

School Quality Improvement Plan (2017-2020)

*Developed in response to
Review Group Report 2016*



UCD School of Medicine

Scoil an Leighis UCD

Introduction and Overview

In this document, the UCD School of Medicine outlines its Quality Improvement Plan for 2017-20. Informed by the Report of the Quality Review Group (2016), the Plan lists the recommendations of the Review Group, and how it proposes to address each of these. It indicates whether each should be addressed within one or five years, or whether a recommendation has already been implemented. For each recommendation, the Plan also highlights whether successful implementation rests with the School, outside the School or whether new investment / resources are required. Appendix 1 outlines the School's initial response to the Review Group Report, which provides important clarification and additional detail in respect of some of the key recommendations.

The Plan was written by the School Management Team, under the guidance of the School's Director of Quality Improvement, Prof Walter Cullen and Director of Strategy, Mr Paul Harkin and was approved by the Dean/Head of School and by the School Executive Committee in March 2017.

Categories:

1. Recommendations concerning academic, organisational and other matters which are entirely under the control of the unit
2. Recommendations concerning shortcomings in services, procedures and facilities which are outside the control of the unit
3. Recommendations concerning inadequate staffing, and/or facilities which require recurrent or capital funding

Timescale:

- A. Recommendation already implemented
- B. Recommendations to be implemented within one year
- C. Recommendations to be implemented within five years
- D. Recommendations which will not be implemented

RG Recommendation	Category	Action Taken / Action Planned / Reason for Not Implementing	Time-scale
A. Organisation and Management			
Commendations			
2.6 The School has developed a distinctive global brand, reinforced through an impressive School prospectus and marketing strategy. UCD Medical School is an internationally recognised entity.	N/A	N/A	N/A
2.8 The School has developed a stable structure that facilitates the focus of the School around excellence in clinical and pre-clinical disciplines, contributing to its high international ranking.	N/A	N/A	N/A
2.9 There is a collegial spirit amongst faculty and staff who have shown considerable resilience through multiple changes to University, College and School structures.	N/A	N/A	N/A
2.10 The School Strategy is supported by committed academic leads (Division and Section Heads), who drive the Strategy through an effective committee structure which seems to be well understood by them. This includes the development of a good Teaching and Learning Committee structure to deliver and strategically plan courses, led by an Associate Dean of Programmes & Educational Innovation and a strategic focus for research themes led by the Associate Dean for Research and Innovation.	N/A	N/A	N/A
2.11 The School has made successful efforts at broadening reach and integration of communication systems, not only through committee structures, but also through the use of social media, newsletter and a redesigned website. This has contributed to a strong identity as well as connecting adjunct faculty, alumni and clinical/outreach staff to the School.	N/A	N/A	N/A

RG Recommendation	Category	Action Taken / Action Planned / Reason for Not Implementing	Time-scale
2.12 Effective strategic planning has given rise to impressive growth in fee income from diversifying student cohorts, graduate course work programmes and research funding.	N/A	N/A	N/A
Recommendations			
2.13 While the School has a good international Marketing Strategy, it should consider further increasing its international market for undergraduate/graduate/research higher degree programmes, especially in growth markets such as China and India.	3	The School has substantial international student recruitment in South East Asia and North America. There is limited capacity for further growth within Medicine UG degree but with additional resource investment it would may be possible to grow international intake to BHLS, Radiography and some GR programmes	C
2.14 The School should consider developing structures to cope with wider health care reform and sustain readiness to adapt to a system in transition.	1	The School maintains an ongoing vigilance with respect to changes in Irish healthcare system. It remains to be seen if the hospital group structures will support significant academic activity. Hence the School's priorities remain to revitalise the Dublin Academic Medical Centre initiative, build an effective Primary Care Research network and support IEHG development.	C
2.15 Relationships between associated institutes and the School need to be clarified. This includes clarification around whether the resourcing of institutes should occur at the School, College or University-level. In the interests of stability and continuity with the current momentum of bridging the work of research institutes with that of the School (through, for example, the Research and Innovation Committee), the Review Group recommends that the University gives this consideration as a matter of priority.	2	The School strongly endorses this recommendation and the Review Group's recommendation that the University should consider these relationships as a matter of priority. It is the School's consistent view that Research Institutes or Centres should be as integrated with their affiliated Schools as possible (and in some cases, such as the Charles Institute or Systems Biology Ireland, fully integrated into the School), as this provides the best opportunity to maximise synergies and ensures that our research ambition is fully realised in a sustainable manner. The current arrangements where Research Institutes are independent during their initial period of funding, but become largely unfunded and under-resourced thereafter, is not in the best interests of either the Research Institutes or the Schools.	B

