information you deem is important for the marker/Exam Board. It would also be helpful if you notified the programme leader as soon as possible. You should consider adding time on to the end of the exam to compensate either the candidates in the room and/or the candidate affected for any prolonged disruption. If any unforeseen circumstances arise and you are unsure how to deal with them, contact the Examinations Centre for advice.

**Report of external noise/disturbance**

**B.5.39** Invigilators have been advised that if noise from external sources is disrupting the candidates during the exam, and is caused by something which can be easily resolved e.g. people standing outside the exam room talking, someone working nearby with a radio on etc, they should politely request that they move away/turn off the source of the noise as there is an exam in progress.

**B.5.40** If, the disruption is caused by something which the Invigilator is unable to resolve themselves e.g. grass cutting etc, or if for any reason they cannot deal with the situation outlined above, they have been asked to contact you and advise you that the noise is disturbing the candidates and ask for the situation to be resolved.



B.5.41 If the length of the disruption is excessive you/the Invigilator may want to consider adding time on at the end of the exam to compensate the students.

B.5.42 In all instances, the Invigilator must record the details on their Report Form.

### **CANDIDATE MISCONDUCT**

B.5.43 Anyone suspected of causing disruption during the exam may be asked to leave the room and will not be permitted to re-enter. Before taking this course of action Invigilators have been asked to contact you for advice/support. Invigilators have been told that if they suspect any candidate of cheating or other misconduct, they should proceed as follows:

B.5.44 In the first instance the candidate's examination answer book and any unauthorised materials should be removed and tagged securely together. The candidate should then be given a new answer book and instructed to continue the examination. The Invigilator should record in the book the date and time it was removed and the reason why making a note that a new answer book was issued to the candidate from the time the incident occurred. However, if the candidate refuses to submit the unauthorised materials or persists with their previous behaviour they should be expelled from the exam room. Invigilators have been advised to contact you if they require assistance.

B.5.45 If a candidate is causing a disturbance and/or is disrespectful to other Candidates and/or anyone else who has permission to be in the exam room, the Invigilator must advise them that they will be removed from the exam room if they continue to be disruptive. They should also be advised that if this happens they will not be permitted to re-enter. Invigilators have been advised to contact you for advice/support if necessary.

B.5.46 Invigilators have been instructed to notify you of the incident and the action taken. You should ensure that the Invigilator's Report Form has been clearly annotated with the details

B.5.47 If an invigilator contacts you with regard to whether or not a Candidate should be ejected from the exam room, you should decide what would cause the least disruption to the other candidates. If you are unsure, contact the Examinations Centre for advice. In all cases of academic misconduct please make sure you notify the relevant Programme Leader as well as the Examinations Centre. Invigilators have been instructed to record the details of any incidents on their Report Form and to advise you of the incident at the end of the exam.

### **RECEIPT OF THE EXAM MATERIALS FROM THE INVIGILATOR AT THE END OF THE EXAM**

B.5.48 Unless arrangements have been made for the marker to collect scripts directly from the exam room, Invigilators must return all exam material to you as soon as the exam has finished. On receipt you should ensure that you have received the correct number of scripts by comparing candidate numbers on those who have signed the register against the scripts received. Then check the bottom of the (first page of the) Attendance



Register where you will find details of the marker(s) responsible for the module. This is who the completed script(s) should be sent to. **Please note that you must not send scripts for different exams addressed to either the same marker and/or different markers at the same academic partner in one package. All envelopes containing exam scripts must be sent separately.**

**If one marker is recorded on the attendance register:**

- B.5.49 Check the exam pack for that day and you will find either an envelope with an address label or a set of labels showing the marker's name and address, an abbreviation of the exam title and the date of the exam. Use this to post the scripts to the marker(s). If the scripts are being marked by a member of staff at your College you may receive an address label only. The original exam scripts should be sent to the marker along with any associated material and a copy of the Invigilators report form.
- B.5.50 You must not send a copy of the attendance register to the marker but you can keep a copy for your own records if you wish.
- B.5.51 Scripts should be despatched on the day of the exam, however, if this is not possible please ensure that the scripts are held securely overnight. They **must** then be sent the following day. If you are likely to encounter any problems sending scripts within these timescales please contact the Examinations Centre as soon as possible. All scripts must be sent via Recorded Delivery.
- B.5.52 On the relevant part of the Attendance Register you should record the date the scripts were sent to the marker and who they were sent by. The original copy of the completed register along with the Invigilators report form should be sent to the Examinations Centre at the end of the week. There will be one addressed envelope in your pack for each week you are hosting exams. In cases where all students on a register are recorded as absent the register should still be returned to the Examinations Centre. You may retain the other materials for future use, other than the exam paper which should be destroyed. There is no need to return these to the Examinations Centre.

**If two markers are recorded on the attendance register:**

- B.5.53 Check the exam pack for that day where you will find either an envelope with an address label or a set of labels for each marker showing their name and address, an abbreviation of the exam title and the date of the exam. Use these to post the scripts to the marker(s). If either one or both markers are based at your College you may receive an address label only.
- B.5.54 Take a photocopy of the original script(s). The original exam scripts should then be sent to the 1st marker along with any associated material and a copy of the Invigilators report form. The photocopy of the scripts should be sent to the 2nd marker along with any associated material and a copy of the Invigilators report form.
- B.5.55 You must not send a copy of the attendance register to either marker but you can keep a copy for your own records if you wish.



Academic Standards and Quality Regulations 2025-26  
Examination guidelines

B.5.56 Scripts should be despatched on the day of the exam, however, if this is not possible please ensure that the scripts are held securely overnight. They **must** then be sent the following day. If you are likely to encounter any problems sending scripts within these timescales please contact the Examinations Centre as soon as possible. All scripts must be sent via Recorded Delivery.

