



University College Dublin

**Guidelines for Internal Periodic Review
(Academic Unit)**

June 2014

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Note: These Guidelines will be updated annually to reflect good practice and lessons learned from earlier reviews.

Please note that the version of these guidelines used at the initial briefing to the unit under review, will be the guidelines/procedures applied throughout the unit's review process, unless it is agreed with the UCDQO, that an updated version of the Guidelines can be applied.

The Review Process

“Quality Assurance is not a static but a dynamic process. It should be continuous and not ‘once in a lifetime’. It does not end with the first review or with the completion of the formal follow-up procedures. It has to be periodically renewed. Subsequent external reviews should take into account progress that has been made since the previous event”.

(Standards and Guidelines for Quality Assurance in the European Higher Education Area: ENQA, 2005)

Introduction

Academic reviews will be conducted on a 7-8 year cycle. Throughout this document the term “unit” will be used to describe a College, School, Institute or any other academic entity. The University’s strategic and holistic approach to academic unit review acknowledges that the various aspects of a unit’s operations (strategy and organisation, teaching and learning, research and resources) are inter-related and ensures that members of the unit come together to reflect upon what they are trying to achieve in all aspects of their work, and how these different areas of activity impact upon one another. All members of the unit, both academic and non-academic, are included in the review and are expected to engage, as appropriate, in discussions and the preparation of all materials, as a collegial activity. The primary focus of the review is on quality improvement.

1. Purpose of Review

The purpose of periodic review is to assist the University to assure itself of the quality of each of its constituent units and to utilise learning from this essentially developmental process in order to effect improvement, namely:

- To monitor the quality of the student experience, and of teaching and learning.
- To monitor research activity, including: management of research activity; assessing the research performance with regard to: research productivity, research income, and recruiting and supporting doctoral students.
- To identify, encourage and disseminate good practice, and to identify challenges and how to address these.
- To provide an opportunity for units to test the effectiveness of their systems and procedures for monitoring and enhancing quality and standards.
- To encourage the development and enhancement of these systems, in the context of current and emerging provision.
- To inform the University’s strategic planning process.
- The output report provides robust evidence for external accreditation bodies.

- The process provides an external benchmark on practice and curriculum.
- To provide public information on the University's capacity to assure the quality and standards of its awards. The University's implementation of its quality procedures enables it to demonstrate how it discharges its responsibilities for assuring the quality and standards of its awards, as required by the Universities Act 1997 and the Qualifications and Quality Assurance (Education and Training) Act 2012.

Other potential benefits of the process are set out in **Appendix 1**.

2. Outline of the Periodic Review Process

The overall aim of the review process is on-going improvement. In order to derive maximum benefit from the process, the University is keen to ensure that the approach to self-assessment and review should be simple, flexible and easy to implement. It is the aim of the Quality Office to make the process as simple and understandable as possible. The key stages are:

1. Establish a Self-assessment Report Co-ordinating Committee
2. Draft Self-assessment Report (SAR)
3. Site Visit - consideration of the SAR by a Review Group
4. Review Group prepare a Report incorporating recommendations for quality improvement
5. Unit prepares an Action Plan for on-going improvement
6. Follow-up - to consider progress against action plan

3. Self-assessment Rationale

Self-assessment is the first key step that a unit takes in preparing for a quality review. There are four basic questions that need to be addressed as part of this process, namely:

- What are we trying to do?
- How are we trying to do it?
- How do we know it works?
- How do we change in order to improve?

Self-assessment is the process by which a unit (college, school, research, support/service unit, or study programme) reflects on its objectives and critically analyses the activities it engages in to achieve these objectives. It provides an evaluation of the unit's performance, of its functions, its services, and its non-academic support activities. The self-assessment should be constructively self-critical and analytical; it

should act as the basis for a dialogue between the unit and the Review Group. The unit records these evaluations in a Self-assessment Report (SAR). The Report:

- presents detailed information about the unit, its mission, functions and activities
- presents a succinct but comprehensive statement of the unit's strategic aims and objectives and discusses how these are aligned with those of the University
- describes the quality systems and processes that are already in place along with sample outcomes
- provides a comprehensive self-critical analysis of the activities of the unit, which may include a formal benchmarking exercise
- describes the collective perception of staff and students of their role not only in the University, but where appropriate, in the international community and in the social, cultural and economic development of Ireland
- provides evidence of the views of external stakeholders
- helps the unit to identify and analyse its strengths, weaknesses, opportunities and challenges, and allows it to suggest appropriate remedies where necessary
- identifies weaknesses in procedural, organisational or other matters that are under the control of the unit, and which can be remedied internally
- identifies shortfalls in resources and provides an externally validated case for increased resource allocation
- provides a framework within which the unit can continue to work in the future towards quality improvement

(Source: IUA/IUQB – A Framework for Quality in Irish Universities)

Regular, formal self-assessment is the core component of the Irish Universities quality framework, where the emphasis is placed on the immediate value to the unit of this analytical and self-critical process. The preparation of the SAR acts as a stimulus and provides opportunities for reflection and consultation, enabling units to plan and manage strategically and to align their development plans with those of the University. The main emphasis in all of the self-assessment processes is of both a quantitative and qualitative analysis, with a view to continuous improvement.

The SAR provides the Review Group with essential information to prepare both for the review visit and the review group report. The preparation of the SAR follows essentially the same process for all units within the University. However, the content of reports may vary with the nature of the unit's activities.

4. Thematic Reviews

In addition to academic and support service unit reviews, from time-to-time, University-wide thematic reviews will also be undertaken. In this instance, the self-assessment process will be headed by a relevant senior staff member and the members of the self-assessment co-ordinating committee will be drawn from the relevant parts of the institution. Separate procedures exist for thematic review.

5. Briefing Meeting with Head of Unit

The Director/Deputy Director of Quality will hold a briefing meeting with the head of the unit at least ten months before the review to discuss the review process, schedule, and required documentation, and to agree deadlines for the receipt of documentation. The Director/Deputy Director of Quality is also available to meet and brief staff of the unit, if required. An indicative timeline for Review is set out in **Appendix 2**.

6. Establishment of the Self-assessment Co-ordinating Committee

At the outset of the review process the unit designates a group from within the unit to form the Co-ordinating Committee which is responsible for the preparation of the Self-assessment Report (SAR). The Committee should be representative of the key staff groupings within the unit, and should normally include the Head of the Unit, who will play an active role in the self-assessment process, and at least one other senior member of staff. In the case of an academic school, where it is possible, it should also include a student, preferably a postgraduate research student who is a recent graduate of the unit. Where appropriate, a member from each of the technical and administrative staff should also be represented on the Co-ordinating Committee. The Committee should be operational and not too large. A member of staff, not necessarily the Head of the unit, will chair the Co-ordinating Committee and liaise with the Quality Office. Typically, responsibility for the preparation of the various sections of the SAR, should, as appropriate, be distributed between the members of the Co-ordinating Committee (excluding the student representative).