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2.16 The School should develop a space allocation and capital works development plan.	1	The School will update its space allocation and capital development plans (as it has done biennially since 2008) during 2017.	B
2.17 Further improve strategic co-ordination across the School by:			
<ul style="list-style-type: none"> The introduction of an academic lead for graduate taught programmes to monitor the diverse programmes on offer. 	1	The School has appointed an Associate Dean for Graduate Taught programmes.	A
<ul style="list-style-type: none"> The appointment of a senior faculty lead to oversee supports for Research degree students including both MD and PhD degree students. 	1	The School has assigned a senior faculty member with responsibility for Graduate Research MD and PhD. The School will invite the Associate Dean for Research & Innovation to review if additional supports are necessary for both MD and PhD programmes.	B
<ul style="list-style-type: none"> Clarifying the roles of Head of Subject, Head of Section and Head of School. 	1	The roles of Head of School, Head of Subject (academic oversight) and Section Leader (resource allocation) are clearly defined within the School's governance structures. The School will ask Section Leaders to re-iterate these definitions to all staff so that they are clearly understood and best practice disseminated.	D
<ul style="list-style-type: none"> Providing section heads with more authority, where possible. 	1	Currently Section Leaders have clearly defined authority. However, the Head of School will examine how this works in practice with each Section Leader to explore how the role can further develop and to consider what additional supports are required.	A
<ul style="list-style-type: none"> Ensuring clearer communication of future strategic development and priorities to all School faculty and staff. 	1	The School has sought to communicate effectively its strategic development priorities to all staff by formally publishing its strategic plan and by making strategic developments the focus of All Staff School meetings. The School will seek ways to ensure that there is better attendance at the latter.	A
<ul style="list-style-type: none"> Improving transparency of the workload model implementation at section level. 	1	Academic workload is managed and communicated to academic staff at a Section-level. The School will request that all Sections formally address this subject at a Section meeting during the current calendar year	A

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<ul style="list-style-type: none"> Providing clarity around staff recruitment and prioritisation, resource allocation/division of School budget to sections. 	1	<p>The School has maintained a multi-annual staff plan since 2006, which is periodically reviewed with the Head of School in consultation with the relevant Section Leaders. Hence, we believe that there is adequate transparency with respect to the planned School positions. However, as we discussed with the Review Group, the University (College, Research Institutes, VP for Research, Innovation & Impact) has over recent years, advanced several strategic research recruits in response to funding opportunities which arise.</p>	D
<p>2.18 Further improve communication systems across the School. This could include:</p>		<p>As part of the School's regular schedule of All Staff School meetings, the School will ensure that a regular meeting will focus on:</p> <ul style="list-style-type: none"> Teaching & Learning (i.e. Chapter C) Research & Innovation (i.e. Chapter D) International Affairs, External Relations & Alumni (i.e. Chapter G) School Development, Strategy & Governance (i.e. Chapter A, B, E, F) 	
<ul style="list-style-type: none"> Setting up a forum/group for co-ordination of multiple quality review/accreditation processes; 	1	<p>The School envisages that this action will be addressed effectively through the re-structured all School meeting agenda.</p>	D
<ul style="list-style-type: none"> Instituting a formal committee structure to co-ordinate e-Learning initiatives, building on the excellent work already being done; and 	1	<p>The School already has a formal committee structure to coordinate e-learning initiatives and to disseminate best practice. This group meets periodically under the auspices of the Teaching & Learning Strategy Group.</p>	D
<ul style="list-style-type: none"> Establishing a forum for support staff to improve lines of communication between the range of support functions and the School management/executive committee. 	1	<p>The School will consult all support staff to ascertain if there is support for this proposal and, if there is sufficient interest, will support the creation of such a forum.</p>	B

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B. Staff and Facilities			
Commendations			
3.11 Faculty and staff are commended on their commitment to the School of Medicine, and to UCD; specifically their continued commitment and achievement through the economic downturn. A collegial environment has been created with all staff working towards the same goal, at a time of University restructuring.	N/A	N/A	N/A
3.12 The Review Group was very impressed by the high quality of facilities available in the UCD Health Sciences Centre and the associated Conway and Charles Institutes and Systems Biology Ireland. The research facilities available in these institutes are world class.	N/A	N/A	N/A
3.13 Clinical training is provided by clinical staff in hospitals and in the community. The Review Group was impressed by the organisation and engagement of adjunct faculty.	N/A	N/A	N/A
3.14 The Review Group commend the creation of, and rationale for, a Teaching Innovation space in the UCD Conway Institute and the appointment of dedicated staff, including an educational technologist, to consolidate work in this area.	N/A	N/A	N/A
Recommendations			
Staff			
3.15 Many processes and organisational roles are critically dependent on a small number of, or individual, faculty or staff, with associated risks. These critical areas should be	1, 3	The School will review 'Key Person' roles across the School and will seek additional resource (or to appoint deputies where possible) subject to support by the University.	C

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identified, and additional faculty or staff appointed (or deputies created) to cover in the event of illness. Examples include IT/eLearning development and the organisation of clinical teaching on sites off campus.			
3.16 The balanced approach of the School of Medicine recruitment strategy should be maintained and, within the School, there should be transparency regarding staff recruitment decisions. More widely, appointments that balance teaching and research requirements in the School should be prioritised. Consideration should be given to a clinical appointments track to support this.	2	The School strongly supports the contention that there needs to be a balance between teaching and research requirements, and that these priorities are best set by the School. We support the view that a clinical appointments track should be developed. Such positions have been included in the School's staff plan, but development has been constrained in recent years due to budget restrictions. We also note that the establishment of such posts is not entirely within the gift of the University, as they require approval by the Health Services Executive (in the case of publicly funded hospitals) or private hospital partners. However, when such partnership funding is agreed with clinical partners, it is strategically of the utmost importance that the University co-invest in such posts, including the required infrastructure to support them.	C
3.17 Given the size of the School, a dedicated School level strategy is required to tackle inequalities in gender representation at senior level.	1	The School will develop a dedicated School-level strategy to tackle inequalities in gender representation at senior levels, incorporating University-level strategies in this domain.	B
3.18 The new University promotion processes should ensure:	2	Not within the School's control.	-
<ul style="list-style-type: none"> Promotion opportunities for members of administrative staff. 	2	Not within the School's control.	-
<ul style="list-style-type: none"> That faculty promotion criteria reflect the excellence and innovation in the teaching-intensive and clinical staff in a similar manner to research-intensive staff. 	2	Not within the School's control.	-
3.19 The University should consider renaming "support staff" to "professional staff" to give due recognition and valuing of their management and other technical skills and qualifications.	2	This matter has been the subject of some discussion at University Senior Management who have determined that the term 'Faculty and staff' is the preferred nomenclature. We note that the School	D

