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## Peer review of teaching and the TEF – paperwork compliance and systematic pathologies

The introduction of the teaching excellence framework (TEF<sup>1</sup>) means it's time to talk again about the role of **peer observation of teaching**<sup>2</sup> in higher education. Although I can see why the introduction of the TEF **divides opinion**<sup>3</sup> and is arguably yet another example of the global trend towards **neoliberalisation and marketisation**<sup>4</sup> in higher education, unlike some **commentators**<sup>5</sup>, I don't think it is in itself necessarily a bad idea.

However, to my mind, policy makers and senior university management are currently guilty of failing to inculcate the idea of collective responsibility within their notion of teaching quality. One example of this, which I am going to focus on today, is peer review of teaching. This will undoubtedly form a key element of the TEF performance appraisal and quality assurance process. Yet it is too often about talked about in terms of individual performance. When to promote real teaching quality which will benefit both staff and students, to my mind we must view peer review as very much a collective story rather than an individual product.

We know that the majority of university lecturers possess no formal teaching qualification, even though **research** shows students prefer their lecturers to possess one<sup>6</sup>. Given **HEFEC**<sup>7</sup> tells us that they are 128170 people on full time academic contracts and 66075 on part time contracts, it's pretty safe to say that it will take some time for the accreditation and fellowship plans of the **higher education academy**<sup>8</sup> to cover the entire workforce, regardless of the introduction of the TEF. Indeed, at the last count, it had 68810 fellows, roughly thirty five per cent of all academic staff.

However, like **many other academics**<sup>9</sup>, I don't think that an educational qualification is a de facto gateway to an enhanced learning experience for students. Just as I don't think that TEF calls for target-led transparent and accountable pedagogic practices and quality assurance processes will automatically correlate with good quality teaching practice. Rather, what I think is important here, are the structural and cultural working conditions which support even the most teaching committed and student-centred academic to collude with colleagues and participate in 'gaming' when it comes to quality control mechanisms such as the peer-review of teaching.

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<sup>1</sup> Link to <https://www.gov.uk/government/speeches/teaching-at-the-heart-of-the-system>

<sup>2</sup> Link to <http://www2.le.ac.uk/offices/lli/staff-development/ltdev/peer-observation-of-teaching-1>

<sup>3</sup> Link to <http://blogs.lse.ac.uk/impactofsocialsciences/2015/10/01/fulfilling-our-potential-rhetoric-teaching-excellence-framework/>

<sup>4</sup> Link to <http://www.newsrecord.co/neoliberalism-and-the-commercialization-of-higher-education/>

<sup>5</sup> Link to <http://blogs.lse.ac.uk/impactofsocialsciences/2015/09/10/five-reasons-the-teaching-excellence-framework-is-bad-news-for-higher-education/>

<sup>6</sup> Link <https://www.timeshighereducation.com/news/student-survey-rates-teaching-qualifications-above-research-activity>

<sup>7</sup> Link to <https://www.hesa.ac.uk/pubs/heuk>

<sup>8</sup> Link to <https://www.heacademy.ac.uk/recognition-accreditation>

<sup>9</sup> Link to <https://www.timeshighereducation.com/news/lukewarm-support-for-teaching-excellence-framework-from-university-staff-survey-show>

In 2011, I published some **research**<sup>10</sup> into academic staff members' experiences and perceptions of peer-observation of teaching. My interest in the topic came about from some other **research**<sup>11</sup> I was doing on the introduction of more formal performance appraisal and peer review mechanisms within medicine as a result of a series of high profile medical malpractice cases, including the notorious **Harold Shipman**<sup>12</sup> case. As might be expected, given the highly specialised nature of both settings, I found that, when it came to an individual directly assessing the work of one of their colleagues, they were enthusiasts, reluctant compliers and non-compliers.

However, regardless of an appraisers level of enthusiasm and compliance, what was most interesting was that in each setting I discovered that, although the official paperwork often told a very different story, appraisees were frequently 'signed off' as having meet minimum performance criteria or not, even though no formal observational appraisal meeting had taken place. In short, the paperwork was completed, but the technical aspects of the appraisal procedures have not been adhered to by the appraiser; that is past a highly superficial tick - box, paper-filling, level. Instead, what had happened was that the appraiser has formulated their own personal and tacit judgement of the competence of the appraisee from working with them over time. I encapsulated this in the concept of *paperwork compliance*, applying it in my subsequent research examining the introduction of **medical revalidation**<sup>13</sup> for doctors, and defining it as follows:

“Stated in formal terms, *paperwork compliance* gives the impression that an appraisee has been appraised using collegially agreed minimum performance standards. These have been predefined with regards to occupational specific knowledge, skills and attitudinal competency domains. Yet, in reality these have played a superficial role in helping an appraiser form an opinion in regards to: a) Which tasks an appraisee should undertake and be assessed in to be defined as 'competent' at a level appropriate to their career level (i.e. compare a final year medical student and a senior house officer); and b) The level of proficiency possessed by an appraisee about these tasks”. (Chamberlain 2015: 53)

What this concept is pointing towards is that in everyday work, people who are experts in their field tend to prefer to make up their own mind about something, and so prefer to rely on their own personal and often idiosyncratic judgements about the competency (or not) of the people they work with. What is more, they tend to try and shoehorn these judgements into formal peer-review processes, regardless of if these are for professional development or quality assurance purposes. Furthermore, I would content that to some extent this situation is unavoidable. Particularly when dealing with expert systems, such as medicine, law and education for example, as these relay upon forms of knowledge and expertise which require practitioners develop a high level of embodied personalised expertise in addition to the more formal and codifiable and mutually shared elements of their disciplinary knowledge-base.

