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| PARTNERS REPORT |

**Owner:** Student Learning & Academic Registry

**Version number: 2.0**

**Effective date:** September 2024 (Academic Year 2024-25)

**Date of next review:** July 2025

*This document is part of the University Quality Framework, which governs the University’s academic provision.*



**Academic Board**

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| **PARTNERS REPORT** |

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| **Section A – Overview** |

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| **1. Academic Year:** |  |
| **2. Partner Name:** |  |
| **3. Partnership Typology:** |  |

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| **4. Teesside University School(s) covered by the report** | **SACI** | **SCEDT** | **SHLS** | **SSHL** | **TUIBS** |
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| **5. Authors Name, Job Title & Contact email:** |  |

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| **Section B – Provision & Student Numbers** |

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|  | **Registrations per Course over the last three academic years** | | |
| **Course Title(s)** | **Year 1 20\_\_/20\_\_** | **Year 2 20\_\_/20\_\_** | **Year 3 20\_\_/20\_\_** |
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| **Section C – Partners Self Evaluation** |

*Please be explicit where commentary relates to a specific site, course or mode of study etc.*

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| 1. **Strategy, Management and Operation**   Please comment on any significant changes to:   1. HE strategy. 2. HE management structure. 3. Quality assurance processes. |
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| 1. **Student Experience and Support**   Please comment on:   1. Recruitment, enrolment and induction. 2. Academic and pastoral support of HE students. 3. Student continuation, completion and progression[[1]](#footnote-2) by cohort, including data, trends and planned actions. Please include attachments where applicable. |
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| 1. **Enhancement of the Student Experience**   Please comment on how the following feedback has informed the enhancement of the student experience:   1. Student Voice Forums. 2. External Examiners Reports. 3. University Quality Enhancement Visits. 4. The National Student Survey (where applicable). 5. Staff feedback. |
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| 1. **Portfolio Development and Course Modifications**   Please outline any HE portfolio development and course modifications made since the last report. |
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| 1. **Staff Development, Scholarly Activity and Research**   Please comment on HE staff development activities undertaken in the last year; internal and external attendances; provide an overview of engagement in scholarly activity and research: |
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| 1. **Professional, Statutory or Regulatory Body (PSRB) Activity**   Please comment on activities related to PSRB reviews, mapping of practice to PSRB policy and any subsequent changes in practice: |
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| 1. **Public Information**   Please confirm:   1. The process for the effective audit and approval of all published materials relating to the partnership and courses. 2. Whether any risks/breaches were highlighted during the reporting period and actions taken. |
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| 1. **Partnership**   Please comment on:   1. Areas of strength and areas for enhancement in partnership working with Teesside University. 2. If ownership or the name of the partner has changed since the Contract for Collaborative Provision was last signed. |
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| 1. **Good Practice**   Please include ***a minimum of three*** areas of good practice or particular successes in relation to the partnership and courses covered in this report. Add additional lines as required. |

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| **No.** | **Item** |
| 1. |  |
| 2. |  |
| 3. |  |

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| **Section D – Prevent Duty (UK-based partners/subsidiaries only)** |

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| Please comment on activities relating to your institutional Prevent Strategy.  **In all cases data should cover the academic year from 1 August to 31 July.** |

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| 1. **Welfare Cases** | | **No.** |
| i) | Number of welfare cases referred for specialist advice and support. |  |
| ii) | Number of Prevent-related cases escalated to the point at which the Prevent lead has become involved. |  |
| iii) | Number of Prevent-related cases which lead to external advice being sought from Prevent partners. |  |
| iv) | Number of formal referrals to Channel. |  |
| *Please add any further technical information that you believe would be helpful or relevant for OfS to know regarding Welfare. (max. 250 words)* | | |

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| 1. **Events & Speakers** | | | **No.** |
| i) | Total number of events/speakers approved. | Estimate / Actual  *(delete as appropriate)* |  |
| ii) | Number of events/speakers approved with conditions/mitigations. | |  |
| iii) | Number of events/speakers referred to the highest decision maker in the provider’s process. | |  |
| iv) | Number of events/speaker requests rejected. | |  |
| *Please add any further technical information that you believe would be helpful or relevant for OfS to know regarding Events & Speakers. (max. 250 words)* | | | |

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| 1. **Staff Training** | | **No.** |
| i) | Number of staff identified as key to Prevent delivery. |  |
| ii) | Number of key staff receiving induction Prevent training. |  |
| iii) | Number of key staff receiving refresher Prevent training. |  |
| iv) | Number of staff receiving broader welfare/safeguarding awareness training/briefing |  |
| *Please add any further technical information that you believe would be helpful or relevant for OfS to know regarding Training. (max. 250 words)* | | |

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| **Section E – Action Plan** |

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| 1. Please comment on the effectiveness and impact of the strategies put in place to deliver the actions identified in the previous report. Include data to evidence the impact/outcomes where available (add more lines as required). |

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| **No.** | **Action** | **Outcome and Impact** |
| 1. |  |  |
| 2. |  |  |
| 3. |  |  |
| 4. |  |  |

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| 1. Please identify actions in relation to the partnership and courses covered in this report that will be progressed during the next academic year. |

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| **No.** | **Action** | **Responsibility (role)** | **Timescale for completion** |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |
| 4. |  |  |  |

**Please submit the completed report to** [**CME@tees.ac.uk**](mailto:CME@tees.ac.uk)

1. As defined by the Office for Students [Condition B3 baselines for student outcomes indicators](https://www.officeforstudents.org.uk/media/490d884f-03aa-49cf-907d-011149309983/condition_b3_baselines.pdf) [↑](#footnote-ref-2)