Care should be taken appointing students to Co-ordinating Committees; they should not be expected (or allowed) to devote a large amount of time to the exercise. All staff members of the unit should be kept fully informed of the self-assessment process and should be given an opportunity to contribute their views.

Following consultation with the unit, the UCD Quality Office may provide a further briefing to the Co-ordinating Committee. Before making a detailed plan for the self-assessment, the Co-ordinating Committee should read the Guidelines carefully, discuss these with their colleagues, and importantly consult with the Director of Quality and/or staff in the Quality Office. The Head of Unit and/or Chair of the Co-ordinating Committee and Director/Deputy Director of Quality should then agree provisional dates of formal meetings. The Director/Deputy Director of Quality should be invited to the first meeting of the Co-ordinating Committee, and thereafter to appropriate meetings, to provide advice and guidance, to monitor progress and to review the final draft of the SAR. Regular communication between the Director/Deputy Director of Quality and the Co-ordinating Committee is encouraged. The best results for reviewed units has occurred most often when this contact has been maintained.

7. Feedback from User Groups

It is important to obtain the views of user groups, and these can be obtained for example, through peer review, focus groups and/or questionnaires. Advice on appropriate mechanisms is available from the Quality Office, UCD Teaching and Learning (<http://www.ucd.ie/teaching/>) or the Director of Institutional Research. Sample questionnaire templates are available from the Director of Institutional Research. These questionnaires are intended to provide guidance and are neither definitive nor exhaustive. Individual units may have special requirements and these should be discussed at an early stage with the Director of Institutional Research (Maura McGinn, UCD Director of Institutional Research, Email: maura.mcginn@ucd.ie, Tel: 01 716 1088). Analysis of this feedback should inform the writing of the SAR.

For the purposes of the Quality Review, two roles within the HR team are key – HR Partner and Organisation Development. As part of their services, both areas work together to facilitate units in conducting the staffing and organisation aspects of the Quality Review Process. They draw on the expertise of other HR and Support unit inputs as necessary during the process. For further information on support provided by HR Services and contact details, please see the HR information paper at <http://ucd.ie/quality>.

8. Structure and Content of Documentation

The precise nature of the materials prepared for review is to some extent dependent on the subject area, but will always include as a key element, a self-assessment document (see **Appendix 3**), accompanied by supporting information, which may include: an organisation chart, staff profiles, unit plans, a unit profile comprising staff and student statistical information, previous internal and external review reports (where these exist), accreditation reports from Professional and Statutory Bodies, information on research grants and income, budgetary information and programme specifications, external examiners reports and responses to those reports, internal programme review reports, analysis and implementation of student feedback, minutes of Student/Staff Consultative Committees, staff and student handbooks and recruitment literature. Some of the documentation required will be submitted in advance and circulated to the Review Group. Other documents should be made available to the Review Group for reference during the review site visit itself. (See also **Appendix 4**).

9. Writing the Self-assessment Report

The SAR is the main vehicle through which the unit conveys information about itself. Equally, and perhaps more importantly, it is the starting point for critical reflection by the unit about the way it is managed and handles quality with regard to its particular activities. It is an evidence-based reflection of what the unit believes to be working well in the unit and what it believes to be working less well. It should be full and frank, not attempting to hide problems, but not forgetting to cover strengths; and it should be developmental, offering thoughts on how to improve provision within the unit.

The unit is not required to provide a detailed description of what it does. Some background information may be necessary to set the context, but the emphasis should instead be on the critical self-evaluation of how effective and successful it believes the various aspects of its provision to be. This exercise provides a useful opportunity to explain why the unit is reassured that service provision is excellent and points to the evidence which supports this view; or where provision could be improved and provide recommendations

for corrective action. This section should typically be no longer than three pages. Additional guidance on writing the SAR is available at www.ucd.ie/quality/informationforstaff/.

The structure of the SAR is typically:

- Introduction and Context of the Unit
- Organisation and Management
- Staff and Facilities
- Teaching, Learning and Assessment
- Curriculum Development and Review
- Research Activity
- Management of Quality and Enhancement
- Support Services
- External Relations
- Overall Analysis and Recommendations for Improvement

A template for the Self-assessment Report with a number of guiding prompts (not exhaustive) under each section is set out in **Appendix 3**. The template should be used to structure the SAR, however, there is some scope to tailor the structure of the SAR to address specific unit needs, and advice on any aspect should be discussed with the UCD Quality Office. Prompts are provided as an aide-memoire, to aid evaluation and to guide thinking about the content of the SAR. Please highlight strengths and areas of good practice but also highlight those areas that the unit is working to improve: state the issue and the actions that are being taken to resolve or improve the situation. Examples should be provided within the text and reference made to documentary evidence, for example, via footnotes, to support statements made in the self-assessment document. Detailed information available in another existing document need not be reproduced in the SAR; instead, append the relevant document or refer to it, and make it available for the site visit. Reference to electronic documents may be made by providing the web address, as required.

The SAR should not be a lengthy document, and it is recommended that it typically should be **no longer than 40 pages**, with additional appendices. Keep it succinct and remember that the SAR acts as a basis for a dialogue between the unit and the Review Group.

Examples of additional supporting documentation that may be included with the SAR and/or made available in the Review Group meeting room during the site visit, are set out in Appendix 4.

Inputs to the SAR should include, where appropriate:

- staff feedback
- student feedback
- employer feedback
- academic plans
- external examiner reports; professional and statutory body reports
- relevant statistics e.g. admission grades; applicant demand; progression and completion rates; degree classifications; staff/student ratios

- programme specifications
- committee minutes
- School/College/University (as appropriate): Teaching and Learning Strategy/Research Strategy
- Prospectus/Student Handbooks

Other UCD Resources

A number of UCD units can provide support for schools and units preparing for quality review, including:

- UCD Human Resources
- UCD Library
- UCD Research
- UCD Teaching & Learning
- UCD Institutional Research

Further information on the supports available can be accessed at www.ucd.ie/quality/otherucdresources/.

Ten bound copies of the SAR, with appendices, plus one unbound copy and one electronic copy, should be delivered to the UCD Quality Office, at least four weeks in advance of the site visit.

A hard copy of the SAR should be circulated to all staff members of the unit by the Co-ordinating Committee and the relevant College Principal, prior to the site visit.

The Review Group Report and summary will be published on the University website at www.ucd.ie/quality following consideration by UMT and upon acceptance by the University Governing Authority, (in accordance with the Universities Act 1997). In order to encourage critical self-reflection, however, the SAR will be confidential to the unit, Senior Management of the University, the Review Group and the Quality Office.

10. Review Group Composition

A typical Review Group for an academic unit might include:

- Two senior UCD academic staff, one of whom acts as Chair, the other as Deputy Chair.
- Two* external experts in the discipline, chosen from a list of at least six candidates supplied to the Director of Quality, by the Co-ordinating Committee. Normally, the external experts proposed should have leadership experience within a leading international research-intensive institution. Current and recent External Examiners are not considered eligible for this role. Nomination forms are set out in **Appendix 5** and are available electronically from the UCD Quality Office.