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		generally references all 'support staff' as 'Staff' and seeks to avoid making unnecessary distinctions between staff.	
3.20 Strategies should be explored and put in place to underwrite and sustain clinical teaching and protect clinical teaching time. This could include consideration of formalising financial or mutually beneficial arrangements.	1	The School will consider such strategies in the context of ongoing relationship development with clinical partners and subject to budget allocation. The School agrees that it is critically important to protect this clinical teaching capacity and will continue to advocate for University resources to be dedicated to clinical sites as appropriate.	C
3.21 The School should conduct a survey of specialist lecturers to ensure that the induction programme is meeting their needs. The School should also ensure the following supports are in place for specialist lecturers based in the teaching hospitals:	1	The School will formally survey our Special Lecturer/Clinical Tutor cohort to ascertain the suitability and future development needs of our Induction programme.	B
<ul style="list-style-type: none"> • An academic-co-ordinator. 	-	-	-
<ul style="list-style-type: none"> • A more comprehensive tailored induction programme. 	-	-	-
<ul style="list-style-type: none"> • An appropriate management of their career development including mentorship, clarity around teaching responsibilities, continuing professional development (CPD) and supports for research associated CPD. 	-	-	-
3.22 The Review Group recommend that the School of Medicine consider the introduction of some form of reward and recognition system for excellence in teaching and research.	1	Teaching awards have been in place in the School for over 15 years. Undergraduate students vote for their teacher of the year and the awards are presented at the Annual Gala Dinner which is attended by staff and final year students in Radiography, Medicine and BHLS. Since 2012, the School has also introduced, an award for our technical staff and an award for our Administrative staff which acknowledge the outstanding and long term contribution to the School made by an Administrative and/or Technical Staff member.	A
3.23 The Review Group recommends that the new University Staff Development and Performance Management System	2	Not within the School's control	-

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should include mentoring for faculty and staff. The process should support and develop faculty and staff, aid career development and facilitate promotion.			
3.24 The School should engage with the new Staff Development and Performance Management System and the Review Group recommends the appointment of a senior faculty lead (for example, Assistant Dean of Equity and Staff Development) to implement the programme at School level.	1	The School will proactively engage with the new Staff Development & Performance Management System once it is introduced. The School does not believe that it is necessary/appropriate to appoint a School 'Assistant Dean for Equity & Staff Development' as responsibilities for staff development and management are devolved to Section Leaders.	D
3.25 Support for an international office function at School level should be considered, given the increasing numbers of international students across the School.	1	The School already has established a dedicated School International Office to support the significant number of international students.	D
Facilities			
3.26 The University has a comprehensive Campus Development Plan. In conjunction with the UCD Vice-President for Campus Development and UCD Estates Services, the School should develop and implement a School-specific streamlined and planned system for upgrading facilities and securing capital works funding.	1	The School has previously developed detailed capital investment priorities to support existing and expanded teaching and research infrastructure, both on and off campus. As noted above, the School aims to update / re-state this plan during the current calendar year.	B
3.27 The Review Group recommends that the School, in conjunction with the College and University, develop an investment strategy to improve/expand student facilities on hospital and other clinical sites and explore the possibility of investment to enable clinical attachments in the private wards in the main hospitals.	2	The School notes this Review Group's recommendation and will seek to incorporate these considerations into the School's updated Capital Development Plan subject to resource allocation by the University.	B
3.28 The space allocation to the Radiography Division is inadequate and should be addressed as a matter of priority. The allocation of space in the UCD Health Sciences Centre was not consistent – for example, senior staff shared office	2	The School notes the space issues within, in particular, the Radiography & Diagnostic Imaging Section. We will liaise with the College and other Schools to investigate if additional space can be secured that is contiguous with the current Section location.	B

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space in Radiography but there was empty space elsewhere.			
3.29 Students reported that there was inadequate study space, especially during out of standard University hours and term time. The Review Group recommend that the School consider reallocation of space to this end.	2	<p>The School has developed significant additional student study spaces within areas under its control. The development of additional facilities will require action by the University.</p> <p>In addition, through the school student experience group, efforts have been made by both the library and estate services to increase and identify dedicated study space for students. Communication to that effect to students will be done shortly as part of the overall student experience survey feedback and action plan.</p>	C
3.30 The quality and availability of IT facilities – and videoconferencing – and the support for these is inconsistent across clinical sites, posing a risk to the quality of the teaching and the student experience. Investment in staff and facilities should be a priority.	2	<p>The School notes this ongoing issue and will liaise with UCD IT Services and our clinical partners to seek to improve IT facilities on clinical sites.</p> <ol style="list-style-type: none"> 1) HSE firewall issues are challenging. 2) IT Services need to improve liaison with clinical sites. 3) The School needs to clearly identify the responsibilities for improving IT provision in Clinical Sites between IT Services, the Clinical Sites and Ed Tech Team. 4) The School needs to develop an improved relationship with IT Services at the highest level of the Registrar to improve communications. 5) School needs to lobby the Registrar and President over IT Services provision with high level dialogue led by the Dean. 6) Organisational development is required to set up a regular School forum with Clinical sites about their IT Services needs. 7) The School Management Team to reconsider the value of appointing a Relationship Manager for all Clinical sites who would be responsible for managing communications with Clinical Sites in addition to the other key relationship management responsibilities. 	C

