

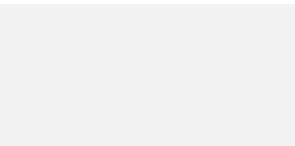
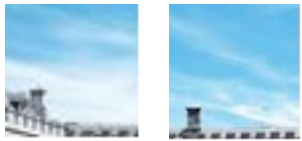
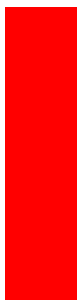
ANNUAL REPORT

Quality Promotion Committee

2014 - 2015



UCC
University College Cork, Ireland
Coláiste na hOllscoile Corcaigh



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Executive Summary

The UCC process for quality assurance has always sought to preserve institutional autonomy and emphasise quality improvement; the processes are based on sound policies, principles and on best international practice, and involve all of the major stakeholders, including students, as well as external experts in the process.

A revised process for periodic review of academic units, approved in spring 2015, seeks to further introduce flexibility, without loss of rigour, in order to provide academic units, staff and students with best opportunity of benefiting from such a review.

Following Governing Body's agreement to receive reports from the Quality Promotion Committee at its September meeting each year, reports will review activities in an academic year rather than the calendar year; this report covers the academic year 2014-15. It also includes the two Quality Reviews (of the Office of Academic Affairs and the Student Experience Office) that took place at the end of 2013-14 and which had not yet been received by QPC at the time of last year's annual report. This report, therefore, includes:

1. a follow-up on the Institutional Review of UCC;
2. reports on quality reviews conducted in the summer of 2013/14, including an interim, enhancement-focussed review of Adult & Continuing Education (conducted at the request of ACE);
3. the report on the process of Research Quality Review which, due to its size and nature, was the only review to take place in 2014/15 (NB: a separate detailed report on the outcomes of the RQR will be presented to Governing Body later in the academic year 2015/16);
4. an update on revised quality assurance and improvement processes to begin 2015-16; and
5. plans for the future.

(1) Irish Universities Institutional Review of UCC: follow-up

The University was reviewed by Quality and Qualifications Ireland (QQI) through its Irish Universities Institutional Review (IRIU) process in December 2012 and the report of the review panel was published in June 2013. The resulting quality improvement plan (QIP) for the University has been a standing item on the agenda of QPC since 2013 and has been updated regularly, with an additional column being added to the QIP which indicates evidence of the action taken. This is in order to prepare for the next round of institutional reviews by Quality and Qualifications Ireland (QQI). There is no schedule for these reviews as yet, and UCC will not be one of the first universities to undergo review. However, given that QQI intends to begin reviews in 2016, it is timely to begin to consider how UCC will present itself at the next review. Evidence of action taken since the last review and the impact of that action will be an important starting point. In parallel, QQI have published a white paper for discussion on their Institutional Review process, and UCC is fully engaged in discussion and consultation on this matter through the IUA.

(2) Quality Reviews 2013/14 (not reported on in last year's report to Governing Body)

Details of the two reviews carried out in the summer of 2013-15 and that had not been considered by QPC at the time of last year's report are provided in Section C. These are the reviews of the Office of Academic Affairs and the Student Experience Office. Section C of this report highlights the key findings from the reviews.

(3) Research Quality Review 2014/2015

The main activity undertaken in 2014-15 was the second UCC Research Quality Review, covering the period 2008-2014 (summary provided in Section A).

(4) Quality Improvement – Progress on Implementation of Recommendations

The operation and management of the RQR, coupled with the need to ensure that a process and schedule was in place for the start of the third cycle of reviews in autumn 2015, meant that, for the academic year 2014-15, the normal process of follow-up reviews was set aside. This is something that will need to be considered at the start of the 2015-16 academic year. In addition, an intention to roll out annual monitoring will impact on this process since any unit that is annually monitoring its provision through the template provided will not need to go through an additional follow-up procedure.

(5) Plans for the Future

Since the last report to Governing Body, a process of annual monitoring and periodic review has been approved for academic units. Similar revisions will follow for the review of administrative, management and support units. In order to provide Governing Body with more detail of the future approach, several papers are appended to this report, as follows:

- UCC's follow-up to the IRIU report. This paper has been published by Quality and Qualifications Ireland as UCC's response to its institutional review report. A new column has been added to the table and the document to track evidence of action taken in preparation for the next institutional review (Appendix C).
- Guidelines for the Periodic Review of Academic Units. The revised Guidelines were approved by QPC in March 2015 and presented to Academic Board and Academic Council for information; they are appended to this report for information. The Director of the QPU gave a briefing on the new Guidelines in June 2015 for those academic units undergoing review in 2015-16 and for others interested in the process (Appendix D).
- Annual Monitoring: Five units undertook to pilot annual monitoring in 2014-15. Some brief feedback is provided in Appendix D.

Recommendations

1. That the Governing Body approves this report and its publication on the University web site.
2. That the Governing Body refers this report for discussion and consideration of any actions to be taken to the Academic Council and other University bodies.

Section A: Research Quality Review 2015

The Research Quality Review is a joint initiative of Academic Council Research and Innovation Committee (ACRIC) and the Quality Promotion Committee (QPC). ACRIC was involved in the design of the review; QPC had oversight of the process. A Steering Committee (SC) reporting to QPC was formed with members of both ACRIC and QPC in attendance. The SC had the authority to make decisions on behalf of QPC. The Quality Promotion Unit (QPU) project managed the review process.

Objectives of the exercise:

- To provide an independent assessment of the quality and level of research activity at UCC at Department/School/Research Institute level, benchmarked on a disciplinary basis;
- To provide a means of international comparability across research units;
- To provide an overview of the status of research on a broad disciplinary-based level across the University;
- To provide information at a sufficient level of granularity to facilitate the Office of the Vice President for Research and Innovation (OVPRI) in its assessment of all research units and in its planning for the future levels of support needed; and
- To inform strategic planning in UCC.

Membership of the Steering Committee (note: some changes in membership occurred over the last 12 months):

- Professor Graham Allen – member of ACRIC
- Professor Sir Drummond Bone, Master of Balliol College, Oxford (external member)
- Ms Fiona Crozier – Director of Quality (until July 2015)
- Professor Alan Dobson – member of ACRIC
- Professor Paul Giller – Registrar and Senior Vice President Academic (Chair)
- Professor Alan Kelly, Interim Director of Quality (from July 2015)
- Dr Deirdre Madden, member of QPC
- Professor Anita Maguire – Vice President for Research & Innovation
- Dr David O’Connell – Director of Research Support Services
- Professor Patrick O’Donovan, Vice Head for Research, CACSSS
- Professor Douwe Van Sinderen, member of QPC

Professor Graham Allen (Chair, ACRIC), Professor Anita Maguire (VP Research) and members of QPU met on a number of occasions in March and April 2013 to discuss the implementation of the RQR. A consultative meeting was held with Professor David Price, a former manager of the Research Assessment Exercise at the Higher Education Funding Council, England in July 2013. The Steering Committee was formed and met on a regular basis from November 2013. The RQR guidelines were drawn up and sent to the Directors of RICUs for comment and clarification on descriptors and to the Colleges for feedback. The Guidelines were finalised and approved by the Steering Committee in April 2014.

It was agreed that the review period would span 1 January 2008 to 31 December 2014. Each staff member was asked to submit 5 pieces of research for review along with an updated IRIS profile. Staff members were reviewed individually under Research Activity Indicator (RAI) 1 (5 publications), RAI 2 (total published output over the review period) and RAI 3 (peer esteem). RAI 2 and RAI 3 were

to be reviewed using the information contained in individual IRIS profiles. Each unit under review was to submit a research statement allowing them to be assessed under RAI 4 (research-related activities), RAI 5 (postgraduate research education) and RAI 6 (research income). RAI 1 was weighted at 25% while RAIs 2-6 were weighted at 15% in the final calculation of a final score for each unit (an integer score from 1-5).

The review team for each unit consisted of two remote reviewers for every 10 members of staff; each unit under review had a responsible disciplinary vice chair (DVC) and each panel was led by a Chair.

The panel Chairs visited UCC in October and November 2014 for a briefing session with the Steering Committee, and site visits took place between May and July 2015. Draft reports have been received from all panels and reviewed by members of the SC, and final draft reports have been sent to units for a factual check when ready. Once a factual check has been completed, relevant comments will be fed back to the panels and the reports will then be finalised. This process is currently ongoing.

The Quality Promotion Committee will review the final reports before they are approved for publication, and discussions are ongoing regarding the detailed plans for this publication and the utilisation of the huge amount of detailed evaluation received as part of institutional planning and research activity.

Site visits

Panels	Dates of Visit
Panel M, N, O	5 - 7 May 2015
Panel A, B, D	19 – 21 May 2015
Panel E, F, G	2 – 4 June 2015
Panel I, J, K	17 – 19 June 2015
Panel L, H, C	30 June – 2 July 2015

Panel Chairs

Panel A	Professor Carmine Pariante	Kings College London
Panel B	Professor Eric Steegers	Erasmus MC, The Netherlands
Panel C	Dr Audrey Bowen	University of Manchester
Panel D	Professor Kay Marshall	University of Manchester
Panel E	Professor Dianne Edwards	Cardiff University
Panel F	Professor Jens Knoop	Vienna University of Technology, Austria
Panel G	Professor Matt Griffin	Cardiff University
Panel H	Professor Audrey Horning	Queens University Belfast
Panel I	Professor Robin Wensley	Warwick University
Panel J	Professor Margaret Groarke	Manhattan College, USA
Panel K	Professor Jackie Marsh	University of Sheffield
Panel L	Dr Regina Uí Chollatáin	University College Dublin
Panel M	Professor Margaret Topping	Queen's University Belfast
Panel N	Professor Margaret Kelleher	University College Dublin
Panel O	Professor Nadine Holdsworth	University of Warwick

Section B: UCC Quality Review Process

Introduction

The focus of the quality improvement and quality assurance procedures in UCC extends to all activities of the University, including administrative and support services. UCC recognises that all areas of its operation will affect (directly or indirectly) the quality of the totality of the learner experience and ultimately may have an impact on student achievement. The University is committed to development of a quality culture and embedding it in all areas of its activities. Students must be at the centre of this philosophy and their contribution through all parts of the process is core to the assurance and assessment of quality within the University.

There is a standing item for the student representatives on the QPC, through which they can raise any matter pertinent to the work of the committee. In future, it is to be hoped that QPU can work with the Students' Union to develop a briefing and training programme for students who wish to participate in quality assurance and improvement activities at whatever level in the University.

UCC is fully committed to seeking the views and contributions of all learners, as well as of other stakeholders, including employers, alumni and professional bodies, and to using this feedback to guide the improvement of the quality of the learner experience. The primary aim of UCC in conducting quality reviews is to ensure that the University provides the best possible learner experience and that an ethos of quality improvement is fostered at all levels in the University.

Quality is the responsibility of every member of staff of UCC, and it is recognised that everybody has a contribution to make. All staff are expected and encouraged to participate fully in the preparation for quality reviews and in the conduct of the reviews themselves.

Quality Promotion Committee (QPC)

The Quality Promotion Committee (QPC), chaired by the President, continues to present an Annual Report to the Governing Body and, in addition, reports regularly to the University Management Team of the University.

The Quality Promotion Unit (QPU)

The Quality Promotion Unit was led in 2014-15 by its Director, Ms Fiona Crozier, assisted by a team of four staff. Ms Crozier moved to a new position in the QAA, UK in July 2015. The interim Director is Professor Alan Kelly of the School of Food and Nutritional Sciences, who was previously Dean of Graduate Studies of UCC (2006-2013). The QPU is primarily responsible for facilitating the implementation of quality improvement and quality assurance procedures in UCC. QPU assists units in preparing for reviews, including assistance with surveys, carries out all the logistical arrangements associated with quality reviews, liaises with the members of the peer review groups, receives the peer review group reports and prepares reports for the QPC on each review. The Director leads the monitoring of implementation of recommendations for improvements made by Peer Review Groups and the follow-up reviews of actions arising from reviews.

All procedures, guidelines and sample questionnaires are publicly available on the Quality Promotion Unit web site (<http://www.ucc.ie/quality>).

In addition, the Unit is a partner in a number of European EC-funded Tempus and Erasmus projects focussed on developmental aspects of quality assurance and quality enhancement in European

countries. Some detail of the projects is provided in Appendix B, along with a summary of other international activities that the Unit has engaged in over the past year.

Quality Reviews 2013-14 (end) and 2014-15

The following units completed a quality review at the end of 2013-14:

- Office of Academic Affairs;
- Student Experience Office.

As is standard practice in UCC, all units undergoing quality review were initially required to prepare a Self-Evaluation Report. This was the second quality review for most units and, in these cases, the review looked at how successful the unit and the University had been in implementing recommendations for improvement made in the first quality review report. The review also considered, where appropriate, the outcomes of the last Research Quality Review, the QIP developed as a result and the actions taken since then. A Peer Review Group (PRG), including external reviewers, was appointed for each review. The PRG visited UCC for a period of three days to meet with staff, students and other stakeholders. Following the visit, a report was submitted to the University and considered by the QPC. Key extracts from these reports are given in Section B of this report. The full reports, including details of Peer Review Group membership, meetings held and all findings and conclusions are published on the University web site¹.

The following units underwent review in 2014-15:

- ACE (a voluntary, one-day enhancement focused review)

Note on the interim review of ACE

This short, focused one-day review was held at the request of ACE. The interim review is intended to serve two key purposes:

- a) To provide ACE with an opportunity to consider the outcomes of its previous quality review with a view to following up on the recommendations made during that review. The interim review suggested further development of those recommendations, noting action taken and outcomes already achieved and suggested matters for further consideration.

ACE had grouped the recommendations from the 2012 report into themes as follows:

- Mission and vision
- Marketing, outreach and dissemination
- Structure, governance and management
- Communication (internal and external)
- Teaching, learning and research
- Resources and
- Other.

ACE drafted its SER in line with the headings in the draft annual monitoring template but added two headings to that template that are pertinent to the work of ACE: (1) finance and funding and (2) development of external networks and collaborations and marketing strategy.

¹ www.ucc.ie/quality

- b) To provide a means of piloting the introduction of a proposed university-wide annual monitoring process in a unit that, whilst carrying out academic functions is not, itself, an academic unit.

The review was not a scheduled one and was of a developmental/enhancement focused nature. Voluntary reviews of this nature can do much to enhance the 'follow-up' procedure for any quality review process, since they are at the request of the unit itself.

Key issues and findings arising from Quality Reviews (2013-14)

A number of key issues and recommendations common to the two panels were identified. In the main, such recommendations related more to action that needed to be taken by the University rather than by the units under review. Two recommendations, in particular, are worthy of note:

- Both reports suggested that the University needed to do more to recognise the work of offices such as OAA and SEO and to recognise the value that they bring to the functioning of the institution as a whole;
- Linked to this was the recommendation that the University needs to recognise the risk involved to the university if such units are unable to function appropriately. There are also a number of 'single points of failure' (i.e., where there is no backup in place should anything happen to an individual member of staff who has responsibility for a particular piece of work).

The process by which the University responds to institutional level recommendations has been discussed at QPC, and a new process will be piloted in 2015-16. It is important that the University is able to demonstrate to external bodies such as QQI that it has a functioning process in place for dealing with such recommendations.

Quality Improvement

With respect to all reviews conducted to date, QPC noted that some of the issues can be addressed within the current resources of the university, while some will require significant funding which may be difficult or impossible to acquire in the present financial circumstances. The QPC acknowledged the very significant commitment of the University community to quality improvement, but also noted that, within the context of the current financial difficulties and constraints, it will not always be possible to implement those recommendations requiring considerable resources or additional staffing. The University Management Team (Strategic), in its consideration of such recommendations, has prioritised actions based on alignment with the University Strategic Plan and commits to continuing to do so in the future. A list of the recommendations that were directed at the University rather than the unit under review will be provided to the University Management Team.

It is important to realise that the focus of the quality reviews is not merely quality assurance but also embraces quality improvement and quality enhancement. Thus, there will always be identification of areas for improvement, notwithstanding some excellent progress that has been made in implementing recommendations from previous reviews and similar exercises.