* (Note: this number may vary, as appropriate, to reflect the size and diversity of the unit under review, having regard to the principle that the number of internal UCD members shall not exceed the number of external members)

A short-list of proposed **external reviewers** will be submitted by the unit under review by an agreed deadline (typically 3 nominees per representative required – see guidance notes for the selection of reviewers at **Appendix 6**). The list of proposed reviewers will be considered by the UCDQO, in consultation with the College Principal, if required. External nominees may be removed from the list or additional externs may be added to the list of nominees, by the UCDQO or the College Principal. If the unit under review does not provide nominees to be considered for the Review Group, by the agreed deadline, the UCDQO, in consultation with the College Principal, will propose the composition of the Review Group.

As necessary, in order to adapt to changing circumstances (e.g. a prospective reviewer being unavailable or a reviewer dropping out at short notice) the procedures for the establishment of Review Groups will remain flexible.

The final selection of the Review Group will be reported to the Academic Council Committee on Quality. The final selection will be independent of the unit under review.

Note:

1. Both genders (wherever possible) should be represented on the nomination lists.
2. An academic unit must declare any relationship it might have with a proposed external reviewer. This must be done during the initial consultation period and outlined on the external nominee form (see **Appendix 5**).

11. Objectives and Function of the Review Group

(i) Objectives

The objectives of the Review Group are to:

- Clarify and verify details in the SAR.
- Verify how well the aims and objectives of the unit are fulfilled, having regard to the available resources.
- Confirm the unit's strengths, weaknesses, opportunities and challenges as outlined in the SAR.
- Discuss any perceived strengths and weaknesses not identified in the SAR.
- Check the suitability of the working environment.
- Make recommendations for improvement.

(ii) Function

The Review Group will:

- Study the SAR.
- Visit the unit over two or three days (Site Visit, see Section 12).
- Clarify and verify details in the SAR.
- Review the activities of the unit in the light of the SAR.
- Prepare a draft report and present the main findings in an exit presentation to the Unit.
- Write the Review Group Report.

12. Site Visit

(i) Planning

The Review Group visits the unit typically over a 2 or 3 day period. This site visit is central to the review process and must be carefully planned. Close liaison is required between the unit's co-ordinating committee and the UCD Quality Office. The UCD Quality Office will also engage the Chair of the Review Group at appropriate points.

The dates for the site visit are arranged by the Quality Office, in consultation with the unit. This has important implications for the timing of all other activities. In particular, in order to give everyone involved an opportunity to clear their diaries, the membership of the Review Group is arranged as early as possible and the dates for the site visit fixed. All members of the unit are expected to be available for the duration of the site visit. Arrangements for the site visit meetings are the responsibility of the Unit under review following discussion with the Quality Office. It is also important that the Review Group meets with undergraduate and postgraduate students. Prior to (and subsequent to) the site visit all contact with the internal and external reviewers regarding the review, including arrangements for travel and accommodation, is carried out by the Quality Office.

(ii) Timetable for the Review Group meetings

A suitable room must be provided by the unit for the use of the Review Group during the course of the visit. Documents such as management reports, sample exam papers/scripts, or any other relevant material should be made available to the Review Group in the meeting room. Further information on supporting documentation is available from the UCD Quality Office. Catering for the Review Group site visit, will be organised by the unit under review, and again, advice is available from the UCD Quality Office. As previously indicated, most reviews will take place over 2 or 3 days, although reviews of larger Schools or Support Service units may take longer. A typical outline agenda for the site visit may be found at **Appendix 7**.

Guidance on the timetable for the site visit will be provided by the UCD Quality Office. The timetable for the site visit meetings is initially organised by the Head of Unit and/or Chair of the Unit's Co-ordinating Committee, in consultation with the UCD Quality Office and Chair of the Review Group. Individuals and groups who will meet with the Review Group, are selected by the Co-ordinating Committee and confirmed following consultation with the Quality Office, and Chair of the Review Group. The timetable should be finalised, populated with those attending, and forwarded to the UCD Quality Office no later than 1 week prior to the visit. The timetable is then made available to all relevant staff and students by the unit. Students, employers and other users of the unit who meet with the Review Group, are selected by the Co-ordinating Committee and confirmed following consultation with the Quality Office and the Chair of the Review Group. The Unit will be responsible for proposing any additional categories of staff/students or other stakeholders (who do not appear on the draft timetable), who in their view, should also meet the Review Group. **The Unit under review will also be responsible for identifying and arranging for staff/students and other stakeholders to meet the Review Group at the appropriate time** - further advice is available from the UCD Quality Office.

The order of meetings can be altered to reflect the availability of staff/students/employers and other stakeholders on a particular day, with the exception of the final afternoon, which is reserved for the preparation of the first draft of the RG Report. The Review Group, following receipt of the SAR, may request additional timetabled meetings.

In summary, the Review Group should typically (as time allows):

- a) meet with the College Principal, the Co-ordinating Committee, the Head of the unit, a representative group of the staff not on the Co-ordinating Committee, representative groups of unit staff (academic, administrative and technical), current students, including undergraduate and postgraduate students (and former students if possible), users of the unit, employers and other appropriate stakeholders.
- b) visit workrooms, classrooms, laboratories, offices and such other facilities which contribute to the activities of the unit.
- c) complete the first draft of their Report and present the provisional key findings and recommendations to a brief exit meeting of the unit (see below).

When the site visit is over, no member of the unit should be in contact with the Review Group on matters relating to the Self-assessment Report, the site visit or the Review Group Report. If contact has to be made it should be through the UCD Quality Office.

(iii) Exit Presentation

Normally one of the extern Review Group members or the Chair will make the exit presentation to the unit. This will simply be a presentation of the preliminary findings (for example, bullet point headlines on points of commendation and improvement) of the Review Group and will not involve discussion with the Unit, as these initial findings may be modified in the light of subsequent reflection and discussion by the Review Group.

13. The Review Group Report

In keeping with the formative nature of the process, where possible, Review Groups are requested to express their recommendations in a positive and constructive manner that encourages quality enhancement.

The structure of the Review Group Report will broadly reflect that of the unit's self-assessment report (see **Appendix 4**). Comment by Review Group members should primarily be analytical rather than descriptive and refer to either source documentation, oral evidence and/or direct observations. Recommendations should have a reference point in the Report narrative.

Report Completion

At the end of the site visit, the Review Chair should ensure that the Review Group has prepared a reasonably advanced first draft. An agreed timeline for finalisation of the report and sign-off by the Review Group should be set and communicated to the Quality Office. Typically, a final report should be made available no later than **8 weeks** after the site visit, and should be sent to the UCD Quality Office, with emails from all Review Group members, confirming that this is the agreed report.

It is also important that the Review Group should not contact the unit with regard to any matter relating to the review. Any request should be communicated through the UCD Quality Office.