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		Through the student experience group, IT has committed to improve some of the issues raised by students in relation to IT access on clinical sites. Continued dialogue with IT will remain a priority. The UCD Health Sciences Programme Office commits to engaging with the incoming Head of IT services on an ongoing basis. The School will set up an E-learning Committee as a sub-committee of the T&LSG.	
3.31 In clinical sites, consideration should be given to sharing the clinical research centre resources across all clinical specialities.	1	The resources of the Clinical Research Centre are available to all clinical specialties.	A
C. Teaching and Curriculum			
Commendations			
4.6 The level of engagement with the curriculum by the clinical teaching and research staff in the hospitals, GPs and community groups.	N/A	-	-
4.7 There is a dedicated team of programme leads and co-ordinators across the pre-clinical and clinical curricula. This has given rise to a continuous cycle of review and renewal of curriculum development, reflected especially in the enhancement project, led by a programme enhancement champion.	N/A	-	-
4.8 The School established a number of support programmes and services including the clinical tutor induction programme. The introduction of technology has also enhanced and co-ordinated learning across teaching sites.	N/A	-	-
4.9 Teaching and learning excellence are clearly areas of pride in the School of Medicine. The Review Group were impressed with Associate Dean P&EI's leadership in providing a strategic vision, and developing a QA cycle of	N/A	-	-

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<p>reviewing the functions of the education committees and its programmes. There has been extraordinary effort and commitment by the School in dealing with the complexity of the various undergraduate and postgraduate courses and programmes. The establishment of an excellent governance and monitoring committee structure to identify and implement educational development for the School has been key to this.</p>			
<p>4.10 The School of Medicine is strong in delivering innovative medicine related undergraduate/postgraduate programmes, with continuous curriculum development and assessment. This track record of teaching and learning innovation is also evident in embracing new technologies and delivering the nation's only Radiography training course. The establishment of a medical education research agenda to showcase the diverse medical education programmes is to be commended.</p>	N/A	-	-
<p>4.11 The School is to be commended for its long-standing engagement with top teaching hospitals, General Practice (GP) primary care clinics and academic centres.</p>	N/A	-	-
<p>4.12 The School is to be commended for its student centred emphasis, innovation in pedagogies, eLearning and recognition of excellence in student awards etc.</p>	N/A	-	-
<p>Recommendations</p>			
<p>4.13 The School should consider establishing subcommittees in eLearning and inter-professional education and practice, to implement its strategies for health professional training.</p>	1	<p>The School will set up an E-learning Committee as a sub-committee of the T&LSG. The T&LSG to consider further the value of teaching interprofessional basic life support learning in an elective module which would be available across all undergraduate programmes.</p>	B

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4.14 Undertake ongoing curriculum review and new course development to meet future health professional needs, including overarching inter-disciplinary health programmes. e.g. Masters of Ageing, Mental Health Science etc.	1	Curriculum review is ongoing and has been mainstreamed as part of School educational activity. No further action is required.	D
4.15 The School should develop strategies to improve student response rate in University course evaluation especially in the clinical setting. The School should engage student leaders to do this, including focus group discussions, as often (junior) students on committees are reluctant to voice their opinions. It is also necessary that the School develop a systematic feedback loop, especially for poorly rated modules.	1	The School will develop its own bespoke system for student feedback and make it a mandatory process with a requirement to report the results of the student feedback annually into the Programme Board. Quick win: module coordinator takes responsibility for feedback by summarising the key general points of student feedback and how they have addressed the feedback with the next cohort of students at the beginning of each academic year. Similarly stage coordinators could synthesise this for students at the beginning of each stage if they have an introductory lecture with students setting out the overview of the stage.	B
4.16 The School should be prepared to discontinue 'low subscribed courses' and reallocate faculty to other roles in strategic growth areas.	1	The School will undertake a periodic review of its entire GT portfolio to assess the sustainability of all courses. We note that in many instances, programmes utilise existing resource required for undergraduate programmes and in many instances our GT programmes are stepping stones to GR (MD and PhD) programmes. Hence the programmes are sustainable provided that the income exceeds the cost of the programme offering and that there is no opportunity cost.	C
4.17 Consider developing a new Faculty Development Programme for clinical staff in hospitals and the community e.g. teach the teachers programme, Graduate Certificate/Diploma/Masters in excellence in clinical teaching.	1	Although this was welcomed by the T&LSG, the key challenge identified is that of developing an in-house T&L programme for faculty which will not be income generating. The development of the in-house programme could lead to a Master's in Medical Education.	C