General Comment

QPC recognises that the implementation of resource-requiring recommendations is not an easy task at any time and is particularly challenging in the current climate. Nonetheless, the Committee considers it important that PRGs feel that they have the freedom to make recommendations that they feel are important whilst understanding the current financial situation. The QPC welcomes the fact

that the University Management Team reflects on and deals with many issues raised through Quality Reviews that require decisions at management level.

Future Developments

1. Annual Monitoring and Periodic Review. The annual monitoring template has two key purposes:
 - to ensure that standards of awards are monitored annually through the consideration of management information data and external examiners' comments and;
 - to monitor the continuing quality of the student experience through consideration of student feedback and annual reflection on recommendations made through quality reviews and programme approval processes.

The monitoring process should build each year to provide the evidence to support the self-evaluation report required for periodic review.

Four units reported on piloting the annual monitoring process in 2014-15 (ACE, Diploma in Dental Hygiene, Study of Religions and Microbiology). Feedback to date suggests that the following might be taken into account in any decision to roll out the process across the University:

- the provision of data be considered. Depending on the unit, it is difficult to disaggregate data into something meaningful for the report;
- a template may be useful for structuring staff/student consultative meetings;
- section 2 might more accurately reflect the external examiners' report template or vice versa.

Annual monitoring is becoming more apparent in other external review or accreditation processes. The University might look to ensure that its processes in this regard respond to the needs of accreditation and other professional or review bodies. Such monitoring is also enshrined in the *Guidelines for Quality Assurance in the European Higher Education Area*.

2. The third cycle of reviews at UCC: 2015/16-2020/21. Revised Guidelines for the Periodic Review of Academic Units have been published at [http://www.ucc.ie/en/media/support/qualitypromotionunit/guidelines/Guidelinesforannualmonitoringandperiodicreview\(academic\).docx](http://www.ucc.ie/en/media/support/qualitypromotionunit/guidelines/Guidelinesforannualmonitoringandperiodicreview(academic).docx)

Conclusion

The QPC acknowledges the very real efforts made by staff of all departments/schools and units to engage in quality assurance and quality improvement activities. The strong commitment of units to the further development of all activities and to efforts to maintain the high quality of such activities is commendable. It is hoped that this will continue into the future years, and that the present unfavourable economic conditions will not present insurmountable obstacles to the continued development of a quality culture in UCC.

The Committee wishes to express its appreciation to all those who participated as reviewers on quality review panels. The University is very grateful to reviewers, both internal and external, for all

their efforts on behalf of the units undergoing review and the University; in particular, the University wishes to acknowledge the willingness of external reviewers who give their expertise and time to assist the University in this exercise.

Section C: Quality Review Reports 2013/14

Office of Academic Affairs – Peer Review Group Report

PEER REVIEW GROUP MEMBERS

Ms Ros Boyne, Formerly Academic Registrar, Birmingham City University

Dr Michael Gilmore, Academic Registrar, Durham University

Mr Gavin Lynch-Frahill, Students' Union Education Officer, University College Cork

Professor Eithne Guilfoyle, Vice President for Academic Affairs (Registrar), Dublin City University

Ms Colette McKenna, Directory, UCC Library, University College Cork

Dr Suzanne Timmons, Centre for Gerontology & Rehabilitation, University College Cork

PEER REVIEW

The PRG shared responsibility for the conduct of the review and for the preparation of the report. They agreed their conclusions at the end of the site visit and communicated electronically to draft and agree the final report. The PRG wish to thank everyone they met for their constructive engagement with the process and their helpful comments. They also wish to record their gratitude for all the help and support they received from Ms Aoife Ni Neill and Ms Fiona Crozier throughout the process.

OVERALL ANALYSIS

Self-assessment Report

Staff of the OAA presented one Self-Assessment Report (SAR) which covered the seven offices that form the OAA. The PRG felt that the SAR was clear and comprehensive and contained a commendably thorough SWOT. The SAR made a number of recommendations which ranged from matters related to the internal organisation of the OAA to University strategy. The PRG felt that the recommendations made in the SAR were appropriate.

The Registrar and Academic Secretary said they had encouraged the staff of the OAA to take responsibility for the preparation and content of the SAR. This approach was very useful in terms of encouraging self-reflection and allowing staff to take ownership of the process. The PRG concluded, however, that the SAR failed to celebrate sufficiently the extent to which the work of the various offices is co-ordinated. They also noted that the SAR was mainly focussed on the internal organisation of the OAA and they felt that a more externally facing focus would have been beneficial. The focus of the SAR reflects the position staff of the OAA feel they have within the University: their perception is that the OAA has a low profile and that the value of their work is not sufficiently evident or appreciated.

SWOT Analysis

The SWOT Analysis was self-reflective and comprehensive in its analysis of the unit. The PRG commends the staff of the OAA for the openness with which they engaged in the peer review process and with the SWOT analysis. They noted that a large number of staff had participated in the preparation of the SWOT and that an external facilitator had been used to facilitate the process.

Benchmarking

The benchmarking exercise focused on a qualitative assessment of the services provided by three institutions: the National University of Ireland, Galway; Dublin City University and the University of Exeter. The PRG recognised that the University's intention to develop a Student Hub had guided the selection of these institutions and the nature of discussions held with staff from them. The PRG noted that the OAA staff who visited these institutions recognised the value of the processes they observed and were keen to adopt appropriate aspects of those processes at UCC.

FINDINGS OF THE PEER REVIEW GROUP

Organisation of the OAA

The Academic Secretary, Mr Paul O'Donovan, is the head of the OAA. He reports to the Registrar and Senior Vice President (Academic), Professor Paul Giller. The establishment of the OAA numbers 54 but there are currently 7 vacancies.

The OAA comprises seven offices: Academic Secretariat, Academic Programmes and Regulations, Systems Administration, Admissions, Graduate Studies, International Education (Operations) and Student Records and Examinations. Each of these offices has a distinct remit. The staff in each office are led by a head of office who reports directly to the Academic Secretary. It is clear that the teams in the offices work well together and that there is good communication across the offices.

The PRG was made aware of how difficult it was for the OAA to maintain service levels while carrying such a high number of vacancies, particularly as most of the vacancies are concentrated in two of the constituent offices. The PRG was very impressed by the professionalism and commitment of staff who were doing everything they could to ensure that staff, students and others did not suffer as a result of the current resource problems.

Strategy

The development of the University's Strategic Plan was an institutional activity. The strategic plan determines the strategic objectives which annual operational plans are designed to meet. Staff of the OAA have informed and influenced the development of the University's strategic plan, its operational plans and academic strategy, and the unit's work is strongly informed by these plans, but it does not have a separate strategic or annual operational plan, as the SAR recognised.

Nonetheless within the institution, some strategies have been developed by separate functional areas to deliver on key institutional goals. Some of these relate to the work of the OAA but do not take full account of the actual or potential contribution from the OAA. The Student Experience Strategy and the Teaching and Learning Strategies are cases in point. The OAA delivers some key student services and yet the Student Experience Strategy pays little attention to this contribution, other than recognising the need for an 'integrated student administrative interface' as an aspect of the Hub project. The work of the OAA in the management of the curriculum approval processes could be harnessed to strengthen the integration of research, teaching and learning, but this potential contribution to curriculum development is not explicitly recognised in the Teaching and Learning Strategy.

The problem is a dilemma around whether these sub-strategies are best considered as strategies for particular units or whether they should be thematic strategies for implementation across units, and the OAA is caught on the horns of this institutional dilemma.

In the absence of a resolution of the dilemma, the SAR has identified a way forward which would ensure that the unit does not become merely reactive. A number of institutional discussions have taken place to frame an Academic Strategy for UCC within the context of the new Strategic Plan. Of the six key elements of this framework strategy, four are particularly relevant to the OAA namely: University size and shape, mode of teaching and learning delivery, portfolio of programmes, and internationalisation and partnerships. The SAR recognises that it would be beneficial to extract the goals and targets that pertain to the OAA and to use this information to establish the unit's own operational plan, prioritising key projects necessary to maintain and improve current levels of service and enabling them to support the demands of the academic mission. An OAA Operational Plan would also facilitate communication of medium to longer term plans and projects to all staff in the unit, which would respond to the concern raised by a number of staff that the strategic and operational goals of the unit are not clearly communicated.

That said, simply adopting a 'top down' strategic approach has its limitations. This approach risks missing possible innovations from within the OAA which could benefit staff and students on a wide scale. A top-down strategic approach has already resulted in a sequence of organisational changes around the complex arrangements for admissions, across International Education (Operations), Graduate Studies Office and the Admissions Office. In the case of International Education (Operations), the commercially driven recruitment function is not separate from the quality assurance function required to safeguard admissions standards and fair process, which creates an inherent and unnecessary risk to quality assurance. The development of CPD modules through the Centre for Adult Continuing Education has similarly been driven strategically, but without thinking through the organisational implications for the capturing of the student record for external accountability. The potential mismatch between strategy and implementation highlights the need for improved regard for the strategic value of the OAA and engagement of the OAA with the senior management team and the wider University.

The PRG therefore recommends that the University, in its approach to strategic planning, should recognise wider contributions to institutional strategic themes than that made by particular managerial units, such that it better recognises the strategic value and contribution of the offices of the OAA.

Use of project management methodology

The approach taken of using a formal project management methodology has been employed to great effect in the semesterisation project. This project, which has required full buy-in from the academic community and support departments is an example of good practice. It is evident that a wide range of staff in the OAA have been fully involved in this project and that their contributions to both planning and implementation have been valued. This project has also afforded the opportunity for staff to work in cross-functional teams both within the unit and across the institution. **It is recommended that such an approach should be employed in existing and future projects.**

It is further recommended that a light touch approach such as PMLITE should be considered when implementing future business process reviews. This would have the advantage of involving all relevant staff in the unit working in a matrix approach. It would also increase the visibility of the OAA across the University and hence recognition of the value of its work in supporting the institution.

Service Delivery and Structure

The PRG found evidence of a student-centred ethos throughout the OAA. Internal and external stakeholders spoke of the high level of accountability in relation to working with the student body.

Each office team takes ownership of the processes they manage and takes responsibility for the outcome of those processes. The staff respect the work of their colleagues in their own office and in

the other offices of the OAA. There is evidence that closely related functions are disaggregated both across the offices in the OAA and with other parts of the University. For example, aspects of the marketing function take place in the Admissions Office, the Colleges and the Marketing Office; some admissions are handled by the Admissions Office, some by the Graduate Studies Office and some by the International Office (Operations); finally, support for first year students is provided by both the Admissions Office and the Student Experience Office. The PRG recognises that some disaggregation of function is inevitable and indeed desirable, but it is likely that in some instances it may be reducing efficiency and causing confusion to service users. The PRG was told, for example, that sometimes students are sent to several different offices across the institution before their query is addressed. The planned cross functional Student Information Desk (the Student Hub) should reduce the confusion to service users, but the opportunity that will be provided by this development should also be taken to consider service efficiency.

Some confusion was also raised by those who use the website of the various offices. There is no overarching OAA website and thus there is some overlap of information. It is therefore timely that the OAA has begun to work on establishing a new CRM system for the University.

The PRG recommends that the OAA consider how to optimise its website to ensure information is presented from the perspective of users.

Building on the work already completed in some offices within OAA, the PRG suggests that the OAA should systematically complete the gathering of robust data on the use of their services, so that the OAA has comprehensive evidence of who uses the services, for what reason and how frequently. These data should then be used to assist in a thorough review of the business processes that are carried out within the offices. The aims of this review would be to make the processes more effective and efficient and to improve communications with users, thereby improving services and reducing staff-workload. The results of this review should also provide a strong evidence base for any necessary restructuring of the office teams and re-design of the services they provide, particularly in relation to the development of the Student Hub.

The PRG recommends that any major changes to the way services are delivered by the OAA (including via the new Student Hub) should be based on the information gained from a business process review such as that described above.

Institutional Visibility of the OAA

One of the recommendations made in the SAR refers to a need to raise the profile of 'admin' functions across the University by underlining the professional support and service provided by the OAA to the whole University community. The PRG endorses the importance of this recommendation for two reasons: first, because of the level of institutional risk that is managed by OAA and second because of the hidden strategic contribution the OAA makes.

Risk Management

From the meetings the PRG had with staff from outside the OAA two contrasting views emerged. The OAA is highly valued by colleagues who deal regularly with its offices, but for many staff in the University the work of the OAA is either invisible or taken for granted. Those least informed see it only as part of a frustrating bureaucracy. The low value apparently placed by many in the institution on the work of the OAA has had a detrimental impact on staff morale in the unit.

The Registrar and the Academic Secretary have both recognised the need to raise the visibility of the OAA's work and have, for example, given the Heads of Office the opportunity to present on their work to Academic Board and Academic Council as a way of gaining recognition, but there remains a need to get greater visibility of the OAA within the institution. **More specifically, the University**

needs to consider and understand the institutional risk if something goes wrong in OAA. The University's current approach to risk analysis, which is a 'top-down' 'cascading' risk register, may hide operational risks that have strategic consequences.

The OAA has recently undertaken a risk analysis and has developed a risk register. Based on a history of good risk management within the unit, none of the risks identified were scored to indicate major concern. Whilst there is a commendable desire not to be risk-averse, past history is not necessarily an indicator of future risk, and careful consideration should be given to the rating of impact and likelihood and the institutional awareness and management of the risks.

For example, the lack of investment in IT systems has resulted in an inability to automate processing and data entry. The current Student Record System is old and lacks the flexibility needed for current developments. There is not the staff capacity to dedicate to the implementation of a replacement, even if it were possible to purchase one. The OAA is therefore heavily reliant on manual processes which are not always well documented through Standard Operating Procedures and Service Standards. This risk is compounded by a demand to respond to changing business needs, such as the increasing complexity of student and programme types which add to the manual processes. The increased risk is not a result of a lack of planning and ambition in the unit but a consequence of the lack of resources and opportunities in the environment within which higher education in Ireland is currently operating.

Among staff in the OAA, there is a strong sense of accountability to both external and internal stakeholders, including students. This strong sense of professional responsibility is commendable. The downside is that with diminishing resource, staff work under increased pressure, particularly at peak periods during the year. Undoubtedly, the biggest risks in the OAA arise from individual members of staff being single points of failure. Therefore, the PRG fully endorses the recommendation in the SAR that the OAA should seek to overcome reliance on single individuals for specific functions by exploring opportunities for inter-office short-term staff transfers/secondments and intra-office rotation of functions. However a longer term solution will only be found by identifying where additional staff resource is required and then meeting that need.

Whilst key staff are in place the likelihood of a risk being realised is low, but if a key member of staff left and were not replaced, the risk level would change dramatically. An example of this would be the risk of failure to make accurate and timely returns to the HEA, which would have a potential financial impact. This risk is scored with a low probability because of the controls in place, because of the University's record in meeting deadlines, and because of the high confidence in the integrity of UCC's data. However, all of this is dependent on single individuals with expert knowledge who are not easily replaceable, and should be seen in the context of increasing demands from the HEA for information and a growing compliance culture to which UCC has to respond. There is a similar dependency on single individuals for many student life cycle processes: a current example is the examinations processes. In this context the requirement to implement major strategic initiatives without additional resource has put huge pressure on staff and increased the risks identified above.

The institution therefore needs to understand the risks that it is asking the OAA to carry.

The Role of the Academic Secretary

The Academic Secretary plays a pivotal role in the management and continuing development of the OAA. He plays an especially important role in ensuring that the services provided by the OAA continue to develop in line with the strategic direction of the University. As noted above, the PRG formed the view that key University-level decisions had been taken without a full understanding of the implications for service delivery or recognition of the time needed to safeguard the student experience by designing and implementing appropriate changes to processes.

Therefore, the PRG recommends that the University ensures that the OAA is allocated sufficient resources to allow the Academic Secretary to devote the necessary time to strategic development, project management and process reviews.

Staff Development

Although the SAR presented the seven constituent offices as separate entities, the PRG concluded that there is good communication between the offices even though individual staff tended to identify with their own office rather than the overall unit. The heads of office meet regularly (every two-three weeks) on a formal basis which aids internal co-ordination and communication. The PRG noted, however, that external stakeholders, both within and outside UCC, do not have a clear idea of the interrelationships of the individual offices.