B.5.57 The original copy of the completed register along with the Invigilators report form should be sent to the Examinations Centre at the end of the week. There will be one addressed envelope in your pack for each week you are hosting exams. In cases where all students on a register are recorded as absent the register should still be returned to the Examinations Centre. You may retain the other materials for future use, other than the exam paper which should be destroyed. There is no need to return these to the Examinations Centre.

If you have any queries regarding the contents of these instructions or the exams process please contact the Examinations Centre at [examinations centre.moray@uhi.ac.uk](mailto:examinations centre.moray@uhi.ac.uk).



## **C ASSESSMENT GUIDANCE NOTES (SQA PROGRAMMES)**

---

- C.1 The university policy and processes for assessment and verification fully align with SQA quality assurance requirements for the university as a single SQA centre. The current SQA guidance documents on assessment and verification are available in the SQA SharePoint and on SQA's webpage ([www.sqa.org.uk](http://www.sqa.org.uk)). Further guidance is available from each academic partner quality manager.
- C.2 The SQA Guide to assessment is very helpful and identifies principles, modes of assessment, guidance on reassessment and provides examples of best practice. SQA guidance documents of interest to staff (such as the set of quality assurance criteria applied by External Verifiers) have been extracted and placed on the intranet at the reference above. These provide benchmarks for practice and an important resource for staff induction and staff development.
- C.3 Faculties and academic partners provide a clear focus on quality assurance of SQA awards. Academic staff are required to be familiar with, and comply with, defined quality assurance processes. The university and academic partners have developed set procedures and work collaboratively to meet specific SQA requirements in assessment and verification. These procedures are available on the website and in each academic partner's quality manual.
- C.4 The university procedures satisfy SQA national requirements. Network HN Programme Leaders support subject networks as they review how standardised approaches operate at programme level across the partnership. Guidance for staff on assessment and verification criteria and standards is on the staff intranet and is available centrally. This guidance is provided within subject networks and at faculty level, as well as in academic partners.
- C.5 External verification events are determined at the start of the academic year. There are a range of modes including visiting and virtual. It is managed across the partnership through the role of the SQA co-ordinator located within executive office. This role provides a central point of contact between the university and SQA. The SQA co-ordinator reports on the management of verification via Quality Forum (QF) and Quality Assurance and Enhancement Committee (QAEC) which in turn link into other academic structures such as cognate subject groups and Faculty Board.
- C.6 Where regulated qualifications are delivered; the university must allow SQA Accreditation or Ofqual staff access to the relevant people and documentation required to ensure an objective assessment of the university's compliance with SQA quality assurance can be made.
- C.7 All academic partners maintain updated lists of staff that are assessors and / or internal verifiers. The quality requirements related to the necessary training and updating of these staff is identified within the SQA quality assurance criteria listed on the staff intranet. Each academic partner is responsible for providing selection, initial induction and further



training opportunities to ensure staff are competent in their role(s) and are up to date with current SQA assessor and internal verification (IV) requirements.

- C.8 All assessors and internal verifiers must have occupational experience, understanding and any necessary qualifications as specified in the SQA requirements for the qualification. Additionally, assessors and verifiers of regulated qualifications must achieve a relevant assessor/verifier qualification within 18 months of starting to practice where no alternative timescale is stated in an assessment strategy. Assessors and internal verifiers for regulated conversations must undertake relevant continuing professional development activities, and maintain records of those activities.
- C.9 Internal verification in academic partners utilises a standard, three stage process addressing pre-assessment, during assessment and post-assessment requirements. It is managed within a range of academic structures dependent on the organisational structure of each partner. Under the leadership of the HE Operations Manager, with support from programme leaders and quality managers, it is being progressed on a cognate subject group basis for multi-site provision. Appendix F provides staff with information on the internal verification procedure.
- C.10 The assessment of each SQA HN and SVQ unit is allocated to a verification group. Each academic partner quality manager provides guidance and support for staff in relation to all partner management aspects of assessment and IV. Associate deans support SQA network PLs and other staff in IV collaborations within subject networks. This aspect is further strengthened through the work of the growing number of network progression boards.
- C.11 There is regular review of assessment and internal verification practice across the partnership. Further guidance on current practice is developed collaboratively and is disseminated using internal and external feedback and through College events, development days and other cognate subject group activities.
- C.12 A log of the outcomes of all external verification (EV) visits (including identification of good practice) is maintained by executive office and is reviewed by Quality Managers, Quality Forum and QAEC. The EV reports are regularly updated and are placed on the SQA SharePoint area alongside an annual summary, so staff can access this valuable resource of current practice, recommendations and development areas. This activity, and those in the preceding paragraphs, aim to strengthen best practice in a range of aspects of delivery, assessment and quality assurance.
- C.13 At all stages of the assessment process, due consideration is given to the individual needs of the learner as appropriate, taking into account the Equality Act 2010. In the interests of fairness to all students, opportunities for re-assessment must be applied consistently across all academic partners. University policy, in line with SQA recommendation, states that for summative assessment, if the initial outcome is not successful, normally one re-assessment attempt should be provided. There are exceptions to this and the university seeks to address these exceptions through careful consideration of mitigating circumstances in accordance with the university's [Mitigating](#)



[circumstances procedure for SQA programmes](#). Further guidance on re-assessment attempts and other aspects, e.g. remediation is provided within the SQA SharePoint area.

