**PERIODIC REVIEW: ACTION PLAN AND PROGRESS REPORT**

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| **School/Department** |  |
| **Date(s) of Periodic Review** |  |
| **Date of post-IPR meeting** | *This is the meeting at which the periodic review report and action plan are discussed and finalised.* |
| **Date of IPR report and action plan to FAQSC / FEEAC** | *At the post-IPR meeting, the date should be agreed for receipt of the report and action plan at the relevant FAQSC / FEEAC.* |
| **Date of IPR report and action plan to the University AQSC** | *At the post-IPR meeting, the date should be agreed for receipt of the report and action plan at the University AQSC.* |
| **Date of report on progress to the FAQSC / FEEAC** | *At the post-IPR meeting, the date should be agreed for reporting progress on the actions to the relevant FAQSC/FEEAC; this should be approximately six months after the post-IPR meeting. If the meeting dates for the committee aren’t confirmed, an approximate date, i.e. month/year, should be entered, based on the schedule of committee meetings in previous years.* |
| **Date of report on progress to the University AQSC** | *At the post-IPR meeting, the date should be agreed for reporting progress on the actions to AQSC for approval, if recommended for such by the FAQSC/FEEAC. The submission date to AQSC should provide sufficient time after FAQSC/FEEAC to enable any feedback and follow up actions and for FAQSC/FEEAC to report its decision to AQSC. If AQSC dates haven’t been confirmed, an approximate date should be entered, i.e. month/year, based on the schedule of previous years’ meetings.* |

In the table for each action below, Part 1 should be agreed and completed at the post-IPR meeting, Part 2 should be completed approximately six months later to report progress on each action to the relevant FAQSC/FEEAC and then AQSC.

**FOR ACTION AT DEPARTMENTAL LEVEL/LEVEL 1**

**Please complete each section as follows:**

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| **Part 1: Recommendation** | | |
| *Please enter details of the recommendation, as stated in the Periodic Review Report:* | | |
| **Action** | *Under the following headings, please describe how the Department/School intends to address the recommendation.*  Action:  Expected outcome:  Monitored: | |
| **Timescale** | | **Responsibility** |
| *Please give details of the timescale required to complete the action or a deadline by which it will be completed:* | | *Please indicate which person or committee in the Department/School will be responsible for completing the action:* |
| **Feedback to students** | | **Feedback to staff** |
| *Please indicate who will be responsible for giving feedback to students on the action being taken and the methods of feedback:* | | *Please indicate who will be responsible for giving feedback to students on the action being taken and the methods of feedback:* |
| **Part 2: Progress** (to be reported to FAQSC/FEEAC and then AQSC as stated above) | | |
| *Please describe the progress that has been made since the periodic review:* | | |
| **Is the action complete:** | | **Yes/No** *(delete as appropriate)* |
| **If ‘Yes’ above, date of completion:** | |  |
| **If ‘No’ above:** | | |
| *Please provide details of the work in progress under the headings below:*  Work still to be completed:  Expected completion date, and, if applicable, the reason for any extension to the completion date where it is later than the timescale set in Part 1 above:  Responsibility: | | |
| **Feedback to students** | | **Feedback to staff** |
| *Please indicate who is responsible for reporting progress on or completion of the action to students, and the methods for communication this to them. This should include details of how new students, who were not present when the review took place, are informed of the process.* | | *Please indicate who is responsible for reporting progress on or completion of the action to relevant staff and how this is communicated to them. This is particularly pertinent if the recommendation includes School (level 2), Faculty or University action.* |