The SWOT analysis and discussions during the visit confirmed that there is a perception amongst the OAA staff of a lack of training and staff development opportunities. The PRG formed the impression that staff only regard the formal staff training events provided by the HR Office as staff development. Staff regretted that they were often unable to attend these events because of their work commitments. They also explained that some training modules provided by the HR Office exclude certain grades of staff. The PRG concluded that the OAA should seek to use the knowledge and expertise of its own staff more systematically to provide regular in-house staff development.

The PRG was advised that staff titles reflect a grade rather than a role and that some staff felt their grade did not reflect the work they were doing. They also felt that the discrepancy between academic and non-academic promotion prospects should be addressed. Lack of formal acknowledgement of good performance was identified as an issue and it was suggested by staff that, given the current restrictions on promotion, the opportunity to participate in education/training provided by the HR Office could be offered as a reward.

The PRG recommends that the OAA builds on the existing knowledge and skills of its staff by identifying individual training needs and prioritising the provision of good quality in-house training, thereby lessening the emphasis on external training.

Elsewhere in this report the PRG raises concerns about the unit's dependence on individual staff. **Therefore, the PRG recommends that cross-functional training/secondments/job shadowing (i.e. learning another's job) be prioritised to reduce the OAA's dependency on single individuals in some key processes.**

The PRG also endorses the recommendation made in the SAR that new staff should receive an enhanced induction. This induction should cover the work of the whole unit not just that of the new member of staff's office. In addition, the PRG suggested that when staff move from one office to another within the OAA they should also receive a formal induction. Such an approach would ensure that their contribution to the work of their new office is maximised as quickly as possible.

Devolution of Processes and Institutional Governance

The PRG was told that the OAA has a role in overseeing the processes devolved to the four Colleges. A governance framework was provided by the Principle Statute and College Rules, which defines the role and responsibilities of the Colleges and central administration. During their discussions with staff of the OAA and Colleges, the PRG learned that some College staff seemed unaware of the framework's existence and had not engaged with it. Some staff did not understand how decisions about the devolution of processes had been taken within the context of a strategy which provided a rationale for devolution. The PRG was also told that some processes had been devolved

differentially (meaning some Colleges had more autonomy than others in relation to particular processes). Furthermore, a perception has developed amongst some academic staff that devolution has merely created more bureaucracy and a policing role for the staff of the OAA. The misunderstanding among some staff indicated the need for training in the operation of the devolved processes.

This lack of clarity about devolved processes has had a number of adverse consequences for the staff of the OAA. In particular, the lack of clarity about the locus of responsibility for various tasks, non-compliance with key deadlines, and the proliferation of different practices at College level mean that some of these processes appear to be less efficient than when they were managed centrally. An example, that was current at the time of the visit was the diversion of staff resource in the OAA to dealing with delays and mistakes in the conduct of the examination processes. Under the University's current system only the most serious errors in the examination processes are reported to the Academic Board which means that senior managers are not informed of the full extent of the problems and the OAA does not receive the support it needs at institutional level to ensure these problems are addressed robustly.

Therefore, the PRG recommends that the UMTO consult the Academic Secretary in detail in discussions and decisions about further devolution and/or the review of devolved processes so that it can be fully informed about the impact on the administration of these decisions.

Committee Structure and Servicing

The PRG was advised that the committee structure was changed a few years ago and that the IRIU report published in June 2013 had encouraged the University to review the effectiveness of the new structure with a view to reducing further its complexity. The current Governing Body Committee structure and Academic Committee structures have therefore arisen following review, and the Academic Secretariat has produced a handbook that specifies the terms of reference and delegated authority for each Academic Council committee. The College Committees are articulated in the College Rules approved under the Principal Statute by Governing Body and link with the Academic Council committees. For example the Chairs of the relevant College committees are members of the relevant Academic Council committee. The greater delegation of authority to College committees was intended to improve the speed of decision-making and policy development. The PRG was informed by the OAA that there is good evidence that this intention has been met but as yet there has been no formal evaluation of the effectiveness of the new committee structure.

However, the PRG found that the reporting lines and relationships between both institutional and College committees were unclear to some staff including some members of those committees, some of whom felt that the committee structure was complex and impeded decision making, thereby delaying policy formation and the initiation of new developments, and extending unnecessarily the approval and review and re-approval of programmes. It is clear that not all staff appreciate the progress that has been made in improving the effectiveness of the committee structure. The PRG concluded that it was important that the reporting relationships should be understood by committee members, which might therefore require some restatement of them.

The OAA is responsible for servicing the Academic Council and its sub-committees which, given the current structure, represents a very significant workload and inevitably reduces the time these key staff can devote to policy formation, development and implementation. Notwithstanding the recent committee review, the PRG was very struck by the number of committees and the consequent volume of work, and therefore raises the question of whether further efficiencies might be possible. They also felt that some of the work currently undertaken by committees might be

more effectively performed by Task and Finish Groups or, for on-going work, by an Officer, who could seek advice from designated managers when necessary.

Therefore, the PRG recommends that further consideration be given to the potential for streamlining the committee structure and the associated workload and to ensure that non-OAA staff understand where accountability lies for institutional level decision making and the oversight of devolved processes.

Quality Management

Following on from the earlier comments about the management of risk, of particular note are the risks associated with external strategic partnerships. UCC's collaboration with Cork Institute of Technology is an exemplar of the higher education partnerships envisaged in the National Strategy for Higher Education. UCC's national and international collaborations, established in alignment with National Strategy and contributing to the development of an internationally competitive higher education system, include alliances in Singapore, Malaysia and Shanghai. The PRG noted that the university has established an International Strategy which is being implemented through an International Steering Group, International Regional Groups and Income Generation Operational Groups. Yet these strategic developments have not been followed through with a clear implementation plan about how to manage the associated quality assurance risks and to resource that plan accordingly. The OAA has not been given sufficient resources in a timely manner to support the implementation of the International Strategy

Staff in the OAA play key roles in the quality management of external partnerships as they do with internal quality assurance, and the Registrar and the Academic Secretary both play leading roles. The University's narrative around quality assurance rightly places great emphasis on various kinds of external validation: peer review, external examining, programme approval and professional body visits. However, the University does not make the best use of its internal resources devoted to quality management. Different aspects of quality assurance are located in different offices both inside and outside the OAA, including the Academic Secretariat, Academic Programmes and Regulations and the Quality Promotion Unit. The benefits of a coordinated resource would be better than the sum of the parts. One possible way to achieve this would be by merging these units. **The PRG would therefore recommend that the quality assurance functions in the University, between the Quality Promotion Unit and the contributing parts of the OAA, be brought together.**

Accommodation

The PRG was pleased to note that the space used by the Systems Administration Office had been refurbished recently. They felt, however, that many of the other rooms used by the OAA were cramped and the geographical separation of some of these offices was not helpful to staff and students. Furthermore, student facing services are located in unsuitable offices. For example, the PRG saw students queuing in corridors outside old fashioned hatches while they waited to speak to a member of staff. The plan to provide new accommodation for the Student Hub may help to address some of these concerns.

Implementation of recommendations for improvement made in the last PRG report

The last peer review took place in 2004 and made a number of strategic and operational recommendations. The PRG was given a summary prepared in 2008 of the extent to which those recommendations had been implemented at that time. While some progress had been made in addressing the recommendations and some had been overtaken by other internal and external

changes, generally progress had been disappointing at the time of that report. The PRG was told that the recession, delays in appointing a new Academic Secretary and increasing external demands had all contributed to this delay. Further progress has been made in the last six years, but at the time of the review there was not a documented record of it. Whilst the PRG understood that the previous review was undertaken under different leadership and in a very different time and context for the area and for the university, the PRG nonetheless felt that the University's failure to respond comprehensively and in a timely way to those recommendations had been detrimental to the development of the OAA and the contribution it makes to the University.

Conclusion

The PRG has made a number of recommendations to the University which it hopes will help to raise the profile of the OAA and to develop, within the wider University community, a better understanding of its crucial importance. The PRG agreed with the recommendations made in the self-assessment report and have made some additional recommendations which are designed to build upon those recommendations and help the OAA continue to improve its services.

The PRG wishes to applaud the commitment and professionalism of the staff of the OAA. They identified many features of good practice, some of which are noted below.

Commendations

The PRG was very impressed by the high levels of expertise, skills and knowledge demonstrated by the OAA staff. They also noted the staff's willingness to take ownership of the services they provide and their strong sense of accountability for the quality of those services. The PRG also wish to commend the student focussed approach adopted by the OAA and noted the strong sense of shared values evidenced by the staff and their willingness to support each other. They were also very impressed by the extent to which staff of the OAA are valued by students and other staff and the good working relationships they have with internal and external stakeholders.

The PRG commends the commitment of the OAA to maintaining service delivery during a period of severe resource constraint and the pragmatic approach taken by staff to dealing with problems.

The PRG also commends the formal project management methodology which has been employed to great effect in the Semesterisation project.

Lastly, the PRG wishes to acknowledge the quality of the SAR which they found to be clear, comprehensive and reflective. They particularly appreciated the willingness of participants to engage fully with the peer review process and their openness during discussions.

Recommendations

As noted above the PRG endorsed the recommendations made in the SAR. In addition the PRG recommends that:

- the approach adopted by the OAA to the management of the Semesterisation project be used as an exemplar for the implementation of other projects;
- the University, in its approach to strategic planning, should recognise wider contributions to institutional strategic themes than that made by particular managerial units, such that it better recognises the strategic value and contribution of the offices of the OAA.;
- project management techniques used for the semesterisation project be streamlined as appropriate and used as a template for a thorough business process review of the functions performed by the OAA;
- any major changes to way services are delivered by the OAA (including via the new Student Hub) should be based on the information gained from a business process review such as that described above;
- the University needs to consider and understand the institutional risk if something goes wrong in the OAA;
- the University should ensure that the OAA is allocated sufficient resources to allow the Academic Secretary to devote the necessary time to strategic development, project management and process reviews;
- the OAA builds upon the existing knowledge and skills of its staff by identifying individual training needs and prioritising the provision of good quality in-house training, thereby lessening the emphasis on external training;
- the UMTO consult the Academic Secretary in detail in discussions and decisions about further devolution and/or the review of devolved processes so that it can be fully informed about the impact on the administration of these decisions;
- further consideration be given to the potential for streamlining the committee structure and the associated workload and to ensure that non-OAA staff understand where accountability lies for institutional level decision making and the oversight of devolved processes;
- the quality assurance functions in the University, between the Quality Promotion Unit and the contributing parts of the OAA, be brought together;
- services provided through the Student Hub be re-designed on the basis of evidence about their current usage and following a thorough review of the business processes underlying those services;
- consideration be given to optimising the website to ensure information is presented from the perspective of users.

**PRG SITE VISIT
TIMETABLE**

In Summary

- Monday 19 May: The PRG (PRG) arrives at the River Lee Hotel for a briefing from the Director of the Quality Promotion Unit, followed by an informal meeting with Unit staff members.
- Tuesday 20 May: The PRG considers the Self-Assessment Report and meets with unit staff, student and stakeholder representatives. A working private dinner is held that evening for the PRG.
- Wednesday 21 May: The PRG meets with relevant officers of UCC. An exit presentation is given by the PRG to all members of the unit. A working private dinner is held that evening for the PRG in order to finalise the report. This is the final evening of the review.
- Thursday 22 May: External PRG members depart.

Monday 19 May 2014	
16.00 – 18.00	<p>Meeting of members of the PRG. Briefing by: to be confirmed. Group agrees final work schedule and assignment of tasks for the following 2 days. Views are exchanged and areas to be clarified or explored are identified.</p> <p>Venue: Tower Room, River Lee Hotel</p>
19.30	<p>Dinner for members of the PRG & SAR Co-ordinating Committee: Professor Paul Giller, Registrar and Senior Vice President Academic Mr. Paul O’Donovan, Academic Secretary Dr. Jennifer Murphy, Admissions Officer Ms. Michelle Nelson, Head of Graduate Studies Office Mr. Noel O’Sullivan, Technical Support, Systems Administration Ms. Angela Manley, Administrative Assistant – Student Records & Examinations Office Ms. Eleanor Fouhy, Head of Office of Academic Programmes and Regulations Ms. Carmel Jordan, International Education Office (Operations), Senior Executive Assistant</p> <p>Venue: Weir Bistro, River Lee Hotel</p>

Tuesday 20 May 2014

Venue: Tower Room 1, North Wing, Main Quad
(unless otherwise specified)

08.30 – 08.45	Convening of PRG	
08.45 – 09.30	Professor Paul Giller, Registrar and Senior Vice President Academic Mr. Paul O'Donovan, Academic Secretary Ms. Áine Flynn, Head of Academic Secretariat	
09.30 – 10.30	Group meeting with all OAA staff Venue: Council Room, North Wing	
10.30 – 11.00	Tea/coffee	
11.00 – 13.00	<p>Private meetings with individual staff members</p> <p><u>Group 1</u></p> <p>11.00: Ms. Nóirín Deady 11.15: Ms. Danielle Byrne 11.45: Ms. Margaret Coakley 12.00: Ms. Michelle Nelson 12.30: Ms. Marita Foster, Ms. Suzanne Buckley, Ms. Ciara McKiernan, Ms. Carmel Jordan 12.45: Ms. Aideen Creedon, ACE</p> <p>Venue: Tower Room 1</p> <p>*See back of timetable for full title and office</p>	<p>Private meetings with individual staff members</p> <p><u>Group 2</u></p> <p>11.00: Ms. Eleanor Fitzgerald 11.15: Exams Records Staff (9 ppl) Ms. Mary Mac Donald, Ms. Margo Hill, Ms. Helen O'Donovan, Ms. Alison Bowdren, Ms. Angela Manley, Ms. Yvonne Creedon, Ms. Jennifer Barrett, Ms. Anne Bradford, Ms. Siobhan Lavery 12.30: Ms. Helen O'Donoghue, HR</p> <p>Venue: Tower Room 2</p>
13.00 – 14.00	Working lunch	
14.00 – 15.00	Visit to core facilities of Unit, escorted by Mr. Paul O'Donovan, Academic Secretary.	
15.00 - 15.40	<p><u>Representatives of function areas within OAA</u></p> <p>Ms. Áine Flynn, Head of Academic Secretariat Ms. Marita Foster, International Education Officer Acting Ms. Eleanor Fouhy, Head of Office for Academic Programmes and Regulations Ms. Mary MacDonald, Student Records and Examinations Officer Mr. John McNulty, Head of Systems Administration Dr. Jennifer Murphy, Admissions Officer Ms. Michelle Nelson, Head of Graduate Studies Office</p>	
15.40 – 16.20	<p><u>Representatives of stakeholders within UCC</u></p> <p>Mr. Jerry Buckley, Manager, Enterprise Applications, Computer Centre; Mr. Ger Culley, Director of IT Services</p>	

	<p>Ms. Angela Desmond, Manager, School of Education, Programme Team; Dr. Bettie Higgs, Interim VP for Teaching and Learning; Dr Liam Marnane, Dean of Graduate Studies, School of Engineering, member of Academic Board and Academic Council; Professor John McCarthy, Head of School of Applied Psychology and member of Academic Board and Academic Council; Ms. Kate O'Brien, College Manager Science Engineering & Food Science; Mr. Colman Quain, College Manager Business & Law; Ms. Anne Wallace, Student Recruitment & Liaison Officer, College of Business and Law; Ms. Donna O'Driscoll, Director of Marketing and Communications; Dr. Rhona O'Connell (Nursing and Midwifery) and member of Academic Council Academic Development and Standards Committee;</p>
16.20 – 16.55	<p><u>Representatives of Students</u></p> <p>Ms. Margaret Buckley, PhD Sociology, year 1 Mr. Stephen Butler, MSc Biotechnology, year 1 Mr. Eamonn Culligan, PhD Microbiology, year 6 Mr. Paul Finn, M.Ed Modular, year 1 Ms. Roicin Healy, B Comm, year 2 Ms. Aisling Lydon, BMus, year 3 Ms. Sarah Kandrot, PhD Geography, year 3 (international student) Ms. Hazel Smith, PhD Paediatrics and Child Health, year 2 Mr. Aonghus Sugrue, Thematic PhD, Business Information Systems, year 5 Mr. Wesley Van Oeffelen, Thematic PhD Clinical and Translational Research, year 3</p>
17.00 – 17.15	<p><u>Conference call with Irish Management Institute</u></p> <p>Dr. Mary Hogan, Registrar at Irish Management Institute (IMI)</p>
17.15 – 18.00	<p><u>Representatives of stakeholders, past graduates and employers</u></p> <p>Dr. Dan Collins, Academic Administration & Student Affairs Manager, Cork Institute of Technology Ms. Gillian Crowley, Guidance Counsellor in Pobalscoil na Tríonóide, Youghal Dr. Brigit Lucey, Cork Institute of Technology (Examinations)</p> <p>Venue: Staff Common Room, North Wing, Main Quadrangle</p>
19.00	<p>Meeting of PRG to identify remaining aspects to be clarified and to finalise tasks for the following day, a followed by a working private dinner.</p> <p>Venue: Tower Room, River Lee Hotel</p>