- C.14 Fairness and transparency of process in assessment is important and SQA requires that the assessor, IV and invigilator are responsible for ensuring that there is no potential for a conflict of interest to arise when learners are undertaking an assessment. If a potential conflict of interest from the assessor, IV or invigilator is identified; the assessor, IV or invigilator must bring this to the attention of the line manager. The line manager will carry out action to neutralize any conflict of interest. This could involve changing the arrangements for assessment, IV or invigilation of a learner or group of learners, so that no single member of staff with a personal interest in the outcome of the assessment is solely involved in the assessment, verification or invigilation process.
- C.15 Passing an assessment first time, within a criterion-referenced assessment framework is not a condition of an SQA award and no additional penalty should apply for a re-assessment. This applies equally in assessment of HN graded units and particular care should be taken by staff to ensure that all grades reflect the assessment grade requirements of the unit specification, with no additional requirement added - such as “must be passed at first attempt for a specific grade” etc.
- C.16 Assessment arrangements for students with additional support needs have been developed by SQA to meet fairness requirements. Information for staff is provided in the Student Personal Learning Support Plans - staff guidance document (and in SQA’s Quality Assurance of Assessment Arrangements in Internal and External Assessment: Information for Colleges document, available via the SQA website. Specific questions should be directed to the local academic partner student support and quality teams in the first instance.

### **Staff guidance**

- C.17 If a student has passed a graded unit (GU) and then wishes to use the re-assessment opportunity to achieve a higher grade (e.g. to meet a course admissions requirement) this is clearly possible under SQA guidance, as long as the assessment employs a significantly different project or a completely new examination. The amount of student effort required to undertake a new graded unit project in the remaining time in the term means this is an unlikely scenario. As assessment issues arise the professional judgement will be required with the guiding principle being fairness to students. Quality managers and subject network leaders will consider such issues as they emerge and seek to adopt an equivalent position across the university.
- C.18 The EV coordination of SQA Graded Unit examinations is managed through the university SQA coordinator. It is an important principle for the university that all SQA GU examinations (including re-sit examinations) are prior verified (PV) by SQA before being implemented. This is essential as some aspects of GU examinations have been problematic in the past and remediation of these key units may be difficult to address at a late stage in the session. Guidance on prior verification arrangements is available through the College quality manager and documentation to submit a PV request is listed on the SQA SharePoint area.



C.19 Faculties and subject networks have an important role in collaborative quality development of SQA provision across the university. Through the work of network programme leaders and the network SQA programme leader initiative, subject networks are expanding their capacity to address quality issues within the network. Quality managers are working closely with subject networks to develop a shared view of network assessment and verification practice.

**Assessment process for SQA graded unit assessments**

C.20 These arrangements apply only to the final Graded Unit Assessments taken under examination conditions. Arrangements for practice examinations and for other Graded Unit Assessments, e.g. projects, will be made within subject networks.

C.21 The main deadlines arise from SQA requirements for prior verification of the assessment instrument and external verification of marked work. All GUs delivered across the university will be administered to the same deadlines, irrespective of whether the assessment is sent to SQA for prior external verification and whether the unit is selected for external verification. This will help to avoid last-minute arrangements after SQA has identified which units are to be externally verified.

C.22 Examination GUs will be taken during May each year. This is late enough for students to have covered sufficient work and early enough to allow for marking, internal verification and re-sits before the end of session.

C.23 It will be possible to make arrangements for GUs to be taken out with the schedule if required.

C.24 The arrangements allow for a choice of marking and internal verification models.

C.25 Assessments can be marked where the students sat the assessment (or posted to the marker) and then sent on to the internal verifier. Assessments to be marked and verified using this model should be taken earlier in the diet to allow for posting time.

C.26 Assessments can be posted or taken to a meeting at which both marking and internal verification can be achieved. This model may allow the assessment to be taken later in the diet.

C.27 Re-sits will be scheduled to take place during the term wherever possible. Re-sit papers must be prepared along with other papers, and held in case they are needed.

C.28 The key dates associated with these arrangements are as shown in the table below.

**SQA Graded Units timeline**

Week	Task	Responsibility
Semester 1: Week 5	All HN graded unit exam units to be entered in SITS.	Academic partners



Academic Standards and Quality Regulations 2025-26  
Assessment guidance notes (SQA programmes)

<b>Week</b>	<b>Task</b>	<b>Responsibility</b>
Semester 1: Week 6	Start production of main and re-sit exam papers. Teams developing papers for the first time contact their QM regarding support, such as requesting an EV development visit request or collaboration with peers in other areas who have experience and expertise to offer.	Delivering team led by network HN programme leader (HN PL) or local programme leader where no HN PL is in place.
Semester 1: Week 10	All active HNs with a graded unit (exam) to be identified.	University SQA Coordinator
Semester 1: Week 16 (at latest)	Papers to be sent to SQA for prior verification via the university SQA Coordinator	Delivering team, AP quality manager or unit and university SQA Coordinator
Semester 1: Week 17	Set exam and re-sit dates.	Network HN PL or SNL where no SQA PL is in place.
Semester 2: Week 2	Prepare exam attendance registers by identifying all students (name and number) taking graded unit and at which sites they are based.	HN PL / programme team.
Semester 2: Week 2	Agree exam papers to be used (where courses are provided with a bank of papers that have been prior verified by SQA).	Network HN PL / local PL where no network HN PL is in place / programme team.
Semester 2: Week 7	All amendments required by the prior verification service are actioned.	HN PL / programme team.
Semester 2: Week 7	The papers should be in their finalised format, i.e. ready to be issued with no further checking, editing or amendment taking place. Specific instruction, e.g. the need for graph paper to be issued, should be included.	Network HN PL / local PL where no network HN PL is in place.
Semester 2: Week 7	Room bookings to be made in each academic partner.	Network HN PL / local PL where no network HN PL is in place, with the assistance of the lecturer with responsibility for the exam in the AP.
Semester 2: Week 13/14/15	Graded unit exams take place.	Programme team.
Semester 2: Week 13 onwards	First and second marking occurs. Candidates who need to re-sit are identified and informed.	Programme team.