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<sup>10</sup>Link to <http://alh.sagepub.com/content/12/3/189.short>

<sup>11</sup> Link to <http://socresonline.org.uk/15/1/8.html>

<sup>12</sup> Link to <http://www.biography.com/people/harold-shipman-17169712>

<sup>13</sup> Chamberlain (2015: 53) Link to

<http://www.policypress.co.uk/display.asp?K=9781447325444&sf1=keyword&st1=chamberlain&m=1&dc=1>

The problem here is, of course, that this way of working can lead to the development of ‘us and them’ attitudes between practitioners, towards not just the public, but to any implementation by ‘outsiders’ of performance appraisal and quality assurance processes to oversee their activities. This is the case even when, as with most professions, regulatory and quality assurance processes have to rely on some form of peer-review process in order to possess professional, public and political legitimacy. Because, given the tacit nature of much of their expertise, professional groups tend to frown upon anything which threatens the status quo. Just as they frown on colleagues who out of social conscience become ‘whistle-blowers’ when problems occur.

An apposite example we can all learn from here is, of course, the **Mid Staffordshire NHS Trust scandal** where poor performance was covered up by a clinical team<sup>14</sup>. The subsequent **Francis inquiry**<sup>15</sup> describes a working culture of fear, secrecy and defensiveness in which whistle-blowers were silenced by senior colleagues. Which is why I think, like medicine, it is important that academics develop a **duty of candour**<sup>16</sup> when it comes to our teaching, and recognise that sometimes it is necessary to be open with a colleague, highlighting concerns about their teaching in as supportive manner as possible, particularly when they originate from our **students**<sup>17</sup>.

But this tendency for elite working cultures to be inward looking and mutually protectionist is, of course, only a small part the story. The other much bigger part are the structural conditions under which practitioners work. And to my mind, it is these which need to be the focus of change under the TEF. I think it’s important, although it is unlikely to happen, for the TEF to support a move away from focusing on individual pathologies in relation to assessing teaching quality, be they problems of character or competence, toward looking at systematic pathologies, in the form of an institutional operational structure and its impact on what and how we teach.

We **know**<sup>18</sup> that a significant amount of teaching is undertaken by staff on temporary and zero-hours contracts and promotions to senior posts are typically linked to research and funding capture, not recognition of teaching excellence. Will the TEF change this state of affairs? I doubt it. For me, a key question, which is remains unanswered, is just how will the TEF change the way universities recognise and reward the range of talent and abilities their full-time and part-time staff possess, instead of continuing to reward just one part of the job – research - above all others?

Indeed, the second key concept emerging from my research has been ‘decoupling’. I have found that regardless of if peer review is approached as Gosling (2005) defines it, as mainly

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<sup>14</sup> Link to <http://www.theguardian.com/society/2013/feb/06/mid-staffs-hospital-scandal-guide>

<sup>15</sup> Link to [http://www.health.org.uk/collection/responding-francis-inquiry-report?gclid=CL\\_JxrrDi8kCFRFsGwodnF4L7w](http://www.health.org.uk/collection/responding-francis-inquiry-report?gclid=CL_JxrrDi8kCFRFsGwodnF4L7w)

<sup>16</sup> Link to <http://bma.org.uk/working-for-change/doctors-in-the-nhs/nhs-culture/duty-of-candour>

<sup>17</sup> Link to <http://www.theguardian.com/higher-education-network/blog/2012/feb/15/uk-universities-teaching-revolution>

<sup>18</sup> Link to <http://www.ucu.org.uk/index.cfm?articleid=7607&from=7582> that

an ‘**evaluative**’, ‘**developmental**’ or ‘**collaborative**’<sup>19</sup> exercise, it tends to operate superficially when it is decoupled from formal staff development and employee feedback processes, particularly in terms of salary and career progression, but most importantly, working conditions.

If performance appraisal has little direct impact upon an individual’s day-to-day working life then a growing disenchantment with the process is to be expected. They become, as Pym (1973) once rather gloriously called them, **rituals of employment**<sup>20</sup>. To remedy this, peer review must never be a one-way exercise. Peer review of teaching is all too often about individual performance, but to promote teaching quality, which to my mind is very much a **collective rather than individual phenomena**<sup>21</sup>, its primary focus must be departmental and institutional performance. Until peer review enables appraisees to feedback to their employers about their working conditions and these change for the better as a result, policy makers and senior university management will remain guilty of failing to inculcate the idea of collective responsibility within their notion of teaching quality. It is here, at the collective teaching practice coalface, that the TEF will stand or fail.

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<sup>19</sup> Link to <http://dera.ioe.ac.uk/13069/>

<sup>20</sup> Link to <http://psycnet.apa.org/psycinfo/1975-22072-001>

<sup>21</sup> Link to <http://annenberginstitute.org/publication/collective-practice-quality-teaching-voices-urban-education-27>