Wednesday 21 May 2014

Venue: Tower Room 1, North Wing, Main Quad
(unless otherwise specified)

08.30 – 09.00	Convening of PRG
09.00 – 09.30	Professor Paul Giller, Registrar and Senior Vice-President Academic
09.30 – 09.50	Professor John O’Halloran, Chair of Academic Council Teaching & Learning Committee and member of Academic Board and Academic Council. Incoming Vice President for Teaching and Learning
09.50 – 10.10	Dr. Ian Pickup, Head of Student Experience
10.15 – 10.40	Mr. Cormac McSweeney, Head of Management Accounting, Finance Office
10.40 – 11.00	Mr. Paul O’Donovan, Academic Secretary
11.15 – 11.45	Tea/coffee
11.45 – 12.15	<u>Chairs of Academic Council Committees</u> Dr. Joan Buckley, Chair of the Mitigation Committee; Professor Kathy Hall, Chair Student Experience Committee; Professor John Morrison, Chair of the Information Strategy and Education Resources Committee (IS&ER); Professor Geoff Roberts, Chair of the External Examiner (Sub Committee of ADSC); Professor David Ryan, Chair of the Graduate Studies Committee Dr. Ed Shinnick, Dean of Commerce, Chair of the Examination Appeals Committee
12.30 – 13.00	Dr. Barry O’Connor, Registrar and Vice President for OAA, Cork Institute of Technology
13.00 – 13.10	Mr. John McNulty, Head of Systems Administration
13.10 – 14.00	Working lunch
14.00 – 16.15	Preparation of first draft of final report
16.15 – 16.45	Professor Paul Giller, Registrar and Senior Vice President Academic Mr. Paul O’Donovan, Academic Secretary
17.00 – 17.30	Exit presentation to all staff, to be made by the Chair of the PRG or other member of PRG as agreed, summarising the principal findings of the PRG. This presentation is <u>not</u> for discussion at this time. Venue: Council Room, North Wing
19.00	Working private dinner for members of the PRG to complete drafting of report and finalisation of arrangements for completion and submission of final report.

	Venue: Tower Room, River Lee Hotel
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*Tuesday 20th May - Individual Staff Meetings:

	Group 1 – Tower Room 1		Group 2 – Tower Room 2
11.00	Ms. Noirin Deedy , First Year Experience Coordinator, Admissions Office	11.00	Ms. Eleanor Fitzgerald , Data Analyst, Systems Administration Office
11.15	Ms. Danielle Byrne , Schools Liaison Officer, Admissions Office	11.15-12.15	Ms. Mary MacDonald , Student Records and Examinations Officer, Ms. Margo Hill , Examinations Administrator, Ms. Helen O'Donovan , Records/Registration Administrator, Ms. Alison Bowdren , Administrative Assistant Ms. Angela Manley , Administrative Assistant Ms. Yvonne Creedon , Executive Assistant Ms. Jennifer Barrett , Executive Assistant Ms. Anne Bradford , Executive Assistant Ms. Siobhan Lavery , Senior Executive Assistant
11.30	Ms. Margaret Coakely , Graduate Studies Office	12.30	Ms. Helen O'Donoghue , HR Business Manager
11.45	Ms. Michelle Nelson , Head of Graduate Studies Office		
12.00	Ms. Marita Foster , IEO Officer		
12.15	Ms. Aideen Creedon , Adult Continuing Education Manager Ms. Lyndsey El Amoud , Business Development Manager ACE		

Student Experience Office – Peer Review Group Report

Peer Review Group Members

Name	Position/Discipline	Institution
Mr Brian Gormley	Manager of Campus Life	Dublin Institute of Technology
Mr Pdraig Haughney	Student Union President	University College Cork
Dr Bettie Higgs	Co-Director of Ionad Bairre and Senior Lecturer, School of BEES	University College Cork
Mr Stephen McAuliffe	Academic Registrar	University of Essex
Ms Denise McCarthy	Deputy President & Vice President	Union of Students of Ireland

Peer Review Group Report

Methodology

A SAR was prepared by the SEO and made available to the PRG prior to the site visit. The Group appointed Dr Bettie Higgs as Chairperson of the Peer Review Group. The Group also appointed Mr Brian Gormley as the rapporteur of the group. The Group acted as a single group throughout the site visit, with the exception of the Private Meetings with Staff Members on Day One, where the group split into two.

All members took shared responsibility for questions and topics and for drafting sections of the report. An initial draft of the report was prepared during the afternoon and evening of the second full day of the site visit. The report was finalised subsequent to the site visit using email communications and submitted to the Quality Promotion Unit. However all sections of the report were then finalised and agreed by the whole group.

The group noted that the SAR report and subsequent site visit, allowing follow-up discussions with staff, students, and stakeholders, and the tour of facilities, was very beneficial in informing the PRG report.

Overall Analysis

Self Assessment Report

The SAR of the SEO was very well prepared, following extensive consultation with staff and students. The PRG was impressed with the clarity and coherence of the document, and judged that a lot of time went into the preparation. The document showed close alignment to, and allowed the PRG to assess progress with, the institutional Strategic Plan for the Student Experience. The staff in the SEO who were part of the multi-disciplinary committee who oversaw the putting together of the SAR commented on how they felt that the process itself had facilitated better understanding and collaboration between the services in the SEO. The recommendations reflected this, and were coherent with the Strategic Plan.

The SAR appendices were extensive and comprehensive and most questions could be answered by referral to the appendices. It was possible to follow up, during the site visit, on a number of areas that needed clarification.

It was noted that:

- there had been a disappointing response to the staff survey. The high frequency of requests to staff to fill out surveys was thought to be a contributing factor.
- the PRG would have liked to see more detail relating to resource allocation, and in particular, the structures and accounts of the three campus companies. These companies operate significant student facilities that impact on the student experience in UCC. However, this was beyond the scope of the SAR. Given the impact of the campus companies on the student experience, the issue of supportive and interdependent provision is likely to present challenges for future PRGs. It may be worth the Quality Office considering how to address this without witnessing extensive PRG remit sprawl.
- more specific reference to the role of SEO in the student academic experience could have been included. For example, to link SEO recommendations to staff comments “More integration between the Student Experience and the academic departments” and “meeting with academic staff/lectures” and “need to get buy-in from academic departments”. The OVPTL should have been included in ‘interaction with other services’ in the staff questionnaire.

The reports prepared in November /December 2013 were useful in giving context for the services within the SEO.

The services in the SEO are to be commended on completion of recommendations from previous quality reviews. The PRG agree that some strands of the SEO require an institutional response to address the recommendations of the previous reviews (details given in appendices 1a to 1g), in particular:

- The Accommodation office is less well resourced than previously, and has not been consulted when decisions are made that affect student accommodation. The ability to connect to the university student information management system would reduce the administrative workload, and allow the experience of students to be greatly enhanced.
- In the Career Service the PRG noted that there is still no designated contact in each School within UCC.
- Increased Funding is required by the Department of Sport for qualified coaches, and improved changing facilities.
- Space provision is needed for Student Counselling and Development, and additional resources to ensure the institution meets its obligations.
- Funding for adequate professional development in Student Health Department is needed, as well as fulltime health promotion officer.

SWOT Analysis

A SWOT and PEST analysis was included within the Self-Assessment Report (7.1) and a detailed review was included in appendix 12. The approach of using themes did enable a wider consideration of the strengths, weaknesses, opportunities and threats than would have otherwise been possible if

the focus had remained simply on the various sub-departments. The PRG noted that this approach is helpful in considering the wider student experience as it reaches beyond individual units.

The thematic approach to the SWOT/PEST analysis, by those involved, produced clear statements to interrogate in subsequent discussions with SEO staff, the SEO benchmarking activity and the student focus group activity. The PRG agree that the significant strengths identified should be a source of pride across the SEO. These include work within health promotion, alcohol prevention, student safety, life skill development, career skills development, support for access students, use of assistive technology, outreach work with schools, peer support, levels of engagement in extracurricular activities, and provision of accommodation. These areas of perceived strength do have a critical role to play in supporting the student's academic experience, and the university's academic mission.

The SWOT emerged from a meeting of Student Experience Heads of services and the SEO quality review committee. It is not clear whether or not there was an external facilitator. The PRG felt there was a missed opportunity to bring together the entire staff of the SEO for a facilitated round table SWOT/PEST analysis. Whilst adopting a top down approach in the development of the SWOT, it is commended that all staff of the SEO were able to engage in the final drafting of the analysis.

The SWOT analysis only gave limited consideration to sport; whilst the analysis recognised the value of the excellent facilities it did not effectively articulate the weaknesses with the current operational model that were apparent to the PRG (see later in the report). In the view of the PRG, this gives rise to a risk that the university will be unable to capitalise on excellence and experience to deliver a holistic approach to participation in competitive and recreational sport.

The confidence and pride of the SEO team is obvious when reviewing the strengths (and rightly so). The challenge for the SEO and SSG leadership relates to addressing a number of threats that are outside of their control such as the economic environment, recruitment/head-count limitations and a potentially damaging perception that there is a split between academic and professional services staff in terms of priority or value-added to the University. Only the University's senior leadership can effectively address this latter element and they may do well to consider the strengths identified in the SWOT (and the strategic value they offer the institution) as articulated within the analysis.

In considering weaknesses, and opportunities, the PRG strongly endorses the need for improved linkages between services within the SEO, as well as with other units of the university. This would allow some efficiencies in use of resources, but more importantly could create more effective services, and new services, to be able to respond flexibly to changing student needs.

Some of the perceived weaknesses were outside of the control of the SEO such as the layers of management in the institution that can affect efficiency. The perceived weaknesses under the Student Welfare and Well-being theme are particularly crucial to the student experience, and were raised repeatedly during site visit discussions. The social issues highlighted under all themes are particularly challenging, and it is useful to have these listed in order to prepare actionable next steps.

Benchmarking Exercise

The Student Experience Office was benchmarked against two other Universities: Trinity College Dublin and the University of Edinburgh. The Benchmarking exercise was comprehensive and the two benchmarked institutions were sufficiently different to enable different models of student services to be examined. This useful exercise provided interesting comparisons whilst displaying some wide variations. The benchmarked institutions had more resources in some cases than that of the SEO, this lead to the conclusion that the SEO need to foster collaborative approaches and more synergy to maximise existing resources and services.

Findings of the Peer Review Group

The PRG was impressed with the operation of the SEO. Although the current formulation of the SEO has only been in existence for a year as an holistic entity, there are clear indications that it has improved collaboration and communication between individual services.

It was also clear to the PRG that the Student Experience Office and services contribute to the Graduate Attributes, Student Engagement; and retention of UCC students. This should be explicitly valued and supported by the senior leadership of the University, and it should be acknowledged that the learning that takes place through involvement with student activities and services provides a vital underpinning of students' academic experience.

Staff development:

The SEO has recruited staff with considerable ability and commitment to the students and the institution. The Heads of services in the SEO should continue to seek to release the full potential of these individuals, and seek to align roles and responsibility with skills and identity, while cognisant of organisational resourcing needs.

The PRG commends the collaboration involved in the development of the SAR and the Peer Review Group visit. The process of rationalising and delivering the plan should be used as a process to build and support staff networking and collaboration and should provide opportunities for CPD. The PRG recommends monthly information sessions and change management training to support this process.

The PRG welcomed the fact there is now a training/staff development budget for staff in the unit. There should be an expectation that all staff engage in continuous professional development throughout their career, including study visits such as those funded through Erasmus, and relevant conferences and courses. SEO should continue to create opportunities for people to broaden their work experience through committee work and transfer to different jobs, including internal exchanges and external secondments.

Skilled staff would like to be able to contribute in a variety of ways, but sometimes feel 'robotic' and drained through very repetitive, albeit important, work. Staff who have the ability and willingness to adapt in the changing HE landscape, and according to the changing needs referred to in the SAR, should be valued and rewarded. The PRG suggests that they should be encouraged to take on new and different roles as may be required in the future. This will require avoidance of narrow specialist labelling of job holders. The SEO needs to work overtly with job holders to plan and develop careers,

with the knowledge that professional silos can inhibit career progression and cause people to get 'stuck'. Staff could be encouraged to avail of career development services available to the students.

Promoting the benefits of working in professional services in HE, and improving the image of professional service staff, could help with the appearance of a sharp divide between academic and administrative roles. The PRG suggests that the HoSE facilitate a discussion with senior management about the future requirements of career development frameworks and grading structures within the institution for all staff, and in particular those with relevant professional qualifications. The Leadership Foundation reports which seeks to rethink the traditional boundary between academic and administrative staff would be helpful in this regard.

Governance

An issue which was raised repeatedly by many internal stakeholders (both staff and students) was the impact of the campus companies on the student experience. In particular the interviewees raised the relationship between the campus companies and student organisations, and the relationship between the campus companies and the SEO. This issue was raised more in relation to the Mardyke Arena and the Student Centre, whereas UCC Campus Accommodation was the subject of positive comment, and seemed to have established a positive working relationship with student leaders.

The relationship between the student leaders and the campus companies: It was noticeable that, whereas the student panel that PRG interviewed seemed to be happy with the service they received from the campus companies, this was not the case with student leaders. Students who were involved in organising events in both the Mardyke Arena and the Student Centre expressed unhappiness about the costs involved and/or their lack of influence in effecting change – particularly as both projects had been funded through student levies (known as the capitation charge in UCC). This feeling of exclusion by student leaders from the project will need to be addressed, as it will have a negative impact if UCC seeks to fund any future projects via a student levy.

The campus companies have a significant impact on the Student Experience in UCC. In some instances it seemed that some duplication was occurring or developing between UCC student services and services operated by the campus companies – an example would be the operation of an Information Desk in the Student Centre and the development of a One-Stop-Shop Information Desk in The Hub. In other cases, there appeared to be synergies which were not being exploited. For example, UCC has award winning student publications operating under the Students Union, and a successful Radio Station managed by the Student Centre. Both are increasingly web-based media. Bringing the various media groups together physically would allow greater sharing of production facilities and content to improve the offering of both groups and also improve the development opportunities for the students who are involved. While the current Board structure is sufficient for corporate governance it is insufficient for holistic oversight and linking to the student experience. The PRG would recommend greater coherence and cooperation between the different groups, which would involve much tighter links with the SEO and the HoSE.

In discussions with Students Union Officers, the issue of maintaining the independence of the Students Union was raised several times. It was noticeable that all student leaders praised the work and support of the Students Union staff and Administrative Officer, who are employees of the

University. The staff are to be commended for their work in this area. In order to reassure the Students Union sabbatical officers, it may be useful to develop a Memorandum of Understanding between the Students Union and the University. The National Union of Students in the UK have developed a model for such an agreement, which could be adapted for the situation in Ireland. This Good Governance document emphasises the value of having a strong, independent, student-led Students' Union empowered to determine and manage its own affairs, and also recognises the need for the university to balance the interests of a range of stakeholders within an increasingly challenging external context. The document can be found here:

http://www.nusconnect.org.uk/asset/News/6054/NUS-GoodGovernance_Pocket-Guide.pdf

Services

In reviewing the Student Experience survey, and meeting with the student panel (non-officers) in UCC, it is clear that the UCC student services have high satisfaction ratings, and these are to be commended, particularly after a period of cutbacks and resource reductions.

The PRG was impressed by the commitment and enthusiasm of the staff, which is also to be commended. Many of the staff were working in facilities that were often cramped and relatively inaccessible, and the services had shown impressive innovation in making best use of these spaces.