Academic Standards and Quality Regulations 2025-26  
Assessment guidance notes (SQA programmes)

Week	Task	Responsibility
Semester 2: Week 16	Collation of results and evidence for SQA.	Network HN PL, Programme team and AP quality unit.
Semester 2: First Friday in June (2 June)*	SQA pick up sample of completed evidence.	SQA
9-20 June*	SQA external verification.	SQA
End June onwards	EV feedback received from SQA and disseminated to academic partners.	University SQA Coordinator

*Table 24: SQA Graded Units timeline*

### SQA DATA ENTRY

- C.29 SQA student entries (group awards and units) for full-time and part-time students starting in September to be entered by all academic partners by 1 December at the latest.
- C.30 All student entries for part-time students entering after September to be entered by academic partners within six weeks of starting the programme.
- C.31 All student entries for semester 2 to be entered within six weeks of starting the programme.
- C.32 All results due to complete within the academic session to be entered by academic partners by 1 August (in the small number of cases where post-summer HN re-sits are involved, results should be completed and entered within two weeks of the September start of the programme).



## D EQUIVALENCE POLICY

---

### Introduction

- D.1 The university's mission is to extend opportunities for higher education to people across the Highlands and Islands of Scotland and beyond. This policy describes the arrangements in place to assure quality and standards of programmes, wherever and however they are delivered. The university recognises that students studying a programme at different locations and by different modes may be supported and taught in different ways. The policy defines how students' learning opportunities are equivalent and explains how this aspect of the university's Learning Teaching and Enhancement Strategy is achieved.
- D.2 Definitions:
1. A **programme** in this policy includes any course, module or unit on which students are registered
  2. **Mode of delivery** refers to whether a programme is delivered part-time or full-time
  3. **Mode of study** refers to the ways in which teaching, learning and assessment are supported on the programme, which might include physical attendance, video conferences, virtual learning environments, email, telephone and mail.

### Policy of equivalence

- D.3 The learning outcomes of a programme are identical, regardless of location, mode of delivery or mode of study. Students are supported to achieve the learning outcomes of the programme that they are registered for, wherever and however they are studying. These procedures only allow programmes to be offered by different modes of delivery and modes of study if a judgement has been made by an appropriate body that sufficient support can be offered to students to enable them to achieve the learning outcomes.
- D.4 Academic credit is awarded following a judgement that the assessed work demonstrates achievement of the learning outcomes by the student. Judgements on assessment are benchmarked across the university and against national standards. These processes involve decisions by external examiners or external moderators. They are made on the same basis regardless of the location, mode of delivery or mode of study of the student.

### Policy requirements

- D.5 All programmes are approved for delivery only following a formal approval process. This examines the learning resource requirements of the programme and the resources that will be available to students. It includes looking at the appropriateness of the staffing, learning materials, assessments, library, electronic and equipment resources. It also looks at how the course will be managed and the communication and feedback channels for staff and students. The approval determines where and in what modes the programme may be offered. The university's approval and SQA approval procedures are described in the *Academic Standards and Quality Regulations*.
- D.6 All programmes are monitored annually, and undergo a rigorous periodic review at least every six years. These procedures include reviewing the modes of study and delivery and



## Academic Standards and Quality Regulations 2025-26

### Equivalence policy

locations where the programme may be offered. Annual quality monitoring and periodic review procedures are described in the *Academic Standards and Quality Regulations*.

- D.7 The learning outcomes of a programme are the same, and are those confirmed at approval, wherever the programme is offered and whatever the mode of study and delivery.
- D.8 All assessments are equivalent and subject to prior moderation. Coursework assessments are not required to be identical for all student groups. All formal examinations and re-examinations are the same for all students each semester. Exceptions to this must have the formal approval of the Faculty and will be reviewed at the progression or examination board. Assessment procedures are described in the *Academic Standards and Quality Regulations*.
- D.9 Every academic partner has a nominated examinations officer and examinations are carried out in accordance with the guidelines in the *Academic Standards and Quality Regulations*.
- D.10 In programmes leading to degree awards, a sample of assessments will be double-marked to ensure that assessment decisions are made fairly and to the same standards. Where the same module is offered to students at different academic partners, this sample will include second-marking across academic partners.
- D.11 A sample of all student work will be examined by external examiners (or moderators for SQA work) to judge comparability across student groups and to benchmark across UK institutions.

#### **Student support**

- D.12 Information on student support is available at [www.uhi.ac.uk/en/students/support](http://www.uhi.ac.uk/en/students/support).
- D.13 Support for students, wherever they are located, will meet the requirements of the UK Quality Code, and be in line with the university's policies, published in the *Academic Standards and Quality Regulations* and on the website at [www.uhi.ac.uk/policies](http://www.uhi.ac.uk/policies).
- D.14 Library and learning resource access meet guidelines described on the library website ([www.uhi.ac.uk/en/libraries](http://www.uhi.ac.uk/en/libraries)).
- D.15 All students are assigned to a Personal Academic Tutor (PAT), who will carry out the responsibilities ([www.uhi.ac.uk/en/students/support](http://www.uhi.ac.uk/en/students/support)) in accordance with current guidance.
- D.16 Students who are based in a learning centre, or at home, or on a programme that is managed by another academic partner, will be provided with clear written guidance on how support may be accessed and who to contact if they have problems.
- D.17 All students have access to the web-based resources at [www.uhi.ac.uk/en/students](http://www.uhi.ac.uk/en/students). Where possible, the university will facilitate social contact for students and staff through web-based communication, as well as learning support.