The UCD Quality Office will circulate the report to the unit's co-ordinating committee, for correction of factual error. In addition, the unit should also submit a brief response (not to exceed two pages) relating to the Report recommendations and/or the review process. Please note that this is not an opportunity to open up further dialogue on issues covered during the Review Group site visit. Any subsequent communication between the UCD Quality Office and the unit under review, about any aspect of the Review, shall be via the Head of Unit and/or the Chair of the Unit's Co-ordinating Committee.

The Review Group Report is an independent document prepared by the Review Group members. Rarely is there any requirement to undertake any editing other than, for example, reformatting or correction of factual errors. These minor edits are undertaken in consultation with the Review Group Chair. In exceptional circumstances, however, there may be a need for more considered reflection regarding a phrase or a small section of the Review Group Report. In these exceptional instances, the UCD Quality Office will, in consultation with the Review Group Chair, discuss alternative presentation/phrasing options. As appropriate, a similar consultation process involving the relevant Head of Unit will also apply to draft Unit responses to Review Group Reports. In the event that agreement cannot be reached on alternative presentation/phrasing, the issue(s) will be referred to a panel of former Review Group Chairs/Deputy Chairs, who will adjudicate. A final appeal may be made, via the UCD Quality Office, to the Academic Council Committee on Quality (excluding UCD Quality Office staff) which will make a final determination on the issue(s).

Where a unit does not agree with the content and/or recommendations in the report, these matters should be addressed in the Quality Improvement Plan prepared by the unit, under the headings outlined under section 15 below.

The UCD Quality Office finalises the Review Group Report by correcting any factual errors and appending the unit response as an appendix to the Report. No other amendments are made to the Report by the Quality Office. The Report is now final.

The Director of Quality sends copies of the final Review Group Report to the President, Registrar, and relevant University Officer(s), the Review Group members and any other persons authorised by the Registrar/President. The Director of Quality also sends copies of the final Report to the head of unit for circulation to members of the unit.

14. Publication of Review Group Reports

A copy of the Review Group Report will be considered initially by the University Management Team. The appropriate College Principal/Vice-President will present each report from their domain, to UMT. The Review Group Report will then be considered by the UCD Governing Authority and published on the UCD Quality Office website (www.ucd.ie/quality), in accordance with the Universities Act (1997)/Qualifications and Quality Assurance (Education and Training) Act 2012. Upon acceptance, the Quality Improvement Plan will also be published alongside the Review Group Report (see paragraph 15.4 below).

15. Follow-Up to Quality Review

Follow-up is an integral part of the review process. The decisions on improvement, which are made in the follow-up to self-assessment and review, provides a framework within which each unit can continue to work toward the goal of developing and fostering a quality culture in the University. With the support of the College Principal/Vice-President, each unit is also required, under the Universities Act (1997)/Qualifications and Quality Assurance (Education and Training) Act 2012, to implement each of the recommendations of the Report, unless it would be unreasonable or impractical to do so.

The Quality Improvement Plan (QIP)

15.1 The Head of the unit, on receipt of the Review Group Report and following a meeting with the UCD Quality Office, will establish a Quality Improvement Committee which is representative of staff from the unit. The Quality Improvement Committee will arrange to have a Quality Improvement Plan (QIP) drafted within twelve weeks, based on the Review Group Report findings. Guidelines for the completion of Quality Improvement Plans are available from the UCD Quality Office and/or at www.ucd.ie/quality. The QIP should be developed in consultation with the College Principal/Vice-President. Two QIP templates are available – see *UCD Guidelines for the Preparation and Implementation of the Quality Improvement Plan*: www.ucd.ie/quality. The QIP should usually take the form of short summaries of the action taken/planned, or if actions are not being taken, an explanation provided. The recommendations, with the associated actions taken or planned, may be structured as follows:

- (i) Teaching and learning, research, organisational, administrative and other matters which are completely under the control of the unit
- (ii) Shortcomings in services, facilities or procedures which are outside the control of the unit

- (iii) Inadequate staff levels, facilities and other resources which require capital or recurrent funding. Realistic estimates of the capital and recurrent costs to implement recommendations/ planned action should be included.

It is the unit's responsibility to compile a full response. This means that it must obtain responses to those recommendations relating to other areas of the University, to which actions arising from the report were addressed. For instance, if the report recommended that a lecture theatre needed to be refurbished, it is the unit's responsibility to find out from the Head of Buildings and Services what action has, or will/will not be taken, in response to this recommendation. A realistic assessment of available resources (both at unit and institutional level) should be borne in mind when formulating plans.

It is important that all recommendations in the Review Group Report be addressed. Some recommendations for improvement may appear in the text of the RG Report narrative. Please ensure these are included for consideration. Some recommendations may not be explicitly stated but are implied as consequences of a concern, for example, "the unit has no mechanism to feedback action taken, in response to issues raised by students". These too, should be included in the Quality Improvement Plan.

- 15.2 The Quality Improvement Plan should address all recommendations (and implied and/or other suggestions) in the Review Group Report and includes:
 - (a) recommendations already implemented
 - (b) a list of goals which can be realistically achieved in the following year
 - (c) a list of longer term goals to be achieved, for example, over five years
 - (d) recommendations which the Quality Improvement Committee consider to be unreasonable or impractical: in such instances, the Committee should give reasons for such a conclusion, and should, if possible, suggest alternative strategies for quality improvement.
- 15.3 Upon completion, the QIP should be considered by the College Principal. If satisfied that each recommendation is being addressed appropriately, and that there is sufficient detail in the response, the QIP, with the College Principal's endorsement and/or comments should be sent to the UCD Quality Office.
- 15.4 Upon receipt of the QIP, the UCD Quality Office will arrange to have the QIP considered by the Chair of the Review Group. Other staff may be co-opted as required.

The QIP Group will consider the QIP to determine whether the action taken or planned is appropriate in order to address each of the Review Group Report recommendations.

Units submitting QIPs should ensure that there is sufficient (brief) detail in the planned actions or actions taken under each recommendation, to allow the QIP Group to make a reasonable judgement as to whether or not that action adequately addresses the recommendation. Responses

should not be vague – please see the guidance material for the preparation of QIPs: www.ucd.ie/quality.

If reasonable progress is not made to address the Review Group Report recommendations within the agreed timeframe, the matter will be referred to the Academic Council Committee on Quality to determine what further action should be taken.

The QIP Group will consider the QIP and as appropriate will (i) accept the QIP or (ii) seek additional information from the unit. Upon acceptance, the QIP will be published on the UCD website (www.ucd.ie/quality) alongside the relevant Review Group Report.

A report on QIPs accepted; that have had extensions of time; and those that remain outstanding in a stated period, will be made to the UMT and ACCQ, at least annually.

- 15.5 The QIP should be used to inform School and College level academic and resource planning activities.

Funding for Quality Improvement

- 15.6 Recommendations that require additional funding should be considered in the light of University policy and priorities, having regard to the resources available to the University, College or School, at the time. They may also act as a driver for a unit or college in prioritising and (re-)allocating available resources.