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		<p>Action 1: The School needs to inform UCD T&L that the structure of the general T&L programmes are not fully suitable for clinicians.</p> <p>Action 2: The Director of Clinical Education to develop the PDARF application and scope out the academic and business structure of a Prof. Cert in Clinical Teaching, explicitly highlighting the cost and resources required for consideration by the Programme Board. It was noted that if the programme was inter-professional in its structure that it could also address the need to grow inter-professional education in the School.</p>	
4.18 Consider the introduction of mentorship and leadership programmes for students, including international students.	1	<p>The School considers it necessary to develop the current mentorship programme and extend it beyond the very weak cohort of students. However it does not consider that it needs to be universally provided to all students, rather mentoring support should be available to those who wish to access it.</p> <p>Through the T&LSG, the School will seek to advance this to include all the leads from Diagnostic Imaging, Medicine, BHLS, Clinical and Emergency Medical Science, Forensic and Legal Medicine and Psychotherapy etc.</p> <p>In addition, a recent student survey highlighted the need to advertise the mentoring (career and academic) supports available to students. A summary document highlighting the range of mentoring supports available to students (peer mentoring, academic mentoring, career mentoring, etc.) will be prepared.</p>	B
4.19 More detailed and formalised assessment feedback should be provided to students. The School should also ensure students are aware of the purpose of course evaluations,	1	The T&LSG to consider developing a School action plan for improving assessment feedback which is aligned with the University level strategy being developed by the Registrar and UCD Assessment.	C

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and close the feedback loop in student evaluations, by seeking student views on how to do this e.g. what does 60% mean in clinical competence in the Gastrointestinal (GI) topic?			
4.20 Ensure all students enrolled on doctoral level programmes (MD and PHD) follow a structured pathway (including doctoral panels and stage transfers), co-ordinated at School level, and in line with UCD norms and regulations.	1	It is the School's expectation that all doctoral level programmes coordinated by the School operate in line with UCD norms and regulations. The Review Group highlighted the appointment of a senior academic leader to oversee supervisor responsibilities and mentorship. The School will seek to develop this role as a matter of priority. We note that a large number of our MD and PhD students are supervised across a large number of clinical sites by adjunct faculty and that we may need to extend the academic support infrastructure to ensure that this activity is better supported.	C
4.21 The specific needs of Biomedical Health & Life Sciences (BHLS) (40 students) students ought to be addressed and supported as a cohort. This is especially the case for those who wish to pursue a research career rather than as a pathway to General Entry Medicine (GEM).	1	<p>The BHLS programme is designed towards the needs of the translational research career path, especially in the final two years where there is a number of key research relevant modules (e.g. a 20-credit research project).</p> <p>The School works closely with the BHLS cohort who are represented on and are active contributors to the BHLS degrees committee. Students on this programme were also involved in the School's recent curriculum review process. A number of action points are included in that report which we would like to implement pending appropriate support from the School/University. These include:</p> <ul style="list-style-type: none"> - Running an annual student workshop to review the programme outcomes and structure with student representation from each stage. - Introduce a new module on IP and commercialization into either stage 3 or 4. - Re-position STAT20070 in the programme structure and expand on the learning outcomes around statistics and study design in other modules so this is built on in preparation of the student's research project. 	

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		<ul style="list-style-type: none"> - Investigate the creation of a BHLS focused “Introduction to Research” module which would include more biostatistics and study design. - Development of a mentorship programme for the BHLS students where they could meet once a year to discuss their module selection and career vision. 	
4.22 There needs to be a more distinct alignment between programme goals and module objectives, which should be clearly communicated to students, for example, some Radiography students need clarification on why they have to take subjects such as human psychology.	1	These issues are being addressed by the ongoing Curriculum Review Programme Enhancement Process.	C
4.23 The School needs to ensure that easily accessible, structured supports for international students, including PhD students, are in place.	1	UCDMR office provides support for all PhD and other research degree students. Information sessions on supports available and course requirements are offered both by the School and the Graduate School Board. We will ensure that these are offered annually to all students. The school provides a handbook for all MSc and PhD research degree students upon registration which outlines programme requirements and supports available in the university. There is an international student advisor in the university.	A
4.24 The GEM pathway is financially challenging for students who lack state funded support. The School should consider patterns of equity, entry pathways for disadvantaged students and the supports required to facilitate the recruitment of under-represented students	1	The School is acutely aware of the financial challenges for GEM students who lack State-support and participates fully in the University’s initiatives to improve access. The School has also managed a student hardship fund from its own resources to assist students who fall into financial distress. There is currently no agreed University definition of ‘disadvantage’ for students who have already attained an undergraduate degree qualification. The School would be happy to work with the Registrar to develop a policy in this regard as we note that this issue is likely to be relevant beyond GEM Medicine. The School notes that our original GEM business plan made provision for an increasing number of funded scholarships to our GEM programme however these have not been permitted by the	