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| **Action** | *Under the following headings, please describe how the Department/School intends to address the recommendation.*  Action:  Expected outcome:  Monitored: | |
| **Timescale** | | **Responsibility** |
| *Please give details of the timescale required to complete the action or a deadline by which it will be completed:* | | *Please indicate which person or committee in the Department/School will be responsible for completing the action:* |
| **Feedback to students** | | **Feedback to staff** |
| *Please indicate who will be responsible for giving feedback to students on the action being taken and the methods of feedback:* | | *Please indicate who will be responsible for giving feedback to students on the action being taken and the methods of feedback:* |
| **Part 2: Progress** (to be reported to FAQSC/FEEAC and then AQSC as stated above) | | |
| *Please describe the progress that has been made since the periodic review:* | | |
| **Is the action complete:** | | **Yes/No** *(delete as appropriate)* |
| **If ‘Yes’ above, date of completion:** | |  |
| **If ‘No’ above:** | | |
| *Please provide details of the work in progress under the headings below:*  Work still to be completed:  Expected completion date, and, if applicable, the reason for any extension to the completion date where it is later than the timescale set in Part 1 above:  Responsibility: | | |
| **Feedback to students** | | **Feedback to staff** |
| *Please indicate who is responsible for reporting progress on or completion of the action to students, and the methods for communication this to them. This should include details of how new students, who were not present when the review took place, are informed of the process.* | | *Please indicate who is responsible for reporting progress on or completion of the action to relevant staff and how this is communicated to them. This is particularly pertinent if the recommendation includes School (level 2), Faculty or University action.* |

***Please copy and paste the above table to record additional recommendations as necessary.***

**Summary comments from FAQSC/FEEAC and AQSC**

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| **FAQSC / FEEAC** | *The FAQSC/FEEAC here should provide a brief summary of their decision, noting actions that are not making satisfactory progress, how ongoing/pending actions will be progressed and monitored e.g. with further reports to FAQSC/FEEAC, or through ASAP, and highlights of good practice.* |
| **AQSC** | *The FAQSC/FEEAC here should provide a brief summary of their decision, noting actions that are not making satisfactory progress, how ongoing/pending actions will be progressed and monitored through FAQSC/FEEAC, AQSC or through ASAP, highlights of good practice.* |

**FOR ACTION AT SCHOOL/INSTITUTE LEVEL (LEVEL 2)**

**Please complete each section as follows:**

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| **Part 1: Recommendation** | | |
| *Please enter details of the recommendation, as stated in the Periodic Review Report:* | | |
| **Action** | *Under the following headings, please describe how the Department/School intends to follow this up with the School/Institute to address the recommendation.*  Action:  Expected outcome:  Monitored: | |
| **Timescale** | | **Responsibility** |
| *Please give details of the timescale required to complete the action or a deadline by which it will be completed:* | | *Please indicate which person or committee in the Department/School will be responsible for completing the action:* |
| **Feedback to students** | | **Feedback to staff** |
| *Please indicate who will be responsible for giving feedback to students on the action being taken and the methods of feedback:* | | *Please indicate who will be responsible for giving feedback to students on the action being taken and the methods of feedback:* |
| **Part 2: Progress** (to be reported to FAQSC/FEEAC as stated above) | | |
| *Please describe the progress that has been made since the periodic review:* | | |
| **Is the action complete:** | | **Yes/No** *(delete as appropriate)* |
| **If ‘Yes’ above, date of completion:** | |  |
| **If ‘No’ above:** | | |
| *Please provide details of the work in progress under the headings below:*  Work still to be completed:  Expected completion date, and, if applicable, the reason for any extension to the completion date where it is later than the timescale set in Part 1 above:  Responsibility: | | |
| **Feedback to students** | *Please indicate who is responsible for reporting progress on or completion of the action to students, and the methods for communication this to them. This should include details of how new students, who were not present when the review took place, are informed of the process.* | |
| **Feedback to staff** | *Please indicate who is responsible for reporting progress on or completion of the action to relevant staff and how this is communicated to them. This is particularly pertinent if the recommendation includes School (level 2), Faculty or University action.* | |