The SEO offers the full range of services outlined in the 2006 IUQB document "Good Practice in the Organisation of Student Support Services", and has shown innovation and foresight in developing these services further – for example in the provision of the Budgetary Advisor, and the provision of the Mature Student Common Room. The SAR noted that some of the UCC initiatives, such as UCC Health Matters and UCC Works are examples of "best practice" in Ireland, and the PRG would agree with this view.

It was noticeable that the introduction of the SEO has already increased collaboration between the services. The PRG commends the openness of the staff to collaboration, and would support the introduction of further structures and processes to support such collaboration.

The work that the Careers Service has carried out with the colleges and schools to develop work placements is to be commended. Some external stakeholders mentioned that there was a lack of consistency throughout UCC in how an employer would seek to fill a work placement. These employers mentioned University of Limerick in particular as a University where there was one process, and one contact point to recruit all their Interns. More work should be done to bring consistency to the work placement programme in UCC. External stakeholders highlighted that, as well as links with employers, linking with second level institutions by SEO is vital. Positive pathways to enable mature students to access third level should be identified in cooperation with associated units. Collaboration with the Admissions Office is to be commended in this regard.

Staffing

The issue of staffing resources was raised during the PRG visit, often in the context of job security and career progression. For some staff there seemed to be a perception of a lack of fairness in staffing decisions – this may be more an issue for HR than for the SEO, but if the rationale for the decisions was communicated more clearly it may alleviate this perception.

Many student leaders requested that the Student Budgetary Advisor position be extended from the current part-time role. Clearly there is a demand for the service. The PRG suggests that a study be done into the impact of service on retention before a decision is taken on this issue. The PRG was surprised when informed that the Mature Student Common Room is staffed while open, and it would appear that a technological solution could be found to ensure suitable supervision of the room, which would free up some funds.

The University is to be commended for ensuring that the services within Equal Access Fund area are adequately resourced. In line with best practice, we suggest that these services continue to develop services and resources that are mainstreamed and accessible to the entire student population - red.ucc.ie is a good example of this.

Staff care / supervision: Staff in some services appeared to be using the Employee Assistance Programme as supervision/counselling. It is not clear to the PRG if the EAP is designed to be used as staff supervision. The PRG suggests that appropriate supervision structures be put in place for SEO staff dealing with students in crisis.

Accommodation

During the site visit, the PRG became aware of the dispersed nature of the support services. It was informed that the support services are dispersed over 22 different locations. The dispersed nature of the buildings hinders good referrals between services, collaboration and sharing of resources, and in particular, creates a difficulty for students in finding services.

The Assistive Technology Lab, run by the Disability Support Office, is a modern facility, located in a central highly accessible area. The area available, within the Boole Library, has recently been extended due to high demand for use of the facilities. Students registered with the DSO are free to come and go, using the facilities as need arises. There is some scope for future expansion within the library if this was identified as a priority by Senior Management.

Many of the other services were housed in buildings that were previously domestic residences. Although work had been carried out to improve accessibility to ground floor offices, disabled access to services on upper floors was not possible. (This needs to be addressed as a matter of priority). Many of the buildings seemed to be full to capacity.

From all reports, the provision of a Mature Student Common Room was very much welcomed, and the office is commended for acquiring this facility. However the space has proved not large enough to cater for the demand. It serves a valuable role as a meeting area for students with common concerns and challenges, in a pressure free environment where they can enjoy a cheap cup of tea or coffee. The PRG did not see the need for a permanent person employed to sit by the door, to oversee charges for printing, etc. Access was not allowed to the mezzanine.

The Meditation Room / Prayer Space in the Iona Building is at the top of the building.. Staff are to be complimented for the use they have made of an awkward space, and students from many faiths seem to be using the facility. However, the space is not accessible for those who are mobility impaired, and foot washing facilities are not available. Students who wish to wash their feet before prayer must use the toilets on the ground floor. From talking to students, there is a suitable prayer space in Brookfield, and students have also been facilitated in developing appropriate prayer spaces

in the student accommodation. However, with the increasing diversity of the student population, and increasing international student numbers, it would be appropriate to develop a more fit for purpose quiet space which could be used for worship by multiple faiths.

The waiting room in the Student Health Centre is small, and additional space would ease the situation.

The information desk in the Student Centre dispenses general information of value to students and visitors, but is not a one-stop shop for student services.

The development of The Hub will do much to improve the accessibility of these student services. There was a feeling that services cannot wait for 2017 and The Hub, and that all possible actions should be taken to get services into spaces that are fit for purpose in the interim period.

In order to ensure that services that cannot move into The Hub do not become disadvantaged, the scope of The Hub project must be expanded to ensure that the space exited by services moving into The Hub is utilised to ensure that the remaining services are in spaces that are fit for purpose.

The PRG was surprised at the contrast between the Mature Student Common Room and the Staff Common Room, and in other areas we saw students denied periodic access to otherwise empty facilities (for example the cinema in the Windle building). The PRG recommend that action is taken to prioritise quality space for students. For this reason it would be helpful to have a student representative on the Space management Committee.

The PRG recommends that there is a review of space allocated to the Student Experience, including within the Student Centre to identify better space for societies. Again, it would emphasise that it is important to take action on this issue before the delivery of The Hub in 2017. For example, there is potential to develop a student media hub for publications and Film Society near the campus radio station in the Student Centre. This would allow synergies between the media production groups to be exploited.

Financing

The Finance Office noted that the funding to the student organisations had been maintained despite cutbacks in other areas, and the Finance Office is to be commended for this. The PRG was assured that the allocation of the student charge money was in line with the HEA guidelines contained in the Review of the Student Charge (2010). However, the student leaders we met were unclear on how the student charge money was allocated, and also how the student levy money was collected and allocated. It would be helpful if the Finance Office set out these processes in a more transparent manner.

The PRG commends how staff in the SEO have developed innovative programmes, such as Ulink, UCC Works and the Health Matters initiative, with limited resources. The strategic plan is ambitious, and will require the re-allocation of resources, and the PRG was unsure how much flexibility the HoSE will have under the Resource Allocation model.

The grouping of Conferencing, Accommodation and Societies together in one Unit struck the PRG as unusual. The unit appeared to work well and to be achieving its aims. However the PRG was still

unclear why Conferencing was based under the SEO. It was also unclear how closely Conferencing worked with the campus companies. If the Conferencing unit does not generate funds for the SEO, it should be reviewed to consider whether the current structure is the most effective for the SEO and the University.

Communications

As one interviewee commented, every review will recommend an improvement in communications. It is clear that the creation of the SEO has already resulted in an improvement of internal communication, which is to be commended. The PRG strongly recommends that the SEO further develop the links that have already been created with the Marketing and Communications Office. The PRG commends the links that the Societies Guild has developed with Alumni. The PRG recommends that the SEO work with the services and the Development Office to assist them in identifying how they can work with Alumni, for example to develop Alumni mentoring roles; Alumni supporting interns and work placements in their companies; etc.

The student group reported that evening class students are not advised of many of the services available to them. There is not an equivalent student orientation for them, or class rep training, etc. This needs attention, especially as the institution aims to grow the number of part-time, flexible learning students.

Commendations

1. The services in the SEO are to be commended on completion of recommendations from previous quality reviews, which demonstrates that the Quality Review purpose has a real impact in sustaining and enhancing quality in the University.
2. The PRG commends the collaboration, and the deep involvement of staff across the SEO, in the development of SWOT/PEST, the SAR and the Peer Review Group visit. The PRG commends the openness of the staff to collaboration.
3. The PRG commends how staff in the SEO have developed innovative programmes, such as Ulink, UCC Works and the Health Matters initiative, with limited resources.
4. It was noticeable that all student leaders praised the work and support of the Students Union staff and Administrative Officer, who are employees of the University. These staff are to be commended for their work in this area.
5. In reviewing the Student Experience survey, and meeting with the student panel in UCC, it is clear that the UCC student services have high satisfaction ratings, and the staff are to be commended for maintaining high standards, particularly after a period of cutbacks and resource reductions. The PRG was impressed by the commitment and enthusiasm of the staff, which is also to be commended.
6. The work that the Careers Service has carried out with the colleges and schools to develop work placements is to be commended.
7. The University is to be commended for ensuring that the services within Equal Access Fund area are adequately resourced.
8. The Finance Office is to be commended for maintaining the level of funding to student organisations during a period of cutbacks.
9. The PRG commends the links that the Societies Guild has developed with Alumni, and the stated objective of the Societies Guild to develop these connections further.

10. The PRG commend the initiative of establishing the Mature Student Common Room which has proved a very popular and appreciated facility for this cohort.
11. It is clear that the creation of the SEO has already resulted in an improvement of internal communication, which is to be commended. The PRG commends recent strategies aimed at 'Closing the loop' on the student experience survey.
12. We commend the development of the KPIs
13. There was much good practice in engaging with the student voice on committees; this is to be commended.
14. The work of the Societies Guild in developing a strategic approach to delivery is commended.

Comments on SAR recommendations

We have looked at these recommendations, the majority of which we support, however we would strongly suggest that a prioritisation process be developed, with timelines (short-, medium-, long-term), to ensure resources are allocated to the most effective projects:

Recommendation 1 - The PRG commends and supports the recommendation that the development of the Student Hub remains a top strategic priority for UCC. While we support this recommendation, we shouldn't ignore the requirement for business processes re-engineering to create and capture the synergies and efficiencies that will ensure that the quality of the student experience is at the centre of the project.

The PRG also considers that the development of an effective, sustainable virtual hub is a priority, to support students who won't see the development of the Hub, or who may be off-campus, part-time students or from other cohorts who couldn't easily access the physical Hub.

The PRG also felt that it was important that a Project Manager familiar with BPR and lean-processes be appointed to assist with the implementation of the numerous change projects outlined in the SAR.

Recommendation 2 – The PRG support this recommendation that the work of the SEO continues to be shaped and developed through a cross-service, thematic framework and that this should be developed to include the adoption of a more structured project methodology. The PRG commends the establishment of Student Experience Project Board using the governance structures of SSG, SSG+ and SMG. We strongly recommend that the three campus companies are involved in this Project Board.

As this will be a resource intensive period, and the additional workload has been identified as a key risk, the PRG would like to challenge each service to identify some area where less important items can be suspended, or processes can be re-engineered to remove unnecessary steps (Lean methodology). This is to free up time to work on strategically important items identified in the project plan.

Recommendation 3 – The PRG is supportive of the recommendation that project strands should be monitored and evaluated for impact throughout the process. We commend the development of the KPIs, and suggest that the KPIs be supplemented by richer qualitative data which might capture complex outcomes and outputs, i.e. a balanced scorecard approach.

Recommendation 4 – The PRG is supportive of the recommendation that those existing activities and projects which are clearly demonstrating a positive impact on the student experience are continued and further developed where possible. We commend the stated objective of the Societies Guild to develop connections with their Alumni. We recommend that the SEO work with the services and the Development Office to assist them in identifying how they can work with Alumni, for example to develop Alumni mentoring roles; Alumni supporting interns and work placements in their companies; etc.

Recommendation 5 - The PRG supports the recommendation that staff development opportunities should be prioritised in keeping with the strategic project developments. We commend the collaboration involved in the plan. The process of rationalising and delivering the plan should be used as a process to build and support networking and CPD.

- The PRG suggests monthly information sessions and change management training to support process.

- The risk of work overload was identified in Recommendation 2, and related to Staff care / supervision. Some staff in services appeared to be using the Employee Assistance Programmes as supervision. The PRG suggests that supportive structures including the provision of appropriate supervision be put in place for staff dealing with students in crisis.

Recommendation 6 – The PRG supports the recommendation that all opportunities for increasing budget and resource levels should be urgently explored. We note that the proposal on the extension of the capitation to a larger proportion of the student body has been implemented, although it's not clear what consultation with the student body took place. We also suggest that there is a more transparent presentation of split of student charge – in line with framework of good practice on student charge (HEA 2010).

The PRG suggests that the data from the UCC Student Experience Survey be analysed to identify which services are disproportionately used by International students.

Recommendation 7 – The PRG supports the recommendation that the Peer Support programme should be further developed. The PRG commends the work of the uLink Coordinator, and recommends the peer support programme be developed to support a diversity of approaches, including all existing peer support programmes, such as peer assisted learning, and embedded within all academic programmes. The network of Peer Supporters should be used to communicate key messages of the SEO and services. In this regard, the introduction of semesterisation may create new challenges for students, and the role of the Peer-Supporters will be crucial in helping to minimise these.

Recommendation 8 – The PRG supports the recommendation that the implementation of the recommendations of the Strategic Plan for Sport & Physical Activity remains a strategic and operational priority. It is concerned that the Strategic Plan may not be capable of being

implemented effectively without closer integration of the different stakeholders, and the University may not be able to derive the full benefit of the management expertise and experience of the Director of Sports and Physical Activity and the HoSE. The governance structures as they stand are confusing, and the PRG is concerned that this may hinder the implementation of the strategic plan for which the University has invested significant resources, and the possible synergies between the Mardyke, Sports and Physical Activity Dept, and the sports clubs will not be exploited effectively. Therefore we recommend that the management structures are revisited.

In order to realise the potential of the world class facilities and expertise we strongly recommend that the governance structures are reviewed and the management aligned more closely with the management structures of the Student Experience Office.

Recommendation 9a - The recommendation was that UCC SEO “Develop capacity for project management and administration through an additional post focused on project management in the SEO area allied to appropriate staff development opportunities”
Whilst the PRG recognises the operational demands of delivering effective project management, we would suggest that this post has explicit focus on designing and delivering the new processes required for the hub, in collaboration with the staff, as the priority recommendation, which in turn could serve as a staff development process.

Recommendation 9b – The PRG supports this proposal, with the following proviso: the title may cause confusion with the SU Welfare Officer, and it may cause confusion over the nature of the role and the likely expectations of students and staff. It would recommend that a different title more appropriate to the role should be devised.

Recommendation 9c – This recommendation is that UCC SEO “Increase capacity and connectivity of all pastoral/welfare/well-being related services through the introduction of an additional coordination role”. THE PRG is unclear on this role. We agree on the idea of increasing connectivity, but feel it needs more clarification on the implementation.

Recommendation 9d – The PRG strongly endorses the proposal that the UCC SEO further align funding from within the SEO budget to specific project strands, prioritising as necessary.

Recommendation 9e – For the recommendation that UCC consider and proactively develop approaches to the management and structural alignment of staff with student experience related roles, please see our recommendations referring to campus companies. For other posts related to the student experience, the PRG fully endorses the collegiate approach and recommend the strengthening of structures such as SSG+.

Additional recommendations –

The review group makes the following recommendations:

1. The PRG commends the stated objective of the Societies Guild to develop connections with their Alumni. It recommends that the SEO work with the services and the Development Office to assist them in identifying how they can work with Alumni, for example to develop Alumni mentoring roles; Alumni supporting interns and work placements in their companies; etc.

2. The PRG recommends that staff are explicitly encouraged to recognise their role in innovating for more effective delivery on a daily basis. This 'warrant to innovate' should enable staff to maximise the reduced resource and should be carefully framed in terms that identify how marginal gains (however small) will contribute to the success of the team overall and that all suggestions are worth making.
3. In addition to regular innovation through the 'warrant to innovate' the PRG recommends that the SEO begin an explicit programme of business process redesign (possibly through Lean review and associated approaches) in order to maximise the value of institutional investment into the services, improve the quality of the experience for the students and add to the strategic value of the services.
4. The PRG recommends that the University work to recognise the value-added provided by administrative staff. This is a cultural challenge but should begin by reconsidering the nomenclature and recognise 'Professional Services' within administration. Professional Services own strategically significant responsibilities that provide competitive advantage to the University.
 - a. In this context the PRG recommends that the SEO works to effectively articulate many colleagues' roles as educators and thus direct contributors to the HEIs core mission of educating its students.
 - b. It further recommends that the Student Experience Office management seek opportunities to specifically celebrate staff contributions to institutional mission and student success (possibly through in-department awards) and articulate that value to University senior management.
5. The PRG commends recent strategies aimed at 'Closing the loop' on the student experience survey. However, it recommends that surveys are used sparingly for engaging with the student voice – the current practice of multiple surveys risk overwhelming students and without effective feedback on responses received ("you said, we did") survey fatigue is likely to impair engaging effectively with students' views. It recommends the development of a strategic approach to engaging with the student voice through cross-campus surveys.
6. The initiation of SSG+ is commended. The PRG recommends that participation on SSG+ be monitored to ensure all those who should be present in order to address an holistic approach to the Student Experience are present (and regularly attend).
7. The PRG recommends that a tri-partite MOU/Charter for Delivery be established between the Director of Sport, the Clubs Executive and the Mardyke Arena under the leadership of the Head of Student Experience. This is a first step in providing the institution with the basis upon which to build a leading sport offer at every level that has a strong beneficial impact on the student experience.
 - a. In this context it was reported that the Board of Management of the Mardyke Arena had not been meeting, and that management of the Mardyke Arena had not engaged in SSG+. It is suggested that this will work against developing a holistic approach to enhancing each students experience and realising the potential of the significant investment made in staff and resources by the University. It is recommended that this group meet on a frequent and regular basis.
8. The PRG recommends that the SEO review mobility-access to its services – it was apparent that a number of areas would require re-location of office on a regular basis. This could be so frequent as to leave a student or member of staff with disability feeling that merely accessing a service is 'awkward' and thus work against accessing services equally.