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		University. Also, the current budget model would result in 2.5 times the cost of any such scholarships being levied on the School.	
4.25 The School should consider establishing a teaching academy to reward and recognise teaching dedication and excellence for staff in clinical practice. In addition, a non-threatening peer review programme for teachers to support and enhance teaching excellence should be introduced.	1	The T&LSG will consider further the viability of a Teaching Academy and to consider the practical ways in which teaching can be afforded greater emphasis in the criterion for promotion as part of the <i>UCD Medicine Clinical Pathway</i> and develop a proposal for consideration by the Dean.	C
D. Research Activity			
Commendations			
5.4 Despite the observations above, the School Research Strategy has been extraordinarily effective. A number of research groups are flourishing; the grant income has grown progressively and the publication output on a per capita basis is impressive.	N/A	-	-
5.5 Under the leadership of the Dean, the effective relationship between the School and the UCD Conway Institute has strengthened, facilitating research activity through the collaboration.	N/A	-	-
5.6 The Review Group commend the creation of Clinical Research Facilities on St Vincent's and Mater University Hospital campuses.	N/A	-	-
Recommendations			
5.7 The School should prioritise research themes underpinned by matrices related to publications, grant income and international reputation, compiled with the assistance of UCD Research. This includes maximising current strengths including the potential of associated research institutes and centres.	1	A number of Research Centres have been formed in the school and approved by Academic Council. These centres will report to the university. The school will monitor these research centres and grant income, student numbers, publications and citations. The school will also seek to ensure that the strengths of the associated research institutes are availed of and supported.	C

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5.8 The Review Group recommend that UCD facilitate strategic recruitment to strengthen and develop existing research programmes.	1	For all academic appointments, the research experience of the candidates is carefully considered in order to strengthen and develop existing research programmes, to develop new areas of expertise where required, to improve the quality of research in the school and the quality of our research students.	A
5.9 The Review Group endorse the development and promotion of research in medical education and, specifically, in the development of new technologies, and recommends that the School builds on its strengths in this area.	1	The Associate Dean for Research will work with the Associate Dean for Education to promote research in education among academic staff. Staff who engage in such research and produce publications and grant income need to be given protected time in their workload model similar to that provided to those doing clinical or biomedical research.	C
5.10 The School should regularly review the viability of its research centres and groups to ensure that they are in alignment with the School's Research Strategy.	1	The school will review its research centres and groups to ensure that they are viable and aligned with the School's Research Strategy	B
E. Management of Quality and Enhancement			
Commendations			
6.4 The appointment of a Director of Strategic Development in the School is to be commended.	N/A	-	-
6.5 The financial planning and support processes are comprehensive.	N/A	-	-
6.6 Accreditation by professional organisations is an important external validation of the quality of the educational programmes in the School and the delivery of learning outcomes.	N/A	-	-
Recommendations			
6.7 The School engages with a number of different accreditation and review processes and there is a need for a co-ordination function among these processes.	1	The School has appointed a Director of Quality Improvement who is a member of the School Management Team and School Executive Management Team. The School has also centralised the coordination of responses to different accreditation processes within the School	A

RG Recommendation	Category	Action Taken / Action Planned / Reason for Not Implementing	Time-scale
		Office supported by the Education Development Team. The School will endeavour to mobilise a virtual working group (comprising stakeholders from across all sites and Sections) to ensure there is effective each way communication.	
F. Support Services			
Commendations			
7.6 In general, there are excellent School support structures for students.	N/A	-	-
7.7 University support services are generally very good.	N/A	-	-
Recommendations			
7.8 Optimise synergies between services at University-level and School-level, particularly in the areas of:			
<ul style="list-style-type: none"> Teaching and Learning, including educational technology. 	1	Dean of Medicine to discuss with the Registrar how communications can be improved between the School and IT Services as set out in the Quality Review Recommendation.	B
<ul style="list-style-type: none"> International student recruitment, engagement and marketing. 	1	The School's Associate Dean for International Relations is a member of the University's Global Engagement Group and chairs the College GEG Sub-Committee.	A
<ul style="list-style-type: none"> Information, communication and technology (ICT) provision. 	1	Dean of Medicine to discuss with the Registrar how communications can be improved between the School and IT Services as set out in the Quality Review Recommendation.	B
7.9 UCD HR should put in place processes and procedures to govern the approval process for atypical and off-campus employment contracts, including industrial collaborations. The appointment of a dedicated HR recruitment liaison based in the School to deal with atypical contracts for staff such as clinical lecturers, would be a positive step to addressing issues with these contracts.	1	The School will invite the College HR Partner to review and bring forward recommendations on how principal atypical groups can be best managed within the context of the UCD HR practices.	B.

RG Recommendation	Category	Action Taken / Action Planned / Reason for Not Implementing	Time-scale
7.10 The School should invite a representative of UCD IT Services to sit on the relevant School committee.	1	A representative of IT Services to be invited onto the new e-Learning Sub Committee of the T&LSG	B
7.11 Opening hours for off-campus facilities should be reviewed and benchmarked against best practice elsewhere, nationally and internationally.	2	The School will liaise with its clinical partners to ascertain if the opening hours of off-campus facilities can be extended.	C
G. External Relations			
Commendations			
8.4 Feedback from external stakeholders highlighted the School's excellence in patient advocacy.	-N/A	-	-
8.5 New School initiatives evidenced excellent communications and governance structures, for example, the research and teaching agreements with affiliated hospitals are an exemplary model of how engagement with clinical partners should work. In particular, the Review Group supported the agreement with the School's sole private affiliated hospital and would encourage exploration of possible partnerships with other private providers (see also 3.27).	N/A	-	-
8.6 The School has developed an excellent reputation which attracts international students to come to the UCD School of Medicine to undertake various programmes. This has substantively increased the cultural diversity of faculty, staff and students in the School. The success of the Penang Medical College initiative is especially impressive in this respect.	N/A	-	-
8.7 The School's engagement with national and international alumni and membership of U21 leadership in health education is to be commended.	N/A	-	-
Recommendations			