Progress Review

- 15.7 Approximately twelve months after the QIP has been accepted, each unit will be asked to prepare a progress report on the implementation of the QIP actions. The Progress Report should normally be considered by the relevant College Principal who will prepare a brief commentary on the progress that has been made regarding the implementation of the QIP. The commentary, with the Unit's Progress Report, should be forwarded to the Director/Deputy Director of Quality.

Upon receipt of the commentary and Progress Report, the Director/Deputy Director of Quality will convene a progress review meeting. The QIP Progress Report forms the basis of the dialogue at the Progress Review Meeting, however, it will not be published.

- 15.8 The progress review meeting will normally be chaired by the Registrar and Deputy President (or nominee), and will typically include a representative from the Quality Office, a member of the Academic Council Committee on Quality (ACCQ), one of the UCD reviewers involved in the original unit review, and normally a maximum of four representatives from the unit reviewed (one of whom will be the Head of Unit) plus, typically, the relevant College Principal.
- 15.9 The meeting will consider the actions taken by the unit, and where appropriate, other University units, to address the Review Group Report recommendations. In addition, the Progress Review Panel will agree further follow-up meetings as required. The aim of the meeting is to confirm that

all recommendations for improvement arising from the review process, have been or will be, dealt with appropriately, formally bringing to conclusion the review process.

- 15.10 If, at the Progress Review Meeting, it is deemed that insufficient progress has been made against the Review Group Report's recommendations for improvement, the following actions may be considered:
- a. A revised QIP Progress Report will be required within a stated deadline, to reflect a modified action plan recommended at the Progress Review Meeting – the UCD Quality Office will sign-off the revised report, as appropriate;
 - b. A revised QIP Progress Report will be required as set out in 15.10a above, and a further Progress Review meeting held;
 - c. A report of the lack of progress made to implement the Review Group Report recommendations will be made to the Academic Council Committee on Quality (ACCQ) and University Management Team, with recommendations for further action.

It should be noted that the Progress Report and meeting is the last formal step in the quality process, but it is not the last step for the Unit in progressing the Review Group Report recommendations. The Progress Report will act as a starting point for the next review.

- 15.11 The outcome of the progress review meeting for units will be reported to UMT and ACCQ. An Annual Report is also made to the UCD Governing Authority and UCD Academic Council

Appendix 1

Benefits of the Process

- (i) Preparation of the Self-assessment Report acts as a stimulus and provides opportunities for reflection and consultation, enabling units to plan and manage strategically
- (ii) It provides a critical self-analysis of the activities of the unit
- (iii) It helps the unit to identify and analyse its strengths, weaknesses, opportunities and challenges, and allows it to suggest appropriate remedies where necessary
- (iv) It is an opportunity to reflect on key issues/forward plans for the unit
- (v) It shows the quality systems and processes which are already in place and permits an assessment of their effectiveness
- (vi) The unit can identify themes that the review panel might consider
- (vii) It identifies shortfalls in resources and provides an externally validated case for increased allocation or provides the basis for a reprioritisation of existing resources
- (viii) It identifies weaknesses, if any, in procedural, organisational, or other matters, that are under the control of the unit and which can be remedied internally
- (ix) It provides a framework within which the unit can continue to work in the future towards quality improvement
- (x) The findings are validated by external international standards

Appendix 2

University College Dublin

University Internal Periodic Review: Provisional Timeline

Indicative timeline for an Internal Quality Review (of an academic or support unit).

The University will plan to review each academic and support unit within a seven year cycle. The Review schedule is published on the UCD Quality Office website.

Stage 1	Self-Assessment
-10 months (min)	UCD Quality Office initiates the formal process of quality review – e.g. initial briefing provided by UCD Quality Office; agree provisional dates; related procedures discussed.
-10 to 9 months	Unit selects co-ordinating committee in accord with UCD Quality Office guidelines and canvases recommendations for Review Group nominees.
-10 to 9 months	RG selected by UCD Quality Office (following consultation with appropriate College Principal as required).
-8 to 2 months	Unit prepares Self-assessment Report (SAR) including collection of data, surveys etc.
-1 month	SAR sent to Review Group.
Stage 2	Review and Site Visit
	(see example site visit schedule at Appendix 7)
Stage 3	Review Report and Follow-up
+ 2 months	RG Report received by UCD Quality Office and forwarded to unit for comment on any factual error.
+2 to 3 months	RG Report finalised by UCD Quality Office. RG Report submitted to UMT and UCD Governing Authority. Unit prepares a Quality Improvement Plan (QIP), with specific, measurable, achievable, realistic and timetabled actions. UCD Quality Office prepares operational report for Academic Council Committee on Quality (ACCQ).
+3 months	Unit's QIP ¹ sent to UCD Quality Office and considered by Review Group Chair and other staff, as required. UCD Quality Office to track responses to recommendations falling outside the responsibility of the unit under review.
+6 months	Review Group Report considered by UMT and the University Governing Authority. Publication of the Review Group Report on the University website.
+12 months	Progress Review Meeting convened to consider unit's Progress Report on the implementation of the QIP.
+18 months	Follow-up report on the implementation of the QIP presented to University Governing Authority and ACCQ
¹ The QIP should be taken into account in the strategic planning of the unit and other University-wide processes.	

Appendix 3

(See also Section 9 (p.7) of this Document)



University College Dublin

Template for Self-assessment Report

Periodic Quality Review: Self-assessment Report

UCD Unit: _____

Month 2013

This document presents the format of the Unit Self-assessment Report and is available from the UCD Quality Office by email or at www.ucd.ie/quality/ under 'Academic Unit Reviews'.

Under each chapter heading a series of questions are included which the Unit should take into consideration when preparing the Self-assessment Report. Please note, this Appendix is intended as an aide-memoire and the question prompts are not exhaustive. Some of these questions may not be relevant to the tasks performed in your Unit. On the other hand, the Unit should consider any relevant issues which are not covered by these questions.

Please note that prior to, or during the site visit, the Review Group may request information from the unit, in addition to those outlined in Appendix 4, such as management reports, financial or statistical information. Units should have available for the Review Group, copies of relevant reports compiled in the previous five years as well as the current unit summary budget. The Review Group may also request interviews with individuals who have not been scheduled in the timetable.

Academic Unit Co-ordinating Committee

List the name and grade of each member of the Co-ordinating Committee, Chair first.

Brief Methodology

This should include, for example:

Number of meetings held by the Co-ordinating Committee

Allocation of tasks

Level of communication with the unit staff not on the Co-ordinating Committee

The Self-assessment

Page

1. Introduction and Context
2. Organisation and Management
3. Staff and Facilities
4. Teaching, Learning and Assessment
5. Curriculum Development and Review
6. Research Activity
7. Management of Quality and Enhancement
8. Support Services
9. External Relations
10. Summary of SWOT Analysis and Recommendations for Improvement
11. Appendices

NB: As a general guide, each section (excluding appendices) should aim to be no longer than 3 - 4 pages.

1. INTRODUCTION AND CONTEXT

Please outline the context of the unit, highlighting the major developmental milestones, including the development of the programmes offered, noting how they relate to, for example, the Mission and Strategic Plan of the University and the Education and Research Strategies. What particular strengths and characteristics define the School or discipline?