9. When considering the utilisation of space it was surprising to hear that there is no formal student representation on the space management group. The PRG recommends that a relevant sabbatical officer is appointed to the group to help the University consider the student benefit when allocating space. There was a marked contrast between the Mature Student Common Room and the Staff Common Room and in other areas we saw students denied from accessing otherwise empty facilities (for example the cinema in the Windle building).
10. There was some confusion amongst staff in relation to the complaints policy, and when the counsel of the ombudsman is invoked. The approach of seeking resolution through discussion and 'mediation' is commended however it is recommended that the University take steps to focus and simplify the policy, enabling progressively more comprehensive consideration of student complaints with most effort on supporting local resolution. Once clarified it is further recommended that the University publicise this more effectively with the co-operation of the Students' Union.
11. There was much good practice in engaging with the student voice on committees; this is to be commended. It was apparent however that there are variations in the operation of student staff liaison committees – it is recommended that the University map their operation to enhance practice in this area.
12. The new Hub was noted as an opportunity to address a number of space as well as partnership-working issues by staff. However there does not appear to be any resource in place as a project manager (and team) to handle the development of the new service. The PRG recommends a small team is established including a full-time project manager (outside estates provision) with a responsibility to help develop the space from a student and user perspective, review policy and practice and ultimately recast the delivery around a new model. Without this the potential afforded by this sizable investment could be lost as services simply 'swap buildings'.
13. The PRG recommends that the University reconsider the management and governance arrangements of the wholly owned subsidiaries with a responsibility to contribute to the student experience (i.e. Mardyke Arena, Campus Accommodation Ltd, Student Facilities & Services Ltd). Whilst the Head of Student Experience is a board member, there is a distinct lack of operational engagement to the possible detriment of the student experience. The University should explore creating much tighter links with the HoSE, possibly changing line management responsibilities from the existing Chair and to the HoSE to ensure a focus on Student Experience (within the context of ensuring financial sustainability).
14. The Information Desk within the Student Centre would appear to be underutilised. The PRG recommends using the desk to provide a wider triage service as a pilot to help inform the hub developments. This wider delivery could incorporate elements of academic affairs and student experience and should be staffed collaboratively.
15. The work of the Societies Guild in developing a strategic approach to delivery is commended by the PRG, and we recommend other student organisations consider this approach.

STUDENT EXPERIENCE

PEER REVIEW GROUP SITE VISIT TIMETABLE

In Summary

- Tuesday 3rd June: The Peer Review Group (PRG) arrives at the River Lee Hotel for a briefing from Fiona Crozier, Director of the Quality Promotion Unit, followed by an informal dinner with Student Experience (SE) staff members.
- Wednesday 4th June: The PRG considers the Self-Assessment Report and meets with SE staff, student and stakeholder representatives. A working private dinner is held that evening for the PRG.
- Thursday 5th June: The PRG meets with relevant officers of UCC. An exit presentation is given by the PRG to all members of the School. A working private dinner is held that evening for the PRG in order to finalise first draft of the report. This is the final evening of the review.
- Friday 6th June: External PRG members depart.

Tuesday 3rd June 2014	
15.30 – 18.00	<p>Meeting of members of the Peer Review Group. Briefing by: Director of QPU. Group agrees final work schedule and assignment of tasks for the following 2 days. Views are exchanged and areas to be clarified or explored are identified.</p> <p>Venue: Tower Room, River Lee Hotel</p>
18.45	<p>Dinner for members of the Peer Review Group & Head of Student Experience including the SE Co-ordinating Committee:</p> <p>Ms. Sheila Byrne, Placement Manager, Career Services Ms. Linda Doran, Assistive Technology Officer, Disability Support Service Ms. Patricia Finucane, Senior Executive Assistant, Accommodation, Student Societies & Conferencing Services Ms. Brenda Nestor, Careers Advisor Mr. Vincent O'Brien, Entertainments Manager, Students' Union Ms. Aoife O'Sullivan, Student Health Doctor Dr. Ian Pickup, Head of Student Experience Ms. Jacqui Quirke, Executive Assistant, Career Services</p> <p>Venue: Weir Bistro, River Lee Hotel</p>

Wednesday 4th June 2014

Venue: Tower Room 1, North Wing, Main Quad

(unless otherwise specified)

08.30 – 08.45	Convening of Peer Review Group	
08.45 – 09.30	Dr. Ian Pickup, Head of Student Experience	
09.30 – 10.30	Group meeting with all Service staff Venue: WW6, West Wing, Main Quad	
10.30 – 11.00	Tea/coffee	
11.00 – 11.45	<p>Private meetings with individual staff members</p> <p><u>Group 1</u></p> <p>11.00: Mary McCarthy, Careers Advisor 11.15: Marian Elders, Post-Entry Support Project Co-ordinator, Mature Student Office</p> <p><u>Group 1 and 2 merge</u></p> <p>11.30: Evan Healy, Student Budgetary Advisor</p> <p>Venue: Tower Room 1</p>	<p>Private meetings with individual staff members</p> <p><u>Group 2</u></p> <p>11.00: Brenda Nestor, Careers Advisor 11.15: Sheila Byrne & Aileen Waterman, Work Placement Managers, Career Services</p> <p>Venue: Tower Room 2</p>
11.45 – 12.15	<p><u>Access Heads of Services – Contributing to Outreach and Transition into University / Supporting Student Retention, Progression and Success</u></p> <p>Mr. Martin Flynn, UCC PLUS⁺ Primary Schools Initiative; Ms. Mary O’Grady, Disability Support Officer; Ms. Mary O’Sullivan, Mature Student Officer</p>	
12.15 – 12.45	<p><u>Heads of Services – Supporting Student Health and Wellbeing</u></p> <p>Mr. David Barrins, Interim Head of Chaplaincy Dr. Michael Byrne, Head of Student Health Mr. Paul Moriarty, Head of Student Counselling & Development</p>	
12.45 – 13.40	Working lunch	
13.40 – 15.00	Visit to core facilities of SE Office including Assistive Technology Lab in Boole Library and Windle Building, escorted by 2 Peer Support Leaders – Tomás Kiely (2 nd BA) and Shama Chilakwad (3 rd Genetics).	

15.00 - 15.30	<p><u>Heads of Services – Facilitating Engagement in Student Life</u></p> <p>Mr. Declan Kidney, Director, Sport & Physical Activity Mr. Denis MacDonald, Administrator, Students' Union Mr. David O'Leary, Student Societies Officer</p>
15.30 – 16.00	<p><u>Heads of Service – Supporting Transition to Work and Further Study</u></p> <p>Mr. Seamus McEvoy, Head of Career Services Ms. Mary McNulty, Careers Advisor and Deputy Head of Service</p>
16.00 – 16.30	<p><u>Meeting with Student Union Sabbatical Officers</u></p> <p>Mr. David Berry, SU Welfare Officer Mr. James Murray, SU Entertainment Officer Mr. Owen Kirby, SU Communications & Commercial Mr. Gavin Lynch-Frahill, SU Education Officer</p> <p>Venue: WW3, West Wing, Main Quad</p>
16.30 – 17.00	<p><u>Representatives of Undergraduate and Postgraduate students</u></p> <p>Ms. Katie Crowley, (PhD Computer Science) Ms. Jessica Ni Mhaolin (4th yr, Public Health & Health Promotion) Mr. Oisín O'Callaghan (2nd yr, Law International) Mr. Barry O'Reilly (2nd yr, BA) Ms. Mary O'Rourke (1st yr Evening Law) Ms. Louise O' Sullivan (M. Social Science)</p>
17.00 – 18.00	<p><u>Representatives of stakeholders, past graduates and employers</u></p> <p>Mr. Martin Davoren, Department of Epidemiology & Public Health and Member of UCC Health Matters Team Ms. Maria Harrington, HSE Health Promotion Department Ms. Anne Healy, Department of Education and Skills Visiting Teacher Service for Blind and Vision Impaired students Mr. Eoghan Healy, Former SU President 2012/13 Mr. Noel Henderson, Personnel Representative, Eli Lilly, Kinsale, Cork Mr. Brian Leahy, Barrister at Law Ms. Mary Lenihan, Progression Officer, Cork College of Commerce Mr. Larry Martin, Chair of UCC Rugby Club Ms. Rebecca Murphy, PASS Co-ordinator and former SU Welfare Officer Mr. Paul O'Leary, Recruiter EMC, Ovens, Cork Mr. Daniel Waugh, PR and Media Officer, Societies Guild 2012/13</p> <p>Venue: Staff Common Room, North Wing, Main Quadrangle</p>
19.00	<p>Meeting of Peer Review Group to identify remaining aspects to be clarified and to finalise tasks for the following day, a followed by a working private dinner.</p> <p>Venue: Tower Room, River Lee Hotel</p>

Thursday 5th June 2014

Venue: Tower Room 1, North Wing, Main Quad

(unless otherwise specified)

08.30 – 08.45	Convening of Peer Review Group
08.45 – 09.20	Professor Paul Giller, Registrar & Senior Vice-President Academic
09.25 – 10.10	<u>Meetings with Senior Officers of the University</u> Mr. Diarmuid Collins, Bursar Professor John O'Halloran, Vice-President for Teaching & Learning, Ms. Colette McKenna, Director of Library Services; Mr. Paul O'Donovan, Academic Secretary; Ms. Donna O'Driscoll, Director of Marketing and Communications; Dr. Rónán O Dubhghaill, Director of Strategic Planning & Institutional Research; Mr. Mark Poland, Director of Buildings & Estates
10.10 – 10.40	<u>Meetings with Staff from the Colleges</u> Ms. Teresa Dwan, Senior Executive Assistant, Teaching and Learning and the Student Experience Committee, College of Science, Engineering and Food Science; Ms. Majella O'Sullivan, Manager, College of Arts Celtic Studies & Social Sciences; Professor Kathy Hall, Professor of Education and Chair of Academic Council Student Experience Committee (can attend until 1030am); Ms. Jean Tobin, Senior Executive Assistant, College of Business & Law
10.40 – 11.00	Tea/coffee
11.00 – 11.15	Mr. Cormac McSweeney, Head of Management Accounting, Finance Office, Ms. Helen O'Donoghue, Human Resources
11.15 – 11.45	Ms. Noirin Deady, First Year Experience Co-ordinator Ms. Jennifer Murphy, Admissions Officer
11.45 – 12.15	Mr. Terry Brennan, General Manager, Student Facilities & Services UCC Ltd, Áras na MacLéinn Ms. Nora Aherne, Mardyke Arena
12.15 – 12.45	<u>Meeting with Presidents of Clubs and Societies</u> Mr. Jim McEvoy, President, Clubs Executive Mr. Pdraig Rice, President, Societies Guild
12.45 – 13.00	Professor Robert Devoy, Student Advisor and Ombudsman.
13.00 – 14.00	Working lunch – including visits to additional facilities

14.00 – 16.15	Preparation of first draft of final report
16.15 – 16.45	Dr. Ian Pickup, Head of Student Experience
17.00 – 17.30	<p>Exit presentation to all staff, to be made by the Chair of the Peer Review Group or other member of Peer Review Group as agreed, summarising the principal findings of the Peer Review Group.</p> <p>This presentation is <u>not</u> for discussion at this time.</p> <p>Venue: WW9, West Wing, Main Quad</p>
19.00	<p>Working private dinner for members of the Peer Review Group to complete drafting of report and finalisation of arrangements for completion and submission of final report.</p> <p>Venue: Tower Room, River Lee Hotel</p>

Appendix A

Quality Promotion Committee Membership & Terms of Reference

Quality Promotion Committee

Membership

- Mr. Diarmuid Collins, Bursar
- Professor Claire Connolly, College of Arts, Celtic Studies & Social Sciences (from December 2013)
- Ms. Fiona Crozier, Director of Quality (Secretary) (to July 2015)
- Cllr Jim Finucane, Governor (from July 2012)
- Professor Paul Giller, Registrar & Vice-President for Academic Affairs
- Professor Alan Kelly, Interim Director of Quality (from August 2015)
- Mr Joe Kennedy, Education Officer, Students' Union (2014/15)
- Mr. Niall McAuliffe, Capital Projects Officer, Office of Buildings & Estates
- Ms Mary McNulty, Deputy Head, Careers Office
- Professor Deirdre Madden (from January 2014)
- Mr. Paul Moriarty, Head, Student Counselling & Development Service
- Dr. Michael B. Murphy, President (Chair)
- Mr. John O'Callaghan, Governor (to January 2015)
- Mr. Mark Stanton, President, Students' Union (2014/15)
- Dr Suzanne Timmons, College of Medicine & Health (from April 2014)
- Professor Douwe Van Sinderen, College of Science, Engineering & Food Science

Terms of Reference

Reports to: Governing Body and University Management Team

Aim: To assist in the provision of outstanding education in undergraduate and professional and graduate areas by fostering the improvement of quality in education and all related services provided by the University.

Responsibilities

The Quality Promotion Committee is responsible to the Governing Body for the overseeing of all matters, which have an impact on maintaining, and where possible, improving and enhancing the quality of the student experience in UCC. It aims to ensure that there are appropriate procedures in

place for the assurance of quality within the University and for the promotion of quality improvement in both teaching and non-teaching areas.

- Promote collective responsibility for quality improvement and assurance throughout the University.
- Recommend to Governing Body/Academic Council policy in relation to
 - Quality assurance
 - Educational development in relation to teaching, learning and assessment
 - The quality of the students' learning experience
- Promote innovation and development, which will enhance the quality of the student experience, in both teaching and non-teaching areas.
- Oversee University procedures for the identification and dissemination of good practice.
- Keep under review policy and procedures for ensuring the integrity of various forms of academic association with external organisations including the franchise of University programmes and the recognition, accreditation or validation of programmes offered by other organisations.
- Promote and encourage equal opportunities practice to enhance the quality of the student experience.
- Keep under review the requirements of national agencies, which have a remit for quality in education such as the HEA and ensure that University policy and procedures are consistent with national guidelines where appropriate.

Operational Procedures

In order to fulfill these responsibilities the Committee will:

1. Approve all significant developments in policies and practices relevant to quality improvement in all aspects of the University, including the design, development and review of guidelines and procedures for QI/QA.
2. Approve the schedule for departmental/unit QI/QA reviews.
3. Approve of the composition of the Peer Review Group.
4. Receive and consider reports and minutes from Faculty management committees (or equivalent) regarding work in relation to:
 - academic standards
 - quality assurance
 - quality improvement
5. Receive and consider reports of review panels concerning academic programmes, departments, administration units and central services, and, as appropriate, make recommendations to the Governing Body and the President for future action.
6. Ensure that there are effective procedures in place for involving students, staff, employers and representatives of the local community in quality assurance and improvement processes.
7. Provide appropriate guidance on matters concerning the maintenance and enhancement of quality for programme teams and central services.
8. Keep under review and recommend to Governing Body the information which should be maintained on taught programmes including: the content of definitive programme documents; documentation requirements for programme approval and review; and the issues which should be addressed in external examiners report.