RG Recommendation	Category	Action Taken / Action Planned / Reason for Not Implementing	Time-scale
<p>8.8 The School should consider building strategic sustainable research partnerships in areas of common themes and excellence e.g. Skin Centre in Singapore.</p>	1	<p>The School considers it necessary to consolidate existing research strength and grow new areas of research that focus on diseases of national significance, global importance and which support the School's and UCD Global ambition.</p> <p>The School's International Team will work together with UCD International Global Partnership Group to develop a multi user online IT system that supports the collation of data on international partnerships across the School and University.</p> <p>The School will consider building strategic research partnerships if suitable institutes are willing to engage and clear benefits to the School can be identified.</p>	C
<p>8.9 The School should identify a number of strong research partners within U21, and further the School's research strategies by delivering joint research symposia / workshops or developing PhD/PI exchange programmes. The School should also consider tripartite research partnerships with U21 or other higher-ranking Universities in areas of mutual expertise.</p>	1	<p>The School's International Team led by the Associate Dean for International Relations works closely with the academic leaders of various internationally focused programmes. Coupled with improved connectivity with our partners and alumni the team will focus on promoting our research strategies by delivering joint research international workshops/symposia.</p> <p>To strengthen our collaboration with U21 the School has offered ICH – GCP Training Module (developed through the long standing partnership with ICON/Firecrest and the UCD Clinical Research Centre). This is a highly valuable resource to our partners in the Universitas 21 Health Sciences Group. We hope to play a lead role in the Health Sciences Group of the Universitas 21 network and other similar international multi-institutional collaborations. The International Team's priority for 2017 is to develop our online international profile to reflect the School's long established international tradition.</p>	C

RG Recommendation	Category	Action Taken / Action Planned / Reason for Not Implementing	Time-scale
		The School will consider formal partnerships if suitable institutions can be identified and if partnership will result in significant benefits to the school. A source of funding would need to be identified to implement any partnerships.	

Appendix 1. Initial Response from UCD School of Medicine to Review Group Report.



Periodic Quality Review – April 2016

Initial Response from UCD School of Medicine to Draft Report

As a School which is subject to continuous ongoing external accreditation of our programmes, we enthusiastically welcomed this University quality review of our organisation, as the School did when it volunteered for the first review under the current quality framework. The School recognises the importance of our periodic self-assessment and external critique to our ambition to be among the top Medical Schools in Europe. We are pleased with the thorough and thoughtful engagement by the Review Group and we are delighted to reflect on their recommendations and observations.

We respectfully suggest a number of minor amendments to the draft report in the interests of clarity and/or factual accuracy, and we offer the following initial response to the recommendations made by the Review Group. The School will incorporate our responses into the School's Quality Improvement Plan, which we hope to implement during the coming academic year (2016/2017) and beyond.

Research Institutes / School Relationship

Relationships between associated institutes and the School need to be clarified. This includes clarification around whether the resourcing and governance of institutes should occur at the School, College or University-level.

The School strongly endorses this recommendation and the Review Group's recommendation that the University should consider these relationships as a matter of priority. It is the School's consistent view that Research Institutes or Centres should be as fully integrated with their affiliated Schools as possible (and in some cases, such as the Charles Institute or Systems Biology Ireland, fully integrated into the School), as this provides the best opportunity to maximise synergies and ensures that our research ambition is fully realised in a sustainable manner. The current arrangements where Research Institutes are independent during their initial period of funding, but become largely unfunded and under-resourced thereafter, is not in the best interests of either the Research Institute or the Schools.

Balanced Recruitment Strategy

The balanced approach of the School of Medicine recruitment strategy should be maintained and, within the School, there should be transparency in staff recruitment decisions. More widely, appointments that balance teaching and research requirements in the School should be prioritised. Consideration should be given to a clinical appointments track to support this.

The School has maintained a multi-annual staff plan since 2006, which is periodically reviewed with the Head of School in consultation with the relevant Section Leaders. Hence, we believe that there is adequate transparency with respect to the planned School positions. However, as we discussed with the Review Group, the University (College, Research Institutes, VP for Research, Innovation & Impact) has over recent years advanced a number of strategic research recruitment in response to funding opportunities which arise. The School strongly supports the contention that there needs to be a balance between teaching and research requirements, and that these priorities are best set by the School. We support the view that a clinical appointments track should be developed. Such positions have been included in the School's staff plan, but development has been constrained in recent years due to budget restrictions. We also note that the establishment of such posts is not entirely within the gift of the University, as they require approval by the Health Services Executive (in the case of publicly funded hospitals) or private hospital partners. However, when such partnership funding is agreed with clinical partners, it is strategically of the utmost importance that the University co-invest in such posts, including the required infrastructure to support them.



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Gender Representation at Senior Level

Given the size of the School, a dedicated School level strategy is required to tackle inequalities in gender representation at senior level.

The School is committed to ensuring that there is good gender representation at senior levels for academic, research and professional staff. We note that there is excellent gender balance across each of these categories and that 70% of staff hired within the past 5 years have been female. We note that of the 23 Full Professors or Professors appointed or promoted within the last 10 years, only 7 of the appointees were female. However, there were no female applicants for a number of competitions and so need to encourage more applications from female staff as well as guard against any unconscious bias.