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| **Part 1: Recommendation** | | |
| *Please enter details of the recommendation, as stated in the Periodic Review Report:* | | |
| **Action** | *Under the following headings, please describe how the Department/School intends to follow this up with the School/Institute to address the recommendation.*  Action:  Expected outcome:  Monitored: | |
| **Timescale** | | **Responsibility** |
| *Please give details of the timescale required to complete the action or a deadline by which it will be completed:* | | *Please indicate which person or committee in the Department/School will be responsible for completing the action:* |
| **Feedback to students** | | **Feedback to staff** |
| *Please indicate who will be responsible for giving feedback to students on the action being taken and the methods of feedback:* | | *Please indicate who will be responsible for giving feedback to students on the action being taken and the methods of feedback:* |
| **Part 2: Progress** (to be reported to FAQSC/FEEAC as stated above) | | |
| *Please describe the progress that has been made since the periodic review:* | | |
| **Is the action complete:** | | **Yes/No** *(delete as appropriate)* |
| **If ‘Yes’ above, date of completion:** | |  |
| **If ‘No’ above:** | | |
| *Please provide details of the work in progress under the headings below:*  Work still to be completed:  Expected completion date, and, if applicable, the reason for any extension to the completion date where it is later than the timescale set in Part 1 above:  Responsibility: | | |
| **Feedback to students** | *Please indicate who is responsible for reporting progress on or completion of the action to students, and the methods for communication this to them. This should include details of how new students, who were not present when the review took place, are informed of the process.* | |
| **Feedback to staff** | *Please indicate who is responsible for reporting progress on or completion of the action to relevant staff and how this is communicated to them. This is particularly pertinent if the recommendation includes School (level 2), Faculty or University action.* | |

***Please copy and paste the above table to record additional recommendations, as necessary.***

**FOR ACTION AT FACULTY LEVEL**

**Please complete each section as follows:**

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| **Part 1: Recommendation** | | |
| *Please enter details of the recommendation, as contained in the Periodic Review Report:* | | |
| **Action** | *Please describe how the Department/School intends to follow this up with the Faculty to address the recommendation, including the expected outcome and how this would be monitored:* | |
| **Timescale** | | **Responsibility** |
| *Please give details of the timescale required to complete the action or a deadline by which it will be completed:* | | *Please indicate which person or committee in the Department/School will be responsible for liaising with the Faculty to ensure completion of the action:* |
| **Feedback to the review area and School/Institution** | | **Feedback to students** |
| *Please indicate who will be responsible for giving feedback to the review area on the action being taken and the methods of feedback:* | | *Please indicate who will be responsible for giving feedback to students on the action being taken and the methods of feedback:* |
| **Part 2: Progress** (to be reported to FAQSC/FEEAC as stated above) | | |
| *Please describe the progress that has been made since the periodic review:* | | |
| **Is the action complete:** | | **Yes/No** *(delete as appropriate)* |
| **If ‘Yes’ above, date of completion:** | |  |
| **If ‘No’ above:** | | |
| *Please provide details of the work in progress under the headings below:*  Work still to be completed:  Expected completion date, and, if applicable, the reason for any extension to the completion date where it is later than the timescale set in Part 1 above:  Responsibility: | | |
| **Feedback to students** | | **Feedback to the review area** |
| *Please indicate who is responsible for reporting progress on or completion of the action to students, and the methods for communication this to them. This should include details of how new students, who were not present when the review took place, are informed of the process:* | | *Please indicate who is responsible for reporting progress on or completion of the action to relevant staff and how this is communicated to them. This is particularly pertinent if the recommendation includes School (level 2), Faculty or University action:* |

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| **Part 1: Recommendation** | | |
| *Please enter details of the recommendation, as contained in the Periodic Review Report:* | | |
| **Action** | *Please describe how the Department/School intends to follow this up with the Faculty to address the recommendation, including the expected outcome and how this would be monitored:* | |
| **Timescale** | | **Responsibility** |
| *Please give details of the timescale required to complete the action or a deadline by which it will be completed:* | | *Please indicate which person or committee in the Department/School will be responsible for liaising with the Faculty to ensure completion of the action:* |
| **Feedback to the review area and School/Institution** | | **Feedback to students** |
| *Please indicate who will be responsible for giving feedback to the review area on the action being taken and the methods of feedback:* | | *Please indicate who will be responsible for giving feedback to students on the action being taken and the methods of feedback:* |
| **Part 2: Progress** (to be reported to FAQSC/FEEAC as stated above) | | |
| *Please describe the progress that has been made since the periodic review:* | | |
| **Is the action complete:** | | **Yes/No** *(delete as appropriate)* |
| **If ‘Yes’ above, date of completion:** | |  |
| **If ‘No’ above:** | | |
| *Please provide details of the work in progress under the headings below:*  Work still to be completed:  Expected completion date, and, if applicable, the reason for any extension to the completion date where it is later than the timescale set in Part 1 above:  Responsibility: | | |
| **Feedback to students** | | **Feedback to the review area** |
| *Please indicate who is responsible for reporting progress on or completion of the action to students, and the methods for communication this to them. This should include details of how new students, who were not present when the review took place, are informed of the process:* | | *Please indicate who is responsible for reporting progress on or completion of the action to relevant staff and how this is communicated to them. This is particularly pertinent if the recommendation includes School (level 2), Faculty or University action:* |