The aim of this section would include:

- assessing the coherency of the unit's strategy for the future
- identifying factors which have contributed to the success of the unit
- identifying factors which have inhibited or are likely to inhibit the success of the unit
- commenting on the adequacy of the unit's risk analysis processes and risk management
- monitoring the implementation of the institutional strategies and policies

General Prompts

- What evidence do you have that unit strategies, policies and processes are in harmony with University Strategies, Policies and Guidelines?
- What is your strategy for teaching and learning, curriculum development and research? Are they complementary?
- What factors have contributed to and/or inhibited the success of the unit?

2. ORGANISATION AND MANAGEMENT

Information should be provided in the SAR on committee structures within the unit; mechanisms for budget allocation, workload measurement and assignment; means of communication with staff and students; relations with College and Programme offices and other administrative and service units in the University.

The aim of this section would include:

- assessing the performance of the unit against its own planning statements, strategic plan and the University Strategic Plan
- assessing the effectiveness of the unit's formal internal organisation and informal practices
- assessing the interaction of the unit with University structures

General Prompts

- How is the unit organised?
- Are the communication mechanisms effective? What evidence is there? Can they be improved?
- Could the organisation of the unit be improved? Are synergies realised?
- Are key staff roles and office functions clearly understood?
- How do workloads in the unit compare with those say, in other countries e.g. UK, Europe, USA?

3. STAFF AND FACILITIES

Reports should contain summary profiles of all staff (usually in appendices); a description and analysis of staff composition and status, including gender balance and age profile; financial and physical facilities available to the unit.

How are professional development needs of staff systematically identified and supported, particularly in relation to both the individual and the skill needs of the unit? The Report may also briefly catalogue academic and non-academic staff participation in professional development activities; evaluates the performance management systems in place; assesses the involvement of academic staff in teaching development activities; and identifies where improvements should be made.

The aim of this section would include:

- evaluating the adequacy of current resources
- reviewing the effectiveness of the unit's use of available resources
- exploring the ways in which the unit promotes staff development

General Prompts

- How do staff keep abreast of the latest thinking in their subject, educational technology and pedagogy? Does this rely on individual motivation and interest or is there a unit plan or strategy?
- What induction is offered to new staff?
- What professional development activities are offered to non-academic staff?
- Are the learning resources for the programmes poor/adequate/good? How are they managed to ensure that they remain or move towards being good or excellent?
- To what extent is teaching, learning and research constrained by the availability of resources and support provided at institutional level?
- Are the physical facilities sufficient to support the unit's research, teaching and learning activities?

4. TEACHING, LEARNING AND ASSESSMENT

The Report should describe and analyse all taught programmes, teaching and learning evaluations, feedback from student questionnaires, analysis from external examiners reports and Statutory and Professional Bodies. Student statistical data from all programmes should also be provided. Examples of assessments, student questionnaires, minutes of Staff/Student Consultative Committees and marked scripts should also be made available.

The aim of this section would include:

- exploring the ways in which the unit has generated, considered and acted upon feedback from students; is there scope for improvement? How?
- exploring the unit response to reports from external examiners and Professional Statutory Bodies – how have these been used to enhance provision (examples)? Could more be done?
- discussing the unit's use of relevant external and internal benchmarks in the design and delivery of its programmes (for example the Qualifications Framework, University Teaching and Learning Strategy)
- admissions – quantity/quality of student intake, geographical, socio-economic distribution; also distribution of gender, mature age and where appropriate, disability and ethnic minority
- discussing the links between teaching and research activity

General Prompts

- How does the unit know it's teaching methods promote student learning? What evidence is there?
- What evidence is there that teaching is of a high standard? What mechanisms are employed to collect feedback – questionnaires? Peer Review? How is feedback on teaching quality processed?
- What do the student programme statistics tell you about the match between intake profile, assessment criteria and student achievement? If they show areas of concern what action has been taken (or will be taken)?
- Does the assessment criteria demonstrate the achievement of the intended learning outcomes? What evidence is there to support this?
- How are students informed about assessment requirements, submission deadlines, etc.
- Are the academic and other supports given to students satisfactory? If so, explain why - if not, what is being done to improve it?
- If things go wrong in a module or programme how and when would this be known?

- What does the unit consider to be good practice in its provision? What evidence is there? Is there evidence that programmes have been enhanced by the sharing of good practice?
- Is the feedback given on formative assessment adequate? Are students happy with it? How does the unit know?
- How does the unit consider feedback from external examiners?

Where factual, descriptive information is necessary – e.g. samples of questionnaires or student work, this is best presented in annexes, along with statistical data on the student profile. Essential statistical data would include:

- Staff-student ratio
- Intake profile – age, gender, entry qualifications/points
- Level of applications for entry against acceptances
- Progression statistics – number of students progressing, repeating, transferring, withdrawing and completing at each level for all taught and research programmes

The SAR should present an evaluation of this data as evidence to support the progression and achievement of students.

5. CURRICULUM DEVELOPMENT AND REVIEW

Details of programmes and modules that are provided by the unit should be included, and reference made to the positioning of each qualification within the National Framework of Qualifications. The unit should also describe the processes by which the curricula of its programmes are developed and reviewed on a regular basis. The benchmarking of the programmes against similar programmes elsewhere in Ireland and internationally is an important option. Units should also describe how all stakeholders (internal as well as external), are specifically involved in this review process and how often this is undertaken.

The aim of this section would include:

- considering the continuing appropriateness of the unit's programme specifications with particular attention to curriculum content and learning outcomes
- commenting on the quality of educational provision and the standards of academic awards
- commenting on the academic coherency of the programmes

General Prompts

- Why is the curriculum constructed and presented in this way? Does it promote progression in student learning? Does it facilitate the achievement of intended learning outcomes?
- What evidence does the unit have that standards of the programme are appropriate?
- Has the unit mapped together the curriculum, learning outcomes, and assessments? Are there any gaps or significant overlaps? If so, what changes are planned and when?
- Does the unit have a formal process to evaluate and review modules/programmes? How have these processes improved provision?

6. RESEARCH ACTIVITY

The Report should provide evidence of research activity for the previous three-five years, and provide brief outlines of the research interests and summarised outputs of each staff member. Data provided should include information on all publications, research grants obtained, research degrees awarded, both Masters and PhD, and the Research Strategic Plan for the unit.

The aim of this section would include:

- assessing the coherency of the unit's research strategy
- assessing the degree to which the unit promotes a research culture
- assessing the management of the unit's research activity
- discussing the links between research and teaching activity
- commenting on the strengths and challenges of the unit's research output
- assessing the unit's research performance in relation to those that it sees as its national and international peers
- commenting on the levels of research grant income and research productivity
- commenting on the extent to which the unit engages in commercialisation and knowledge transfer activity where that is applicable
- assessing the unit's performance in attracting and supporting doctoral students
- commenting on the effectiveness of the support provided for probationary staff and new researchers

Information provided should cover the following:

(Note: Not all the following elements may be relevant for all academic areas, and additional elements may of course be added.)