We are happy to develop a specific School strategy, and will be guided by the University's strategic initiatives in the area of Equality, Diversity, and Inclusion. We believe that prioritising recruitment at junior academic ranks, combined with an effective University promotions system that gives equal priority to teaching excellence, may offer the best route to addressing inequalities at senior academic levels.

Supporting Special Lecturers/Clinical Tutors

The School should ensure the following supports are in place for specialist lecturers based in the teaching hospitals:

- *an academic-co-ordinator.*
- *a comprehensive and tailored induction programme.*
- *appropriate management of their career development including mentorship, clarity around teaching responsibilities, continuing professional development (CPD) and supports for research associated CPD.*

We are pleased to see that the Review Group recognises the critical importance of this staff cohort to our teaching and research programmes. We note, however, that the University systems seem to struggle to manage this staff cohort, which exhibits a high natural turnover due to tutor progression within the non-consultant hospital doctor training pathways. The School will continue to advocate for this staff cohort through the provision of academic coordination and mentoring support. The School notes that the Review Group commended our two-day Clinical Tutor Induction programme, which has been in place for the past six years, and is academically coordinated by Associate Professor Suzanne Donnelly, the School's Director of Clinical Education.

Space Allocation

The space allocation to the Radiography Division is inadequate and should be addressed as a matter of priority. The allocation of space in the Health Sciences Centre was not consistent – for example, senior staff shared office space in Radiography but there was empty space elsewhere.

The School recognises the inconsistencies in space allocation across the UCD Health Sciences Centre, the sharing of offices by senior School academics, and the particular space challenges faced within the Radiography & Diagnostic Imaging Section. We note that the UCD Health Sciences Centre is home to a number of Schools and units, and while rational space allocation has been applied within the UCD School of Medicine, the space currently allocated to the School is not proportional to its staff. We would support a College-wide review of space allocation, and we note that a College of Health & Agricultural Sciences Buildings Committee has recently been established. The School has offered several solutions to the University that would provide better utilisation of currently vacant research space by relocating specific academic groups.



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School Investment Plan

The Review Group recommends that the School, in conjunction with the College and University, develop an investment strategy to improve/expand student facilities on hospital sites and explore the possibility of investment to enable clinical attachments in the private wards in the main hospitals.

The School strongly endorses the recommendation that the School develop an investment strategy to improve and expand student facilities on our clinical sites. We believe that such investment is in the University's best interests, as it is vital to our relationships with our clinical partners and to our international reputation. Also, we have sought to optimise utility of private hospitals, within our current resource constraints.

The School has previously developed detailed capital investment priorities to support existing and expanded teaching and research infrastructure, both on and off campus. However, despite respectfully working with various College structures, none of the School priorities have received any investment, forcing the School to rely on its own resources to maintain existing facilities.

We note that in their post-Review briefing to the School staff, the Review Group highlighted the urgent need to invest in both people and facilities, in terms of both strategic capital investment and budget allocation.

Supporting Doctoral Students

Ensure all students enrolled on doctoral level programmes (MD and PhD) follow a structured pathway (including doctoral panels and stage transfers) co-ordinated at School level and in line with UCD norms and regulations.

It is the School's expectation that all doctoral level programmes coordinated by the School operate in line with UCD norms and regulations. The Review Group highlighted the appointment of a senior academic leader to oversee supervisor responsibilities and mentorship. The School will seek to develop this role as a matter of priority. We note that a large number of our MD and PhD students are supervised across a large number of clinical sites by adjunct faculty and that we may need to extend the academic support infrastructure to ensure that this activity is better supported.

Research Prioritisation Exercise

The School should prioritise research themes underpinned by matrices related to publications, grant income and international reputation. This includes maximising current strengths including the potential of the UCD Conway Institute.

In its strategic plan, the School has set itself a priority to conduct an objective external Research Evaluation Exercise for main research groups and benchmark the School's research profile against leading international comparators. The School agrees that maximising the potential of the UCD Conway Institute is central to our research ambition and notes that this highlights the critical importance the Review Group's first recommendation.

Medical Education Research

The Review Group endorse the development and promotion of research in medical education and, specifically, in the development of new technologies, and recommends that the School build on its strengths in this area.

The School is pleased to note the Review Group's endorsement of the development and promotion of research in Medical Education, which has been a priority for the School since our appointment of an Associate Dean for Programmes and Educational Innovation. We note, however, that our efforts in this domain have been hampered by both resource and space constraints. The School will continue to advocate for this research and



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for research/teaching linkages more generally, as these are essential to strengthening our educational quality and international reputation.

Seeking International Research Collaborations

The School should identify a number of strong research partners within U21 and further the School's research strategies by delivering joint research symposia / workshops or developing PhD/PI exchange programmes. The School should also consider tripartite research partnerships with U21 or other higher-ranking Universities in areas of mutual expertise.

The School agrees strongly with the recommendation that the School should seek to enhance research collaborations with Universitas 21 and other higher-ranking Universities in areas of mutual expertise. We recognise that many of our international research connections are mediated through individual academic staff rather than through formal School partnerships. We hope that the research assessment exercise will allow us to build a detailed picture of our current international research linkages and help identify where formal School-School collaborations should be established.