9. Keep under review and recommend to Governing Body the range of statistical information and indicators, which should inform the quality assurance processes for academic programmes and central services.
10. Keep under review quality standards for central services.
11. Liaise with other bodies in the University as appropriate.
12. Report to University Management Team
13. Report annually to the Governing Body.

Constitution

Ex Officio:

1. President (Chair)
2. Registrar & Senior Vice-President Academic
3. Bursar
4. Director of Quality Promotion (Secretary)
5. President, Students Union
6. Education Officer, Students Union

Nominated Members:

- 4 Academics, with experience of participation in quality review and knowledge of quality systems – one from each College
- 3 Administrative & Support Services representatives with experience of participation in quality review and knowledge of quality systems from administration and services
- 2 external members of Governing Body

Term of Office

The term of office for the current committee is five years and mirrors the lifetime of the Governing Body

Casual Vacancies

The Governing Body has delegated authority to the Committee to fill any casual vacancies that arise during the lifetime of the Committee.

Appendix B

International Activities of Quality Promotion Unit

LIST OF INTERNATIONAL TEMPUS/ERASMUS+ PROJECTS

1. TEMPUS IV Programme

Title of Project: **FOCUS: Fostering Quality Assurance Culture at Libyan Universities.**

Funding Body: European Commission

Duration of Project: 15/10/2011 to 14/7/2015

List of Partners:

- Garyounis University, Benghazi, Libya;
- Omar Al-Mokhtar University, El Beida, Libya;
- Högskoleverket, Stockholm, Sweden;
- Libyan International Medical University, Benghazi, Libya;
- University College Cork, Ireland;
- University of Alicante, Spain;
- Royal Institute of Technology, Stockholm, Sweden.

2. TEMPUS IV Programme

Title of Project: **EDUCA: Modernization and Development of Curricula on Pedagogy and Educational Management in the Central Asian Countries.**

Funding Body: European Commission

Duration of Project: 15/4/2012 to 14/4/2015

List of Partners:

- Semey State Pedagogical Institute;
- Kazakh National Pedagogical University named after Abai;
- Center for Progressive Education Technologies;
- Kulob State University by name Abuabdulloh Rudaki;
- Compostela Group of Universities;
- Osh State University;
- Issykkul State University named after Kasym Tynystanov;
- Naryn State University named after S. Saamatov;
- Otto-von-Guericke University Magdeburg;
- Ministry of Education and Science of Kyrgyz Republic;
- University College Cork;
- Tajik State Pedagogical University named after Sadriddin Aini;
- Education Network Association;
- University of Alicante;
- Vilnius Pedagogical University;
- Ministry of Education and Science of Republic of Kazakhstan;
- Ministry of Education of the Republic of Tajikistan;
- Arabaev Kyrgyz State University;
- Korkyt Ata Kyzylorda State University;
- Khujand State University named after B.Gafurov;

- E.A. Buketov Karaganda State University;
- University of Cumbria.

3. TEMPUS IV Programme

Title of Project: **MEDAWEL: Integrating a Holistic Approach to Student Services for Increased Student Wellbeing.**

Funding Body: European Commission

Duration of Project: 15/10/2012 to 14/10/2015

List of Partners:

- Princess Sumaya University for Technology, Jordan;
- Al Hussein Bin Tala University, Jordan;
- University of Kafrelsheikh, Egypt;
- Modern University for Business and Science, Lebanon;
- Lebanese University (LU), Lebanon;
- An-Najah National University, Palestine;
- Universidad Alicante, Spain;
- University College Cork – National University of Ireland, Ireland;
- Glasgow Caledonian University, UK.

4. TEMPUS IV Programme

Title of Project: **LO@HEI: Encouraging the process of curriculum development based on learning outcomes and research guided teaching in the private higher education institutions of Kosova.**

Funding Body: European Commission

Duration of Project: 15/10/2012 to 14/4/2015

List of Partners:

- University of Salzburg, Austria (project grant-holder);
- University College Cork, Ireland;
- University of Edinburgh, United Kingdom;
- University Politehnica of Bucharest, Romania;
- Arena e Arsimit Bashkëkohorë (AAB) College, Kosovo;
- Fama College, Kosovo;
- Iliria College, Kosovo;
- UBT College, Kosovo;
- Dardania College, Kosovo;
- Victory College, Kosovo;
- Universum College, Kosovo;
- College Biznesi, Kosovo;
- Pjeter Budi College, Kosovo;
- Dukagjini College, Kosovo;
- Evolucion, Higher Vocational School of Arts, Kosovo;
- Tempulli, Higher Education Professional School, Kosovo;
- Institute, European School of Law and Governance, Kosovo;
- Kosovo Accreditation Agency, Kosovo;
- National Qualification Authority, Kosovo;
- WUS Kosova, Kosovo.

5. Tempus IV Programme:

Title of Project: **RecoNow: ENPI South: Knowledge of recognition procedures in ENPI South Countries**

Funding Body: European Commission

Duration of Project: 1/12/2013 to 31/05/2016

List of Partners:

- Alma Mater Studiorum Università di Bologna, Italy;
- Associazione CIMEA, Italy;
- Princess Sumaya University for Technology, Jordan;
- Petra University, Jordan;
- The University of Jordan, Jordan;
- Ministry of Higher Education and Scientific Research, Jordan;
- Association of Arab Universities, Jordan;
- Higher Education Accreditation Commission, Jordan;
- Birzeit University, Palestine;
- An-Najah National University, Palestine;
- Ministry of Higher Education, Palestine;
- JCP SRL, Italy;
- Associazione Servizi e Ricerche Rui, Italy (new partner, Feb. 2014);
- Université Bordeaux 1, France;
- Centre International d'Etudes Pédagogiques, France;
- University College Cork, Ireland.

In 2014, the Quality Promotion Unit, on behalf of UCC, was invited to become a partner in four new Erasmus+ Project proposals. Two of these have since been successfully funded, namely:

6. Erasmus+ Project:

Title of Project: **Towards a National Framework of Qualification for Jordan (NFQ-Jordan)**

Funding Body: European Commission

Duration of Project: 3 years – dates to be confirmed

7. Erasmus+ Project:

Title of Project: **Harmonization and Innovation in Central American Higher Education Curricula (HICA)**

Funding Body: European Commission

Duration of Project: 3 years – dates to be confirmed.

Appendix C

Quality UCC's follow-up to the Institutional Review of Irish Universities (IRIU) report

Action plan

	<u>Recommendations</u>	<u>Action</u>	<u>Delivery Date</u>	<u>Update/evidence Summer 2015</u>	<u>Person Responsible</u>
1	Continue to work towards the more robust management of the schedule of approved projects that form its operational plans and towards more robust and more accountable management of individual projects within its operational plans.	The University Management Team Strategy (UMTS) has a planning day at the start of each academic year to establish the detailed operational plans for the year. It will consider this recommendation at its planning day this year to ensure that projects forming part of the operational plans are clearly managed and accountable at both the individual and university level. There is an intention to run some 'Lean' projects in the coming academic year and these will be used as pilots both for examining the utility of the Lean approach to enhancing processes and procedures but also to ensure that the detail of this recommendation is taken into account.	2014-15	Emailed RO'D 10/3	Director of Strategic Planning and Institutional Research
2	Consider how projects in its Operational Plans that are linked to the findings and recommendations of Quality Review reports that have University-wide relevance can be more clearly identified, so that the Quality review process can more clearly demonstrate its contributions to University-wide change and improvement.	An evidenced response from the Director of Strategic Planning and Institutional Research to demonstrate, through QPC reports to GB and agenda items for UMT, that the findings and recommendations from QR reports are clearly identified and discussed at University level. There will be on-going consideration of the processes by which such matters are considered to ensure that they are as effective as possible. The outcomes of Quality Reviews will feed into the annual strategic planning meeting of UMTS.	On-going.	Emailed RO'D 10/3	Director of SP & IR/Director of QPU
3	Make clear the source of the Quality Promotion Committee's	It has been clarified that the QPC reports annually to GB but is responsible to UMT. The QPU website	By Jan 2015	New guidelines for periodic review of	Director, QPU

	authority so that its status and authority are clear to staff, students and stakeholders, and to avoid confusion between governance and management structures.	is under revision and will continue to be revised as new processes are developed. It will contain new guidelines for QA etc. in time for the introduction of the 3 rd cycle of internal reviews. This will provide a forum for public clarification of the QPC's authority and its reporting lines.	(or final revised website, whichever is sooner)	academic units now on the website (April 2015)	
4	Ensure that all development and operational aspects of its collaborations outside Cork, including those overseas, are subject to formal quality assurance procedures and governance that are at least as secure as those for its collaboration with Cork Institute of Technology, and that regular reports on current and planned collaborations are made to the Governing Body, Academic Council and senior managers.	<p>UCC has recently held its Annual Dialogue meeting with QQI. The template that informs this dialogue included, this year, more emphasis on all types of collaborative partnership. QQI was informed that it had been a useful exercise to begin to think through and categorise collaborative partnerships of whatever kind. Work will continue in this area.</p> <p>In the first instance, a public register of all collaborative provision will be finalised and published.</p> <p>A formal institutional process for consideration of governance of all types of partnership activities as part of a review of the University Signing Authority and Approval Policy has been established, including development of a framework for a clear means of categorising, approving and monitoring such activities.</p>	<p>Initially the publication of a collaborative provision register by autumn 2014.</p> <p>Categorisation of partnerships will be on-going as new partners come on stream.</p> <p>To go to Academic Board and QPC by March 2015.</p>	Emailed P'D 10/3	Registrar and Senior VP/Academic Secretary/Director QPU
5	Give close attention to securing greater consistency in the way its regulations are observed across the Colleges.	Linkages and joint membership between University and College-level committees are being enhanced and new shared web-based portals for policy documents and revisions are being established.	Ongoing.	EXAMPLES OF EVIDENCE NEEDED	Heads of College, Academic Secretariat
6	Continue to work to simplify its committee structures at the centre and in the Colleges to ensure greater efficiency and transparency and take further steps to enable the Academic Council to give more focused attention to priority areas such as quality assurance (including the quality assurance of international collaborations) and risk management.	<p>Whilst a very significant revision and reorganisation of Governing Body and Academic Council committees has been undertaken over the last few years, consideration of further modification is warranted. Revision of College Rules under the Principal Statute is also addressing this issue</p> <p>Continuing refinement of the Academic Council agenda is taking place and recent agendas have included specific quality assurance and international strategy issues.</p>	Ongoing.	KEEP A RECORD OF AGENDAS TO PROVIDE AS EVIDENCE AT NEXT INSTITUTIONAL REVIEW	Registrar and Academic Secretary

7	Continue with the introduction of a programme of leadership management and governance training for academic leaders and managers in the Colleges.	Project management and other training development programmes are on-going. Heads and Managers Forum on-going on a regular basis.	Evidenced by programmes of events and attendance uptake.		HR
8	Defer devolving responsibilities for quality control, quality assurance and the maintenance of academic standards to the Colleges until they can demonstrate that their governance and management arrangements, including for the oversight of the Schools, are being satisfactorily and robustly discharged, and that any devolution of responsibility can be subject to robust oversight and review by the University Management Team (Operations).	In light of this recommendation, and despite some pressure from academic units and Colleges for further devolution, there are no plans to devolve responsibilities for quality control, quality assurance and the maintenance of academic standards to the Colleges. A review is underway of marks and standards associated with the award of degree level and in the composition and responsibilities of Examination Boards. The matter will be kept under consideration. In agreeing the first year of the third cycle of reviews (to begin in 2015-16), QPC has approved a thematic review to take place that year across the four Colleges to report on the Schoolification process. That thematic review will take into account how the Colleges manage oversight of the Schools.	On-going monitoring. 2015-16		UMTS/Registrar
9	Make full use of the complete range of reports of its Quality Reviews in future critical self-evaluations and consider how it might develop its institutional capacity to undertake self-critical evaluations of its work.	A process of annual monitoring will be piloted in 2014-15. One of the purposes of this process is to allow the University to pick up on any institution-wide themes and to decide if and how it wishes to act on this information. The development of a more formal process for Thematic Review dovetails with the outcomes of annual monitoring and provides an annual means, if required, by which the University might undertake a self-critical evaluation of aspects of its work. The first such thematic review will be piloted in 2015-16 (see 8 above). The format of the annual report to GB, through which themes from the previous year's quality reviews are presented, is under consideration. The Director gave a presentation to the Strategy and Innovation sub-committee of the Governing Body in June 2014 at which the matter was discussed.	2014-15 2015-16 Changes to the format of the annual report to GB will be piloted in September 2014 (this will be the report on QA&I activity in the		Director, QPU

			academic year 2013-14).		
10	Publish the criteria for identifying a programme as 'high risk' to Colleges, Schools and Departments in a standard format that enables them to assess whether the programme they are proposing is likely to be judged 'high risk', with the Academic Board retaining responsibility for monitoring how the criteria are implemented.	Under discussion. The University has already approved a policy for the withdrawal/cessation of programmes.	2014-15		Academic Secretary/Academic Programmes and Regulations Office
11	Undertake a Quality Review of its new programme approval arrangements and their operation by the Colleges after their first year in operation that examines a sample of programme approvals under the new arrangements across the Colleges and that the terms of reference for this Quality Review should also include an examination of the effectiveness of the linked processes for approving major and minor modifications, responsibility for which has also been delegated to Colleges, and examination of the success of otherwise of the new programmes approved by the Colleges.	<p>An annual review of the new programme approval arrangements was carried out and reported to Academic Board in June 2014. Feedback on how the process was working was sought from the four Colleges and from the Adult and Continuing Education unit.</p> <p>The feedback was considered and various changes proposed to the process to improve its efficiency. These changes were approved by Academic Board in June 2014. These included some oversight function for the AC Academic Development and Standards Committee of the major and minor changes.</p> <p>There is an intention to review the implementation of the changes after one year and also to introduce periodic review of programmes that will allow for the examination of the success or otherwise of new programmes approved through the new approval processes.</p>	<p>Summer 2014 (Complete)</p> <p>Summer 2015</p>		Academic Secretary/Chair of ADSC
12	Clarify the nature and purpose of the Quality Review process as it applies to Academic Departments, Schools, College, services and	Revisions to the quality review process are currently on-going. They will result in an suite of processes as follows:	2015-16		Director, QPU

	administrative and management offices, respectively.	<ul style="list-style-type: none"> • Periodic review (of academic programmes/units). To include annual monitoring • Thematic review, when appropriate • Review of support/management structure and units. <p>So far annual monitoring, and an explanation of how this will relate to periodic review has been approved by QPC, Academic Board and Academic Council. QPC has also approved a pilot of a thematic review.</p> <p>Whilst the framework and principles for review will be the same, the new processes will differentiate between and clarify the purposes for the different kinds of reviews.</p>			
13	Ensure that student membership of all Quality Review, programme approval, and programme review panels is a feature of the next iteration of its quality arrangements.	<p>Students now have a standing item on the QPC agendas.</p> <p>There was a student member on all Quality Reviews bar one in 2013-14.</p> <p>The SU Education officer and the Director of QPU will meet early in the academic year 2014-15 to discuss training and briefing of students to prepare them for their role in all QA and I processes.</p>	<p>Done</p> <p>Done</p> <p>By Christmas 2014.</p>	<p>Not yet happened. SU Education Officer will be same person 2015-16 so agenda can roll over.</p>	<p>Director of QPU and SU Education Officer</p>
14	Make greater use of the data from its developing management information systems to support internal reviews.	<p>Management information data will form part of the new annual monitoring process that was recently approved at Academic Council and will feed into programme review on a periodic basis.</p> <p>The first part of the AM template will contain pre-populated data on the unit under review, provided by the Data Warehouse. Comment is then requested on intake, progression and exit data.</p>	<p>Pilots of annual monitoring to be held in 2014-15.</p> <p>Examples of the type of information that will be provided are already included in the AM template.</p>	<p>Should also mention the project being led by VP R&I following data produced for RQR</p>	<p>Director, QPU/Head of Academic Systems Admin/Heads of College/Heads of School/Department.</p>
15	Conduct an initial pilot of its new programme review process with a sample of programmes of varying	<p>Programme review process under development. (See above, 12).</p>	<p>First programme reviews in 2015-16.</p>		<p>Director, QPU</p>

	characteristics across the University.				
16	Consider how it might undertake a whole-institution review of its portfolio of taught programmes to identify programmes in need of development and support and those that might better be offered by other institutions elsewhere or closed.	This is a significant task. The corresponding paragraph in the report is referring to rationalisation. In relation to the need to maximise the effectiveness of resource utilisation and the quality and number of students at UCC, Colleges are undertaking reviews of their programme portfolios. The new policy of Withdrawing/Cessation of programmes is also appropriate here.			UMT/AC
17	Draw on the experiences of other higher education institutions in Ireland, and further afield in Australia and the UK, to improve response rates to its own institution-wide student survey and, until the planned Irish National Student Survey comes into full operation, conduct its own Student Satisfaction Survey annually and rationalise and co-ordinate the student surveys that are conducted by Departments and Schools to reduce 'survey fatigue' among students.	<p>Further developmental work was undertaken for the TP2 module survey in 2014. An expert team was established to analyse the data from the Student Experience Survey and recommendations arising from the analysis are presented to Academic Council and the Colleges.</p> <p>A working group to consider the results of that survey and to develop a UCC policy for surveys has been set up. Membership: VP Teaching & Learning, Head of Student Experience, Director QPU, and Student Union Education Officer.</p>	<p>Group to report in time for 2014/15 module survey(s)</p> <p>The UCC student experience survey was conducted in November 2015</p> <p>The steering group to report to Academic Council in 2015/2016 on the strategy and governance for surveys at UCC</p>	<p>Further developmental work was undertaken for the module survey in 2014/2015, with the addition of qualitative questions. The module survey was run in the second semester in 2014-15 and the response rate was 24.8%, up from 20% when the same survey was last run (TP2 2013-14)</p> <p>The National student survey (ISSE) has also been introduced at UCC, and UCC has participated in this survey in 2014 and 2015. While the participation rates have been low we hope to increase the participation rate through further engagement with the Students' Union.</p> <p>A survey board is in establishment to guide both the strategy of</p>	VP T&L/Head of Student Experience