Research Strategy and Plans

The goals, actions and performance indicators selected by the unit and their implication; analysis of stakeholder requirements; benchmarking partners selected and criteria for comparison; etc.

Publications

Number of publications for the unit; the ratio of publications versus staff complement; the quality of publication outlets (e.g. journal impact factors, etc.); number of citations for staff within the unit; action plans for change; etc.

PhDs

Number of PhD and research Masters Students within the unit; ratio of research students to staff complement; PhD completion rates; number of Post-docs within the unit, etc.

Research Income

Annual research budgets of the unit; research projects currently ongoing; research proposals in progress; sources of income (e.g. EU vs. National); etc.

Staff Engagement

Appropriate engagement of academic staff in research; individual research work plans as appropriate; work load balance between research and teaching; research informed teaching; etc.

Impact and Related Activities

Public impact of research including conferences, events, patents, license agreements, company spin-offs, exhibitions, documentaries, industry interaction, etc. Contribution to the disciplines of the school or institute e.g. membership of research councils, grant awarding bodies, positions of esteem, editorship (or board member) of prestigious journals, external examiner for research degrees, membership of professional association committees, other prizes and awards.

Research Institutes (RIs) (if relevant)

Explicit comment should also be made on the School's relationship with relevant RI's (if any) e.g.

- a) consistency of mission and strategic direction
- b) shared perspective and ability to leverage each other's strengths to deliver goals
- c) effectiveness of current University structures and support arrangements for RI's, from a School perspective

Commercialisation and Knowledge Transfer Activity

Outline and comment on the level of activity by the Unit and the opportunities/challenges to engaging in this activity.

General Prompts

- What is the publication rate in the unit and how does it compare with international peers?
- How does the size of the unit affect the rate of publication? Does the rate reflect the extent of the research activity of the staff? Are publications submitted to the full rigours of peer review in internationally recognised peer reviewed journals?

- Comment on the level of take-up of sabbatical leave in the unit.
- Are the research support structures in place adequate?
- If appropriate, how effective is the relationship between the School and relevant Research Institutes?
- What is the level of research funding? What are the sources of funding?
- Does the unit regularly monitor the effectiveness of research student supervision and the outcome of research degree examinations, and with what result?
- What provision and support is given to research students?
- What is the unit's overall plan for graduate recruitment?
- What is the staff/student ratio in graduate research?
- What is the level of interaction between staff and postgraduate students to discuss research e.g. regular research seminars?
- What is the level of engagement in commercialisation and knowledge transfer?

7. MANAGEMENT OF QUALITY AND ENHANCEMENT

What mechanisms exist to improve the quality of the activities of the unit with particular reference to teaching and learning and enhancing the quality of research?

The aim of this section would include:

- providing assurance about the quality of educational provision and standards of academic awards
- considering the effectiveness of current monitoring processes – are the processes applied consistently across the unit; what evidence is there? How do they contribute to quality improvement?
- discussing the unit's approach to innovation and enhancement
- commenting on levels of participation in internal and external training and quality enhancement events

General Prompts

- How are the various quality processes (e.g. external examiner reports, module evaluation, staff/student consultative committees, etc) integrated to enhance provision?
- Discuss how good practice is identified and disseminated within the unit and identify any particular elements of good practice in teaching and learning within the unit.
- Outline, if relevant, any Professional accreditation required by the School.

8. SUPPORT SERVICES

This section should detail the views of the unit on the effectiveness of the support services in the University, such as the Library, IT support, Registry, Career Development Centre, Buildings, and facilities. Units may include reference to their involvement in collaboration with the services with the objective of assisting their improvement.

The aim of this section would include:

- assessing how effective the support services are
- commenting on how the unit plans and manages learning resources – both local and central

General Prompts

- What is the acquisition and updating policy for texts and journals?
- How does the unit work with the Library/IT to match texts, periodicals and IT support to the needs of the curriculum and the overall teaching strategy?
- Are the arrangements for the training and induction of students adequate? Is there scope for improvement?
- How effective are the central support services in supporting the activities of the unit? Are there any improvements that could be made?

9. EXTERNAL RELATIONS

The unit should describe its relations with the wider community, with other educational institutions in Ireland and abroad, private organisations, public agencies and professional and statutory bodies and employers. Evidence of the views of relevant external stakeholders should be provided.

General Prompts

- Are there satisfactory arrangements for participation by staff and students in Socrates and other staff/student exchange programmes?
- Are there satisfactory arrangements for monitoring placements?
- If appropriate, do employers have an input to curriculum development?

10. SUMMARY OF SWOT AND RECOMMENDATIONS FOR IMPROVEMENT

This chapter should include an overall analysis of the unit's activities.

Strengths should be emphasised, effective unit responses to concerns and opportunities considered, and challenges discussed. Strategies for improvement should be formulated.

Since the goal of this process is quality improvement the formulation of strategies and recommendations for improving the work of the unit should be highlighted.

11. APPENDICES

For Example:

- UCD Organisational Structures
- Unit Planning Documents
- UCD/Unit Committee Structures
- Survey Data
- Statistical Summaries
- Sample Questionnaires
- Key Performance Indicators

(See also Appendix 4 overleaf)

Appendix 4

Additional SAR Related Information

Appropriate documents should be included with the SAR or made available in the Review Group meeting room during the site visit to complement the SAR. Examples are given below:

(i) Completed Questionnaires

Copies or samples of questionnaires completed by students, academic, administrative and support staff, and the analysis of results of such surveys conducted should be included with the Report, but, alternatively, these may be made available to the Review Group for consultation during the visit.

(ii) Appendices to the SAR

These may include:

- School Plan
- Workload Model
- Sample programme specifications for programmes within the scope of the review
- Examples of Programme/Student handbooks
- Where appropriate, Annual Review/Monitoring Action Plans plus a record of the outcomes of the actions taken for the previous three years
- Previous professional and statutory body reports plus responses (where relevant)
- Diagram showing the School's committee structure for Teaching and Learning/Research, and any other committees
- Relevant statistical data (see below)
- Examples of External Examiner Reports plus responses
- Any previous review reports

(iii) Other Related Information

Quantitative Data

- Statistics on student achievement
- Degree classifications
- Entry qualifications
- Progression and completion rates
- First employment destinations

Qualitative data

- Student feedback
- Staff feedback
- External Examiners Reports and responses
- Accreditation and Monitoring reports of Professional and Statutory Bodies
- Reports of previous internal reviews
- Annual review/monitoring reports

Programme Information

- Programme specifications
- Module descriptors
- Prospectuses
- Handbooks

School Information

- Teaching and Learning/Research Strategy

- Organisational structure
- Committee structures
- Sample committee minutes
- Budgets
- Space allocation

College Information

- College Strategic Plan
- Organisational structure
- Teaching and Learning/Research Strategy
- Committee structure
- Sample committee minutes

University Information

- The University Strategic Plan
- Teaching and Learning/Research Strategy
- Documents relating to academic procedures and quality

Please remember that the Review Group can request copies of particular documents that have been referred to in the text of the SAR. Also note that prior to, or during the site visit, the Review Group may request additional information, from the Unit, such as management reports, financial or statistical information.