Academic Standards and Quality Regulations 2025-26  
Equivalence policy

- D.18 All students are automatically members of HISA, the Highlands and Islands Students' Association ([www.hisa.uhi.ac.uk](http://www.hisa.uhi.ac.uk)).

**Ensuring students are informed**

- D.19 All students, full-time and part-time, receive outline information about their programme when they enrol, either in paper format or electronically. This allows them to verify that the programme is equivalent to others offered in the university. The information made available to the student includes the title, aims, learning outcomes, any pre- or co-requisites, indicative content, assessment activities and core learning resources.
- D.20 Additionally, contact details for the module lecturer, assessment timetable and dates and any attendance requirements for the student are given.

**Consistent evaluation**

- D.21 All modules and a sample of SQA units are evaluated each time they are offered, in accordance with the university's student survey policy. The scores from this evaluation form part of the annual evaluation of the module or unit, together with the statistics on enrolment and progression. Students are informed of the outcomes of evaluations, and of actions taken as a result of issues raised. Programme teams are encouraged to seek feedback using other means in addition to the end of module survey.

**Monitoring and responsibilities**

- D.22 Ensuring the information made available to students is up to date is the responsibility of the module leader for degree programmes or internal moderator for SQA units.
- D.23 Approval of new programme and periodic review of programmes, including where programmes can be offered and approved modes of delivery, is carried out by faculties and overseen by Quality Assurance and Enhancement Committee.
- D.24 Monitoring of programmes is the responsibility of Quality Assurance and Enhancement Committee and is carried out through annual quality monitoring processes conducted by academic partners and faculties. Monitoring of the learning infrastructure provided by academic partners is also undertaken by Quality Assurance and Enhancement Committee through subject review and student support service review.



## **E APPROVALS PROCESS FOR SQA AWARDS**

---

### **Purpose**

- E.1 The university holds fully devolved approval powers from SQA to offer specific SQA awards. The university is responsible for the approval of devolvable SQA awards, and applies established quality assurance arrangements to secure SQA non-devolvable awards. University approval, in setting its own SQA curriculum, has primacy over all SQA automatic approval decisions. The university's approval process addresses quality aspects additional to SQA's validation criteria and determines the SQA provision that will be included within the university's HE curriculum.
- E.2 The university approval procedure will address; quality criteria, curriculum coherence and implementation of faculty agreed SQA programme frameworks. The procedure reflects its regional structure and meets both internal and external approval criteria. Faculty boards are responsible for approving proposals for new courses or replacement awards with significant development requirements. All proposals must be approved by faculty board by May at the latest, to ensure that quality assurance activity is completed satisfactorily prior to delivery in the following session.

### **Scope**

- E.3 This procedure applies to all SQA HE provision. SQA HE provision is broadly defined as activity at SCQF level 7 and above. Specifically:
- All Higher National Certificate (HNC) and Higher National Diploma (HND) courses
  - All Professional Development Awards (PDAs) at SCQF level 7 and above
  - Individual Higher National units
  - Scottish Vocational Qualifications (SVQ) courses at SCQF level 8 and above (formerly SVQ levels 4 and 5).

### **Definitions**

- E.4 There is a very clear distinction between the terms 'validation' and 'approval' in relation to SQA awards.
- E.5 'Validation' addresses the nature of the award itself. It focuses on the justification, coherence and content of the new award, i.e. it is award-specific. SQA are responsible for the validation of all SQA awards and units.
- E.6 'Approval' addresses the capacity of the institution to offer a unit/group award. It focuses on the institution's ability to deliver and manage the award successfully. The university as a single SQA centre uses its faculty structure and its Academic Planning Committee to approve and confirm all SQA HE curriculum approval proposals.

### **Responsibilities**

- E.7 The university's SQA co-ordinator has overall responsibility for ensuring the appropriate implementation and updating of the approval procedure and for reporting on compliance in relation to internal and external reviews. The SQA co-ordinator acts as centre contact between the university and SQA for all approval matters.



Academic Standards and Quality Regulations 2025-26  
Approvals process for SQA awards

- E.8 Curriculum approval is a key responsibility of faculty board and Academic Planning Committee. Academic partner staff (curriculum and quality) work closely with Heads of School and faculty liaison advisors and each holds a responsibility for the day-to-day operation of the procedure in order to submit approval proposals to FBs.

**Procedure**

- E.9 Each approval request will progress in accordance with the current approval procedure provided in the university's [SQA SharePoint area](#).



## F INTERNAL VERIFICATION OF SQA PROVISION

---

- F.1 For provision at SCQF Level 7 and above, the university is treated as one Centre by SQA. Assessment within the Centre should be effectively quality assured to ensure that consistent and accurate standards are being applied and maintained. Verification focuses on:
- the validity of assessment instruments
  - the reliability of assessment decisions
  - the practicability of applying assessment instruments
  - the consistency of the quality of assessment practices within centres over time.
- F.2 Verification should therefore be carried out across the entire Centre (the university) and use of a commonly understood framework of shared systems and forms will facilitate this process.
- F.3 The IV system proposed here should be regarded as a set of tools which can be used in a variety of different structures and situations. The forms follow a logical format and define the activities to be undertaken.
- F.4 They are designed to work at university level (cross network) and at academic partner (AP) level. To this end, the university logo is in the top left hand corner and a space for the insertion of the academic partner logo is in the top right hand corner.

