

**Proposal for Distance Learning offering of Programme(s)**

This template should be used by a programme team(s) to seek approval to deliver a programme(s), previously approved to operate face-to-face delivery only, via distance or blended learning.[[1]](#footnote-2)

Please note that, prior to completing this proposal, approval from the university’s Academic Planning and Fees Panel to plan delivery by distance learning **must** have been obtained. Proposals to plan delivery by blended learning do not require APFP approval.

When completing this template, programme teams are encouraged to utilise both the university’s [Curriculum Design Guide](https://www.ljmu.ac.uk/teaching-and-learning-academy/educational-policies-and-guidance#:~:text=Curriculum%20Design%20Guide,campus%2Dbased%20and%20online%20environments.) and the Quality Assurance Agency’s guidance [*Building a Taxonomy for Digital Learning*](https://www.qaa.ac.uk/docs/qaa/guidance/building-a-taxonomy-for-digital-learning.pdf?sfvrsn=36b4cf81_27).

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| **Programme(s) encompassed within this application** |
| **Award** | **Title** | **SIS Code** | **Owning Faculty** | **Owning School** | **Collaborative****Partner (if applicable)** | **Academic Year Last Validated /Reviewed** | **Academic Year Approval Expires** |
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*(Please add rows as necessary)*

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| **Proposed date of implementation** |
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| **Academic Planning and Fees Panel Approval***Please confirm the date(s) when the university’s Academic Planning and Fees Panel granted approval to plan delivery by distance learning.*  |
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| **Supporting information** |

*This section provides the Validation and Review Oversight Panel with key information relating to the development, operation and management of delivery via distance or blended learning.*

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| **Teaching and Learning Design and Operation***Please describe:** *Specifically, how the proposed arrangement will operate? i.e., will teaching and learning be fully online or will a combination of online and in-person approaches be utilised.*
* *How the approach will promote inclusion of students with diverse characteristics and backgrounds.*
* *How the approach will encourage student retention and engagement.*
* *How externality has informed the proposed design and operation.*
* *How you will ensure that students undertaking distance learning/blended learning receive a comparable experience to those students learning fully in-person.*
* *How time will be facilitated to enable staff to develop online learning materials.*

*If the programmes encompassed within this application will be subject to different delivery approaches, this should also be detailed within this section.* |
| Type here |
| *If any aspects will be delivered via in-person activities, please outline:* * *The nature of these in-person activities (e.g. lab-based activities).*
* *The specific modules that necessitate in-person delivery.*
* *Per module, the number of in-person contact hours required.*
* *The percentage balance between online and in-person learning activities.*
* *At which stage of the applicable module(s) in-person learning activities will be offered, and when this activity will be timetabled.*
* *How a seamless transition between online learning and in-person activities will be facilitated.*
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| *Beyond the introduction of new programme and module codes, will it be necessary to change any aspects of the programme(s), at either programme and/or module-level, to facilitate the change from face-to-face delivery to distance or blended learning?*  |
| Yes | No |
| ☐ | ☐ |
| *If “Yes”, please provide details*  |
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| *With the exception of the specific features outlined above, will this proposal change any of the arrangements agreed through the most recent validation/periodic programme review, as set out within the* ***definitive programme documents****?*  |
| Yes | No |
| ☐ | ☐ |

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| *If “Yes”, please provide details.* *Please note, this may necessitate required changes to be considered through an appropriate university process.* |
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| **Resources***Please detail the digital resources that will be utilised to facilitate students’ engagement with online learning activities and, specifically, how and when these will be utilised.**Please note, evidence of these digital resources (e.g., a recorded demonstration of the virtual learning environment that will be utilised to facilitate online learning activities)* ***must*** *be made available to the Validation and Review Oversight Panel alongside this application.*  |
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| *Are the necessary digital resources in place?*  |
| Yes | No |
| ☐ | ☐ |
| *If “Yes”, please confirm what supporting evidence has been provided in support of this application (including details of how this evidence can be accessed, e.g., weblinks and associated log-in information).*  |
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| *If “No”, please confirm what will be purchased and the planned timeline for when this will be purchased.* |
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| *Please describe the arrangements to ensure that all students will have equal access to the necessary resources to engage with online learning.* |
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| *In relation to blended approaches* ***only****, when will students have access to campus-based resources required to facilitate in-person activity?*  |
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| **Staff expertise** *Will the teaching team be the same as the teaching team for the campus-based provision?*  |
| Yes | No |
| ☐ | ☐ |
| *If “No”, please list the staff who will need to be added to the approved teaching team.* *Please note, the CVs for these colleagues* ***must*** *be submitted alongside this application to facilitate consideration of their suitability to deliver an award of Liverpool John Moores University.* |
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| *With regard to the extant, approved, teaching team please describe what expertise and experience exists within the teaching team in relation to facilitating online delivery?* |
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| *As applicable, please describe how the adoption of online delivery will be supported by way of technical support and/or staff development?* |
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| **Student Support***Please describe:** *How induction activities will operate for students learning online.*
* *How induction activities will be inclusive and support the needs of all students to study online.*
* *How students will be supported to transition between academic years / levels of study.*
* *How appropriate support will be accessible to students who are engaging in online learning, including access to applicable central support services.*
* *The operational arrangements for personal tutoring for students learning online.*
* *How will student engagement with online learning be monitored to facilitate, as applicable, appropriate intervention to address identified issues.*
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| **Personalisation***Please describe to what extent the student experience will be personalised. For example, how, and the extent to which, students access the teaching materials.* |
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| **Recruitment***Please describe the intended target market for the distance/blended learning version of the programme(s) encompassed within this application?*  |
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| *How will students be counselled, at the application stages, as to whether to opt for the face-to-face version or the distance/blended learning version of the programme(s)?* |
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| *Will students have the opportunity to transfer from the face-to-face version to the distance/blended learning version of the programme(s) or vice versa?* |
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| **Capacity and Student Experience***In relation to the distance learning/blended learning offering of each programme, encompassed within this application, please detail:*  |
| **Programme** | **Minimum student numbers** | **Maximum student numbers** | **How will these numbers apply** (e.g. per year/per intake point) |
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| *How will the student experience be assured for small cohorts if the minimum student numbers are recruited?* |
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| *Can assurance be provided that the human, physical and electronic resources are adequate to support the students if the maximum student numbers are recruited?* |
| Yes | No |
| ☐ | ☐ |
| *If “No”, please explain your response* |
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| **Sign-off** |

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| **Collaborative Partner Sign-off (if applicable)****(*I confirm that I have been fully involved in the development of this application and I endorse its content on behalf of my organisation)*:** |
| **Name:** |  |
| **Position / Role at Collaborative Partner:** |  |
| **Date:**  |  |

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| **LJMU Director of School Sign-off****(*I confirm that I have been fully involved in the discussion regarding this proposal and support this application):***  |
| **Name:** |  |
| **Signature:** |  |
| **Date:** |  |

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| **Date approved by the Validation and Review Oversight Panel** |
| *To be completed by the Secretary of VROP* |

***Please note, to enable consideration of this application by the Validation and Review Oversight Panel, it must include CourseLoop links to the applicable programme specifications and module proformas.***

1. **If you are amending the delivery as part of a programme’s scheduled Periodic Programme Review (PPR), you do no need to complete this form.** Instead, details of delivery should be included in the Self-Evaluation Document prepared for your PPR. NB. Prior approval by APFP for Distance Learning must still be sought and confirmed in parallel to writing your PPR documentation. [↑](#footnote-ref-2)