Assistance is available to units from the Director of Institutional Research (maura.mcginin@ucd.ie) in compiling questionnaires and statistical data as part of the review process.

Appendix 5

University College Dublin

Nomination of External Reviewer for an Academic/Support Unit Review

Name of Unit to be reviewed:	UCD
<hr/>	
Title, Name and Position of Proposed External Reviewer:	<hr/>
Contact Details:	Address
	<hr/>
	<hr/>
	Email
	<hr/>
	Telephone
	<hr/>

Brief details of relevant professional experience (please provide sufficient details to enable an informed decision to be made)

Please outline any formal links/relationship the Unit or individual staff members in the unit have had with the proposed reviewer

To the best of my knowledge I confirm that the nominee has had no formal links with the unit during the last three years.

Signed: _____ (Head/Director of Unit)

Date _____

Please attach any relevant supporting documents (website information/research profile/professional profile) and submit to: Orla Dermody, UCD Quality Office, Email: orla.dermody@ucd.ie

Appendix 6

University College Dublin

Criteria to be considered when selecting external Review Group members

- Gender representation
- Depth of reviewer expertise within the subject area
- Comfort in speaking and report-writing in the English language
- Extent of management experience in comparable units and/or at institutional level
- Affiliation with world-class units and institution(s)
- Representation of the breadth of knowledge 'strands' within the subject area
- External profile within the subject area - experience representing the discipline on groups or within agencies at national or international levels

Exclusions

- Recent role as Subject External Examiner within UCD
- Conflict of interest regarding any relationship with the unit or associated staff
- Current partner in research collaborations with the unit or associated staff

Additionally

- Any relationship the unit has with potential nominees must be declared by Head of unit prior to selection of Review Group

Appendix 7



Indicative Review Visit Timetable

[Name of Unit – Dates of visit]

Please note:

- (i) The draft site visit timetable should be developed **in consultation with the UCD Quality Office**.
- (ii) This timetable may be amended to reflect the specific requirements of the unit under review and/or the Review Group.
- (iii) There should be a break of **at least 10-15 minutes** between each meeting to facilitate ingress/egress of staff and to allow the reviewers time to prepare for the next meeting.
- (iv) The final site visit timetable will be confirmed by the UCD Quality Office in consultation with the Review Group Chair. Meeting dates/times should not be confirmed with staff/students who will meet with the Review Group until written (usually email) confirmation is provided by the UCD Quality Office.

Pre-Visit Briefing Prior to Site Visit

- 17.00-19.00 RG meet at hotel to review preliminary issues and to confirm work schedule and assignment of tasks for the following two days.– **RG and UCD Quality Office only**
- 19.30 Dinner hosted for the RG by the Registrar and Deputy President or nominee – **RG, UCD Deputy President and UCD Quality Office only**

Day 1: Date

Venue: Room/Building

- 09.00-09.30 Private meeting of Review Group (RG)
- 09.30 – 10.15 RG meet with **College Principal**
- 10.15-10.30 Break
- 10.30 – 11.15 RG meet with **Head of School** (optional: and other members of senior staff nominated by the Head of School)

Name

-
-
-
-
-

Position/Role

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-
-
-
-

11.15 – 11.30 Tea/coffee break

11.30 – 12.15 RG meet with **SAR Coordinating Committee**

<u>Name</u>	<u>Position/Role</u>
•	•
•	•
•	•
•	•
•	•

12.15-12.45 Break – RG review key observations and prepare for lunch time meeting

12.45-13.45 **Working lunch (buffet)** – meeting with employers (and/or other external stakeholders)

<u>Name</u>	<u>Position/Role</u>
•	•
•	•
•	•
•	•
•	•

13.45-14.15 RG review key observations

14.15-15.30 RG meet with **representative group of academic staff** – primary focus on Teaching and Learning, and Curriculum issues.

<u>Name</u>	<u>Position/Role</u>
•	•
•	•
•	•
•	•
•	•

15.30-15.45 RG tea/coffee break

15.45-16.30 RG meet with **support staff representatives** (e.g. administrative / technical etc)

<u>Name</u>	<u>Position/Role</u>
•	•
•	•
•	•
•	•
•	•

16.30-16.35 Break

16.35-17.05 RG meet **UCD Programme Dean(s)**

17.05-17.15 Break

17.15-18.15 **Tour of facilities**

18.15 RG depart

Day 2: Date

Venue: Room/Building

08.45-09.15 Private meeting of the RG

09.15-09.55 RG meet e.g. **Head of Academic Services, UCD Library**

09.55-10.10 Break

10.10-11.00 RG meet with a representative group of **postgraduate students** (taught and research) **and recent graduates** (PG and UG) – parallel meetings

Name

Year/Programme

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11.00-11.15 RG tea/coffee break

11.15-12.15 RG meet with the **School Research Committee** (and other staff members nominated by the HoS)

Name

Position/Role

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-

12.15-12.30 Break - RG review key observations

12.30-13.15 Lunch – Review Group only

13.15-14.00 RG meet with **representative group of undergraduate students**

Name

Year/Programme

-
-
-
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-

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-

14.00-14.15 RG private meeting - review key observations

14.15-15.00	RG meet with College Finance Manager and Head of School to outline School's financial situation												
15.00-15.15	Break												
15.15-16.15	RG meet with recently appointed members of staff												
	<table> <tr> <th><u>Name</u></th><th><u>Position/Role</u></th></tr> <tr><td>•</td><td>•</td></tr> <tr><td>•</td><td>•</td></tr> <tr><td>•</td><td>•</td></tr> <tr><td>•</td><td>•</td></tr> <tr><td>•</td><td>•</td></tr> </table>	<u>Name</u>	<u>Position/Role</u>	•	•	•	•	•	•	•	•	•	•
<u>Name</u>	<u>Position/Role</u>												
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•	•												
16.15-17.15	RG available for private individual meetings with staff												
17.15-18.00	RG private meeting – review key observations/findings												
18.00	RG depart												

Day 3: Date

Venue: Room/Building

09.00-09.30	Private meeting of RG
09.30-10.30	(Optional) RG meet with Head of School and/or specified University staff to clarify any outstanding issues <u>or</u> begin preparing draft RG Report
10.30-10.45	Break
10.45-12.30	RG continue preparing draft RG Report
12.30-13.15	Lunch
13.15-15.30	RG finalise first draft of RG Report and feedback commendations/recommendations
15.30-15.45	Break
15.45-16.00	RG meet with Head of School to feedback initial outline commendations and recommendations
16.15	Exit presentation to <u>all available staff of the unit</u> – usually made by an extern member of the Review Group (or other member of the Group, as agreed) summarising the principal commendations/recommendations of the Review Group
16.45	Review Group depart