### THE FORMS

- F.5 ***Academic Partners have agreed to use the same forms.*** The purpose of the forms is as follows:

#### IV 1

- F.6 This is the record of the first meeting of the session, held between assessors and internal verifiers within a cognate area.
- F.7 The form provides an agenda for the 'team' (those working together to deliver, assess and verify a group of SQA units) to review what happened in the previous year and to plan activities and responsibilities for the coming year.
- F.8 In the review section of the meeting, any issues which arose in the previous session should be considered. In future years, these will have been recorded on Forms IV2 and IV3 and issues arising from EV reports will be noted on Form IV6. In the first year of operating this system academic partners will have had their own methods of recording this information.
- F.9 In the planning section, it is necessary to know which units are to be offered and to confirm that all the necessary pre-delivery checks have been carried out. (Pre-delivery checks are recorded on Form IV4). The next step is to decide which units will be sampled. This decision is made following a risk assessment and the decision is recorded on Form IV4. It is necessary to collate this information for monitoring purposes – on Form IV2.



- F.10 Agreeing who will do what and ensuring that everyone is familiar with the procedures is the responsibility of the IV Co-ordinator.

**IV 2**

- F.11 This form is used to provide an overview of the verification process. It records the sampling decisions made at the IV1 meeting and is also used to check that the sampling is carried out.
- F.12 Units can be sampled at university or at college level, whichever is most appropriate – as indicated on the IV4 form.

**IV 3**

- F.13 It is desirable for regular meetings to be held between assessors and verifiers. However, it is not always possible, particularly for networked delivery. This form is for recording any issues (which may or may not require action) which arise during assessment or verification. The details can be e-mailed across the network (if appropriate), they can be the results of a face to face or VC meeting, or may be added as an aide-memoire by an individual. The purpose is to share the issues which arise in order to take them into account for the next delivery when the team can work together on the solution.

**IV 4**

- F.14 There should be a completed IV4 for each unit. Staff responsible for the unit are recorded here. The form is a pre-delivery check (Section A) and a risk assessment for sampling purposes (Section B). If the answer to any questions in section B is 'yes' the unit should be sampled. Follow the guidance on sampling and complete form IV5 at the appropriate time.
- F.15 Correct use of this form will identify the units which have to be sampled. The amount of sampling to be undertaken should be determined on a risk-assessment basis. The amount required will change over time and in changing situations.
- F.16 The guidance on sample size on the following page is just that – guidance. Practicalities, knowledge of the cognate area and levels of confidence must also be taken into account.

**IV 5**

- F.17 The outcome of sampling is recorded on Form IV5.

**IV 6**

- F.18 This is used, where appropriate, to record actions to be taken as a result of an EV report. It can also be used to record good practice identified and to consider how to disseminate it.

**GUIDANCE ON SAMPLING**

- F.19 Candidate evidence should be sampled if:
- the unit is new
  - the assessment instruments have been revised
  - the marking schemes or sample answers have been revised



Academic Standards and Quality Regulations 2025-26  
Internal verification of SQA provision

- there are new assessors
- there is a new mode of delivery
- there were problems in the previous year
- it is time for periodic review (ie once every 4 years if nothing else changes).

F.20 Sampling must be done at a time when corrective action – if necessary – is still possible. This means there is very little point doing it when the students have already left. If a new assessor is involved, it makes sense to sample their marking as early as possible. This would normally be at local, academic partner level. This is a support mechanism for new assessors and a fundamental aid to quality assurance.

F.21 Across the university, the fairly accepted ‘square root + one’ guidance on the number to be sampled may not be realistic. Instead, the following would be sufficient for risk assessment purposes, provided that the candidate sample is randomly selected and not selected by the delivering AP and the sample is widened if problems are encountered.

Reason	Suggested sample
It is a new unit	The work of a minimum of 2 candidates (max. 5) from each delivering AP
Assessment instruments have been revised	The work of a minimum of 2 candidates (max. 5) from each delivering AP
Revised marking schemes or sample answers	The work of a minimum of 2 candidates (max. 5) from each delivering AP
There are new assessors	The work of 3 candidates from each new assessor
There is a new mode of delivery	The work of 2 candidates from each new mode of delivery (in each AP, if applicable)
There were problems last year	The work of a minimum of 2 candidates (max. 5) from each AP where problems were identified
It is time for periodic review	The work of 3 candidates from each delivering AP

*Table 25: Guidance on sampling*

F.22 The actual numbers to be sampled should be agreed within the team. Higher numbers should be sampled until confidence about standards is established across the team.

## GRADED UNITS

F.23 Graded Units should be internally verified before being sent to SQA for external verification. The sample size should be proportionate to the number of candidates in each partner and the entire sample should be verified before sending to SQA.

F.24 The forms and sampling guidance should be used but there will also be an administrative role involved in gathering all the evidence to be sent to SQA for external verification.



## **G ACADEMIC MISCONDUCT**

---

### **DEFINITIONS**

G.1 Academic misconduct includes, but is not restricted to, plagiarism, cheating, collusion, falsification or fabrication, personation, or bribery as defined below:

- i Plagiarism: unacknowledged incorporation in a student's work either in an examination or assessment of material derived from the work (published or unpublished) of another. Plagiarism may, therefore, include:
  - a. the use of another person's material without reference or acknowledgement
  - b. the use of material produced by generative artificial intelligence (GAI) without the specific permission of the tutor/lecturer
  - c. where permission to use GAI has been granted, the use of material produced by GAI must be referenced or acknowledged
  - d. the use of material produced by paraphrasing tools
  - e. the summarising of another person's work by simply changing a few words or altering the order of presentation without acknowledgement
  - f. the use of the ideas of another person without acknowledgement of the source
  - g. copying of the work of another student (with or without that student's knowledge or agreement)
  - h. use of commissioned material presented as the student's own (e.g. purchasing material from an essay mill).

For some specific modules / units, information and guidance relating to what may or may not constitute plagiarism will need to be made explicit to students in student handbooks or specific module / unit information, e.g. use of mathematical formulae, principles or theories.