***Please copy and paste the above table to record additional recommendations, as necessary.***

**FOR ACTION AT UNIVERSITY LEVEL**

**Please complete each section as follows:**

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| **Part 1: Recommendation** | | |
| *Please enter details of the recommendation, as contained in the Periodic Review Report:* | | |
| **Action** | *Please describe how the Department/School intends to follow this up with the University to address the recommendation, including the expected outcome and how this would be monitored:* | |
| **Timescale** | | **Responsibility** |
| *Please give details of the timescale required to complete the action or a deadline by which it will be completed:* | | *Please indicate which person or committee in the Department/School will be responsible for liaising with the University to ensure completion of the action:* |
| **Feedback to the review area and School/Institution** | | **Feedback to students** |
| *Please indicate who will be responsible for giving feedback to the review area, School/Institution and Faculty on the action being taken and the methods of feedback:* | | *Please indicate who will be responsible for giving feedback to students on the action being taken and the methods of feedback:* |
| **Part 2: Progress** (to be reported to FAQSC/FEEAC as stated above) | | |
| *Please describe the progress that has been made since the periodic review:* | | |
| **Is the action complete:** | | **Yes/No** *(delete as appropriate)* |
| **If ‘Yes’ above, date of completion:** | |  |
| **If ‘No’ above:** | | |
| *Please provide details of the work in progress under the headings below:*  Work still to be completed:  Expected completion date, and, if applicable, the reason for any extension to the completion date where it is later than the timescale set in Part 1 above:  Responsibility: | | |
| **Feedback to students** | | **Feedback to the review area** |
| *Please indicate who is responsible for reporting progress on or completion of the action to students, and the methods for communication this to them. This should include details of how new students, who were not present when the review took place, are informed of the process:* | | *Please indicate who is responsible for reporting progress on or completion of the action to relevant staff and how this is communicated to them. This is particularly pertinent if the recommendation includes School (level 2), Faculty or University action:* |

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| **Part 1: Recommendation** | | |
| *Please enter details of the recommendation, as contained in the Periodic Review Report:* | | |
| **Action** | *Please describe how the Department/School intends to follow this up with the University to address the recommendation, including the expected outcome and how this would be monitored:* | |
| **Timescale** | | **Responsibility** |
| *Please give details of the timescale required to complete the action or a deadline by which it will be completed:* | | *Please indicate which person or committee in the Department/School will be responsible for liaising with the University to ensure completion of the action:* |
| **Feedback to the review area and School/Institution** | | **Feedback to students** |
| *Please indicate who will be responsible for giving feedback to the review area, School/Institution and Faculty on the action being taken and the methods of feedback:* | | *Please indicate who will be responsible for giving feedback to students on the action being taken and the methods of feedback:* |
| **Part 2: Progress** (to be reported to FAQSC/FEEAC as stated above) | | |
| *Please describe the progress that has been made since the periodic review:* | | |
| **Is the action complete:** | | **Yes/No** *(delete as appropriate)* |
| **If ‘Yes’ above, date of completion:** | |  |
| **If ‘No’ above:** | | |
| *Please provide details of the work in progress under the headings below:*  Work still to be completed:  Expected completion date, and, if applicable, the reason for any extension to the completion date where it is later than the timescale set in Part 1 above:  Responsibility: | | |
| **Feedback to students** | | **Feedback to the review area** |
| *Please indicate who is responsible for reporting progress on or completion of the action to students, and the methods for communication this to them. This should include details of how new students, who were not present when the review took place, are informed of the process:* | | *Please indicate who is responsible for reporting progress on or completion of the action to relevant staff and how this is communicated to them. This is particularly pertinent if the recommendation includes School (level 2), Faculty or University action:* |

A copy of the Periodic Review Report and the Action Plan should be submitted to Faculty Academic Quality and Standards Committee, or equivalent, and then to the Academic Quality and Standards Committee within the timescales agreed at the post-IPR meeting.