- ii Cheating: a student will be deemed to be cheating as a result of any of the following:
  - a. deliberately acquiring knowledge of the detailed content of an examination in advance or obtaining a copy of an 'unseen' written examination paper in advance of the date and time for its authorised release
  - b. communicating with, or copying from, another candidate during an examination
  - c. permitting another candidate to copy from their examination script
  - d. being found in possession of any printed, written or electronic material or unauthorised material during an examination which may contain information relevant to the subjects of the examination
  - e. communicating during an examination with any person by any means other than a properly authorised invigilator or another authorised member of staff
  - f. impersonating another examination candidate or permitting themselves to be impersonated
  - g. undertaking any other action with the intention of gaining an unfair advantage over other candidates.

- iii Collusion: collusion may exist where a student:



Academic Standards and Quality Regulations 2025-26  
Academic misconduct

- a. is complicit with another student in the completion of work which is intended to be submitted as either that student's or the other student's own work
  - b. knowingly permits another student to copy all or part of their own work and to submit it as that student's own work.
- iv Falsification or fabrication of data: the presentation of data in laboratory reports, projects etc based on work falsely presented as having been carried out by the student; obtained by unfair means; or to present fictitious results.
- v Personation: the assumption by a student of the identity of another person with the intent to deceive or gain unfair advantage.
- vi Bribery: the paying, offering or attempted exchange of an inducement for information or material intended to advantage the recipient in an assessment.

## PREVENTION

- G.2 At the start of each academic session, students will be advised about acceptable and unacceptable forms of work, and made aware of the referencing standards which they will be expected to use. Students will be encouraged to develop study techniques which allow them clearly to identify sources used and ideas acknowledged. Advice about academic misconduct should be repeated prior to submission deadlines for projects, coursework and dissertations. In addition, all student handbooks should include a link to the academic misconduct regulations.
- G.3 The university subscribes to an externally hosted software program that may be used for originality checking, anonymous marking and peer review of students' text based work (see guidance at [www.uhi.ac.uk/en/students/your-study-tools](http://www.uhi.ac.uk/en/students/your-study-tools)). Originality checkers assist staff in assessing potential instances of plagiarism. They must be used in accordance with the [Originality Checking Policy](#) to ensure that students are not disadvantaged, and students will be advised by tutors if they are to be used. Students are reminded that they are required to comply with this policy as a condition of enrolment.

## GUIDELINES

- G.4 A student should:
- a. complete their assessed work by themselves, in their own words and using their own notes, figures or rough workings (except where group work specifically forms part of the assessment)
  - b. acknowledge fully any sources used in accordance with the referencing system used. A student may refer to their own work submitted for their current or any previous programme, but (to avoid self-plagiarism) this must be referenced in the same way as any other text
  - c. endeavour to ensure that their work is not available to copy by other students (with or without permission)
  - d. check with academic staff if they are in any doubt about proper forms of referencing.



## MINOR AND SERIOUS ACADEMIC MISCONDUCT

G.5 The difference between minor and serious cases of academic misconduct is judged according to the overall risk to the integrity of the assessment process. This might mean assessment of an individual student's work; for example, if an essay was plagiarised, it may not be possible to judge whether a student has met the learning outcomes of a module. Alternatively, the assessment process for a whole cohort of students might be compromised if a student obtains and shares an exam paper.

## INDICATIVE PENALTY IN CASES OF PLAGIARISM (TAUGHT PROVISION)

G.6 The following guidance is indicative only, and the penalty to be applied in each case will be determined through the formal investigation process. Other factors will be considered as well as the proportion of the assessment which has been plagiarised.

	Reduce mark by:				
Proportion of plagiarised text	Level 7	Level 8	Level 9	Level 10	Level 11
Less than 5% i.e. up to 125 words in a 2,500-word essay	-5%	-10%	-15%	-20%	-20%
Between 5-15% i.e. 125-375 words in a 2,500-word essay	-10%	-20%	-30%	-40%	-40%
More than 15% i.e. more than 375 words of a 2,500-word essay (plagiarised text may or may not be continuous)	Fail	Fail	Fail	Fail	Fail

*Table 26: Indicative penalty in cases of plagiarism (taught provision)*

## APPLICATION TO SQA PROVISION

G.7 The university's 'Centre and candidate malpractice and maladministration policy and procedure for SQA provision' provides staff and students with a clear framework within which to work and sets out the university's definition of candidate malpractice, what it is and how it may arise. It provides advice and guidance on how staff and students can minimise the risk of candidate malpractice and what to do should candidate malpractice be suspected. All cases of suspected candidate malpractice are progressed in accordance with the university's academic misconduct procedure.



## **H MITIGATING CIRCUMSTANCES**

---

### **INTRODUCTION**

- H.1 The university has a duty to all students to ensure that assessments are conducted fairly, and that students have the opportunity to demonstrate their true level of academic performance.

#### **Special circumstances**

- H.2 For the avoidance of doubt, the arrangements for dealing with claims of mitigating circumstances do not normally apply where students have a long-term support need, eg arising from a disability. Where a student considers that they have a support need which may affect their study and / or assessment, it is the responsibility of the student to seek advice as early as possible and use the Personal Academic Tutor and other support services available through the Home Academic Partner, to ensure that they can undertake their chosen programme and its associated assessments in a way which meets their special needs but still allows them to demonstrate their true academic ability (see Section 17b.45).

### **VALID CIRCUMSTANCES**

- H.3 Students may suffer illness, other problems outwith their control, or temporary exacerbation of a long-term condition which may prevent them from demonstrating their true level of ability. The system of mitigating circumstances allows students who feel that their work has been affected by such problems to put forward a claim for consideration.
- H.4 It is important that any circumstances which may have affected the student's performance are reported regardless of whether the student thinks they have passed or failed.
- H.5 Mitigating circumstances are unexpected, disruptive to assessment and outwith the student's control. Problems arising from a student's own negligence or lack of time management will not be considered as valid mitigating circumstances. Mitigating circumstances will normally fall into one of the categories below:
- illness or serious accident at the time of an assessment or in the period leading up to formal assessment
  - serious illness or death of a family member
  - severe unforeseen personal or psychological problems
  - unanticipated difficulties in child or adult care arrangements during a semester (where the student is the named carer for an adult)

In addition, for part-time students:

- unforeseen and essential work commitments.
- H.6 Examples of circumstances which will not be considered valid:
- any ongoing situation known to the student
  - inadequate time management



## Academic Standards and Quality Regulations 2025-26

### Mitigating circumstances

- moving house or holidays
- misreading the assessment or exam timetable
- computer / IT problems of the student's own equipment
- normal work commitments on behalf of an employer.

### PROCESS AND TIMING FOR MITIGATING CIRCUMSTANCES CLAIMS

- H.7 Students are required to submit mitigating circumstances claims using the secure online claim process via [UHI Records](#). It should include:
- a detailed statement of the circumstances, and the impact that these have had on the student
  - indication of which modules and assessments are affected
  - the time period affected
  - where a student has a disclosed disability, health or medical condition, the claim should make reference to the provisions of the student's approved Personal Learning Support Plan (PLSP) as appropriate.
- H.8 Claims are routed to the student's Personal Academic Tutor, who is required to endorse the claim before it progresses to the next stage. Students are notified by email at each stage as their claim is considered.
- H.9 Mitigating circumstances claims should be submitted as soon as the student becomes aware of a situation which may affect their ability to complete assessments, or within seven days of the assessment deadline, whichever is earlier. If the claim cannot be submitted in advance it should be submitted as soon as possible after the assessment deadline, explaining why this is the case.
- H.10 In the event of circumstances affecting attendance at a timetabled exam, the mitigating circumstances claim should be submitted, where possible, before the exam takes place. If a student has reason to believe that mitigating circumstances caused them to do less well in an exam than they could have, then they need to submit a claim to that effect.
- H.11 Any decision relating to a claim for mitigating circumstances only applies to the assessment identified as part of that claim and will not be automatically applied to subsequent assessment(s). For example, a claim that has been approved in semester one will not be carried forward to the resit opportunity, or subsequent semester. A new claim must be submitted on each occasion.

### SUPPORTING EVIDENCE

- H.12 Claims may be accompanied by relevant supporting evidence from an independent source, such as:
- medical certificates for the relevant time period
  - letters from medical specialists
  - letters from professional counsellors
  - legal documents.
- H.13 Evidence which will not be accepted:



## Academic Standards and Quality Regulations 2025-26

### Mitigating circumstances

- personal statements from the claimant which are unsupported by documentary evidence
- uncorroborated evidence from friends or family.

H.14 It is recognised that obtaining evidence can sometimes be difficult and the university will exercise discretion in accepting evidence, particularly in sensitive personal situations. In circumstances where it may be difficult for a student to provide independent evidence, then a Personal Academic Tutor or student counsellor may provide a supporting statement.

H.15 If there is a delay in obtaining relevant supporting evidence, the claim should be submitted immediately, and the evidence provided as soon as it is available.

### **MITIGATING CIRCUMSTANCES PANEL**

H.16 Claims and supporting evidence will be considered by a Faculty mitigating circumstances panel, chaired by an Exam Board chair and supported by a clerk. In order to maintain confidentiality, other staff will only be involved as necessary.

H.17 The mitigating circumstances panel will consider all claims and supporting evidence, and accept or decline each claim. Outcomes will be recorded on SITS, and made available to the relevant Tier 1 Board of Examiners, which is responsible for decisions on reassessment opportunities and/or other course of action.

H.18 All discussions will remain confidential and documentation and evidence will be securely stored and then destroyed in line with the university's document retention schedule.

### **RECORDING MITIGATING CIRCUMSTANCES**

H.19 Staff are required to input 'actual' marks to SITS. For non-submission, this will be 0. For coursework that is submitted late, the mark should be entered with the late penalty applied. Where the mitigating circumstances panel accepts a claim, the associated module grade will be overtyped with 'MC'.

H.20 The Tier 1 Board of Examiners will determine the final 'agreed' mark, taking into account the recommendations of the mitigating circumstances panel.



## **I UNIVERSITY REFERENCING SYSTEM**

---

- I.1 The university's default referencing system, for students and staff, is Harvard (Cite Them Right). This is applicable to HE provision at all SCQF levels, unless another system is identified. A particular module/unit or programme or group of programmes may choose to use a different referencing style, as long as students are clearly advised about this in writing. It may be that some students are therefore required to use different systems for different modules, and they should be alerted to this and signposted to appropriate guidance. Students are responsible for checking which system they are expected to use.
- I.2 Staff are also expected to use the Harvard referencing system, unless they choose to use another, as appropriate to the norms within their subject.
- I.3 There is [information and guidance on referencing](#) on the university website.



## **J COPYRIGHT POLICY**

---

- J.1 The university's copyright policy applies to:
- all university and academic partner staff and students engaged in the creation of content in any format for learning, teaching and assessment, open education and administrative purposes, including the creation of educational and administrative content, web pages, communications, social media posts, audio and video recordings
  - copying which is allowed by the Copyright, Designs and Patents Act (1988) in addition to the provisions of the CLA and ERA Licences
  - print and digital materials and materials uploaded to core and other technologies by university and academic partner staff.
- J.2 The full Copyright Policy can be found on the [university website](#).