				<p>surveys across the university and to guide analyses of the data collected by all surveys.</p> <p>Recommendations arising from the analysis are presented to Academic Council and the Colleges. Membership: VP Teaching & Learning, Head of Student Experience, Director QPU, Student Union Education Officer, Chair of AC Teaching and Learning Committee and Chair of AC Student Committee and staff involved in both the Module Survey, National Student Survey and Student Experience Survey.</p>	
18	<p>Encourage and support the Students' Union to work towards representation arrangements that correspond to the gender balance across the University and are more inclusive of other nationalities in UCC's student body.</p>	<p>To be discussed with the Head of Student Experience. New sabbatical officers are now in place (July 2014) and discussions are commencing.</p>	2014-15	<p>Work ongoing by Students' Union.</p>	<p>Head of Student Experience/ President of SU</p>
19	<p>Review the extent to which its quality assurance arrangements depend on the contributions of external examiners and external peers and whether it needs to rebalance its internal quality assurance arrangements to make more prominent reference to and use of</p>	<p>All new processes (annual monitoring and programme review) and those under development will make reference to external reference points, including the NQF, more explicit. The template for annual monitoring requests specific comment on external examiners' reports. The periodic review process will have a focus on ensuring that the programme(s)/award is still located correctly on the NFQ.</p>	<p>By start of third cycle of reviews (2015-16)</p>	<p>New guidelines for periodic review of academic units published on website. External reference points are explicit in the guidelines. ESG taken account of and included in Guidelines.</p>	<p>Director, QPU</p>

	external reference points such as the National Framework of Qualifications, the advice and guidance formerly provided by IUQB and now by QQI, the notes of guidance and consultations provided by the Irish Higher education Quality network (IHEQN), and Part 1 of the standards and Guidelines for Quality assurance in the European Higher Education Area (3 rd edition, Helsinki 2009)	<p>The IHEQN guidelines will be used specifically in the development of processes around collaborative provision (see 4 above).</p> <p>We will consider the new version of the ESG once it is published (due to be approved by ministers at their meeting in 2015).</p>			
20	Ensure that the quality assurance arrangements for programmes delivered with transnational partners are at least as secure as those UCC has developed for its work with CIT; ensure that the Quality Promotion Unit is kept informed of new collaborations and especially new overseas collaborations and consulted on their academic and quality aspects; develop a comprehensive Quality Guide for Overseas Collaborations as soon as possible that draws on international good practice and requires all members of the University and those working for it as agents to follow the terms of the Quality Guide when it is completed.	<p>Our response to this will overlap with that for recommendation 4. We will need to use documents such as the IHEQN's <i>Guidelines for the Approval, Monitoring & Review of Collaborative and Transnational Provision</i> to further develop our own internal policy and process. We will also take into account documents such as the UK QAA Quality Code, section B10: <i>Managing higher education provision with others</i> and the OECD's <i>Guidelines for quality provision in cross-border higher education</i>.</p> <p>First action will be to ensure that the University makes available an up to date register of all collaborative provision at UCC.</p>	<p>2014-15</p> <p>By end 2014</p>	Emailed PO'D 10/3	Registrar & Senior VP/Academic Secretary/Director, QPU/Office of Corporate and Legal Affairs
21	Take all necessary steps to ensure the accuracy of the information that it publishes about its programmes and modules including in its on-line Module Catalogue	The accuracy of all modules has been checked in great detail through the semesterisation project and the necessary minor corrections/clarifications undertaken.	Complete		APAR

22	Include questions in its next Student Satisfaction Survey that will enable it to establish the extent and location of research-led teaching in the Departments and Schools.	This will be considered by the Survey working group (discussions taking place in line with 17 above). The UCC Student Experience Survey will run in 2015. A project on mapping research- led teaching in the existing curriculum will take place in 2014-15.	In time for next module survey(s) Autumn 2014		VP T&L/Head of Student Experience/Director QPU/Registrar & Senior VP
23	Redouble its efforts through teaching awards, travel and study grants, and sabbatical leave to persuade staff that it is intent on embedding research-led teaching and other changes in pedagogy and the curriculum for the benefit of all its students.	Teaching awards will be reviewed in order to develop more coherent CPD for staff in the context of teaching and learning, and more broadly.	end 2015	An academic practice framework is being developed to provide a single, coherent system for staff to engage in and gain recognition for their professional development activities. Focusing on academic practice, the framework facilitates staff with differing activities, expertise, interests and ambitions to navigate their own professional development route. The framework is intended to facilitate achievement of a target of 70% of academic staff engaged in professional development	VP Teaching & Learning
24	Gather together evidence for its external stakeholders of the consequences of being unable to provide more support staff for areas that it needs to expand, so that UCC can meet Government aspirations, and show how current resource constraints and, particularly, rigidities in the funding framework, jeopardise the University's present successes in supporting its students.	This has been brought to the attention of UMTS for further discussion and reports already sent to the HEA for their university sustainability review. Workforce planning activities are commencing in the four Colleges and in central administration.	Report in autumn 2014		UMT/Council of Heads

25	Take all necessary steps to secure the funds to construct its student hub and, where possible, continue to adapt its learning facilities to be more accessible.	The funding model was approved in March 2014 by the Finance Committee and the design team tender process is underway overseen through a steering group.	2015-17 <ul style="list-style-type: none"> • Feasibility Study – January to April 2015 • Lodge Planning Application – September 2015 • Enabling Works – June 2015 to May 2016 • Commencement On-Site – May 2016 • Project Completion – Oct/Nov 2017 	Phase 1 of the project expected to cost €13m. The Student Hub is being designed to include 5 linked zones, each housing specific student services, projects, initiatives and activities, as follows: <ul style="list-style-type: none"> - Welcome Zone, housing a one stop shop - Learning & Teaching - Employability Zone - Student Success Centre - Student Life Zone Current Status: <ul style="list-style-type: none"> • Funding model agreed by Finance Committee on 16 April 2014 • Following advertisement, tenders were received from a total of 24 companies spanning the 4 technical disciplines in July 2014 • Interviews for architects were held on 25 September 2014. • UMTO ratified assessment panel's decision for an architect on 10 November 2014 	Head of Student Experience
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				<ul style="list-style-type: none"> Project Team established, with separate working groups for each of the zones 	
26	Work with the students' Union to designate an additional sabbatical post to enable the perspectives and needs of international students to be made more prominent in University discussions.	Discussed with Head of Student Experience and VP External Relations. An additional sabbatical post (Communications) was created in 2012 and discussions are now taking place to include international students within this brief. This work will also take into account on-going work on the International Education Mark and associated Code of Practice.	Some work completed. Other work to follow the timeframe for the development of the IEM.		Head of Student Experience/ President of SU/Vice President External Relations/Director QPU
27	Consider how it might deal with perceptions of unease on the part of students walking to and from its satellite campuses in Cork in the evening.	UCC questioned the validity of this recommendation from the time that it received the draft report on the basis that the evidence on which it was based was unclear and anecdotal. Of course, this is something that the University always keeps under close consideration.			
28	Confer with the Students' Union and representatives of its postgraduate research students on how best to establish formal representation for the interests of research postgraduate students in the University's deliberative and management arrangements.	Currently, the SU Postgraduate Officer is a formal member of the Academic Council Graduate Studies Committee. The College of Medicine and Health has representation from postgraduate students on its Postgraduate Committee. The intention is to extend this model to other Graduate School. There is also PG representation on Governing Body and Academic Council.	This will be further discussed and monitored over the coming academic year.	Emailed DoGS and HoGS 10/3h	Dean of Graduate Studies/Head of GSO/President of SU

Appendix D

Guidelines for periodic review and annual monitoring of academic units

Contents

The contents page should be a series of web links to each section. Ultimately the aim is to work with the Academic Secretary's office to include links to, for example, processes for programme approval, external examining and collaborative partnerships to provide one composite manual for the management of academic quality and standards.

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Timelines for periodic review and annual monitoring:

i) periodic review

12-18 months before review year:

- QPU Contacts Unit.
- Unit sends long list of potential externals to QPU.

4-12 months before:

- Unit prepares SER.
- Liaises with QPU.

4 months before:

- PRG appointed

10 weeks before:

- SER and draft timetable sent to QPU. Both are forwarded by QPU to the PRG for consideration.

8 weeks before:

- PRG responds to QPU initial comments on SER, comments on the draft timetable and requests for any further documentation.

7 weeks before:

- Timetable agreed with the unit.

Site visit

3 weeks after:

- Draft report submitted to QPU by PRG.
- Sent to unit for factual comments.

5 weeks after:

- Unit sends factual comments to QPU.
- QPU contacts PRG.

7 weeks after:

- Final PRG report received by QPU
- Sent to Unit, requested to respond to recommendations.

Next scheduled QPC meeting:

- QPC considers report and response by unit and comments.

4 months after:

- QIP (action plan) received from unit.

ii) Annual monitoring

(NB: annual monitoring is not an external review. It is the internal process by which a unit assures itself, its School and its College that academic standards are appropriate and the quality of the student experience maintained. It provides the evidence base for the periodic review and the unit's self-evaluation report.

Autumn:

- Unit begins to consider annual monitoring template.
- Discusses template at relevant staff and student meetings at local level.
- QPU available to provide support as needed.

December:

- Unit finalises report and escalates to relevant School committee and/or College level committee.

March:

- Report, accompanied by relevant School/College comment is sent to QPU.
- QPU analyses all AM reports and pulls out general themes. These are fed back to Colleges and reported to QPC.

September:

- QPC report to Governing Body includes report on themes arising from AM reports.
- Key points are raised at UMTS strategic planning day.
- May inform decision for a thematic review.

Periodic review and annual monitoring of academic units (Periodic review and annual monitoring)

Introduction

The University is required by the Qualifications and Quality Assurance (Education and Training) Act (2012) to review its provision... "at least once every 7 years..." UCC's process of annual monitoring, verified by periodic review is designed to allow an opportunity for reflection by academic units on:

- academic standards
- the quality of the student learning experience provided to ensure that students have the best chance of achieving those standards
- the continuing relevance of courses to both internal and external needs
- alignment with national and international expectations
- good practice or innovation.

The process has been devised to align international, national and institutional good practice and processes. UCC's overarching policy for quality assurance and improvements adheres to Quality and Qualifications Ireland's (QQI) Guidelines and to the *Standards and Guidelines for Quality Assurance in the EHEA* (ESG). The review process does not, therefore, require the unit under review to respond in detail to either document. However, the ESG are available at appendix one as a reference point and the relevant standards and their page reference are highlighted in appendix two in order to

assist in the drafting of the self-evaluation document (SER). The process sits within a framework of principles that will govern all types of quality review:

- The process adheres to the four-stage model for review set out in the ESG and approved by QQI (i.e. self-assessment, peer review, site visit, published report) thus ensuring consistency of operation;
- The review is carried out through a process that is independent in its operation and allows the panel to come to its conclusions independently and without interference;
- All reviews are intended to provide both assurance of quality and standards and a means by which the unit under review can consider improvements;
- There is student member on all review panels who is regarded as a full member of the panel;
- All review panels meet students.

The process of periodic review and annual monitoring is one process. The one feeds into the other seamlessly. It has also be designed to align with other quality management functions at UCC, including external examining, programme approval, module and other surveys and student engagement thus ensuring that quality assurance and improvement are viewed holistically.

Its main purpose is to allow academic units to annually reflect on management information data, feedback from various sources and any strategic or quality improvement plans, reinforced by an opportunity periodically to review the quality and standards of academic provision over time, including the impact of change, merits of curriculum design, and local strategies for learning, teaching, assessment and student support. The process should also enable the University to more broadly audit the implementation of policies and processes for enhancing the student learning experience.

Purpose

The purpose of annual monitoring and periodic review is to facilitate reflection on:

- academic standards, including the location of the programme(s) on the National Framework of Qualifications
- the quality of the student learning experience, with reference to learning, teaching, assessment, staff development, resources to support learning and student guidance and support
- student progress and attainment
- the compatibility of programme developments with institutional strategy
- academic and resource planning
- currency and validity of programmes in light of developing knowledge in the subject and practice in its application
- the extent to which the intended learning outcomes are achieved by students
- the continuing effectiveness of the curriculum and assessment
- future enhancement of unit and its provision
- the effectiveness of quality management processes within the unit
- external reference points, including the National Framework of Qualifications, external examiners' reports, requirements of professional, statutory and regulatory bodies, and relevant national and international guidelines.

Process

The Quality Promotion Unit (QPU) will organise reviews, and will publish schedules; provide professional support for reviews, and will publish guidance for the management of the review process.

Reviews will take place at intervals of not more than seven years. A schedule of reviews is drawn up by QPU, and approved by the Quality Promotion Committee (QPC). All relevant taught courses will be considered.

Reviews will be conducted by a team of peer reviewers comprising:

- Chair (senior member of staff from UCC)
- Appropriate member of UCC staff external to the College in which the unit sits (often, but not exclusively a member of QPC)
- Appropriate member of staff from the same College but outside the unit under review
- A student from outside the unit under review and usually, although not exclusively, from another College
- Two external academics representative of the unit under review (one of these may be replaced by an employer representative if appropriate/desirable).

See Appendix 5 (*Role of panel members*) for further detail. The unit under review will make nominations for the external members of the peer review group (PRG). The PRG will be formally appointed by QPC (see Appendix 4 for the process for the nomination and appointment of externals).

The review will usually take place over the course of two days. However, with smaller areas this may be reduced to one and a half days, or with larger, more complex, this may be extended to three days. QPU will agree length with the appropriate Head of Unit and team.

The panel will, as far as possible, make use of existing documentation such as the annual monitoring reports drafted since the last periodic review. The key document for the review will be a self-evaluation report (SER) (see Appendix 2). The SER will inform an initial agenda, drawn up by the QPU in consultation with the unit under review and based upon feedback from all members of the PRG.

As part of the preparation for the SER and for the review itself, the unit will undertake a SWOT analysis, to be facilitated internally within the University but external to the unit. The Unit may also decide to do some benchmarking at another, appropriate higher education institution (See appendix 8 for further details on the SWOT and benchmarking).

Review documentation will be made available to all panel members at least eight weeks ahead of the review. Panel members will be asked to comment on the draft agenda, to provide brief written contributions to inform the initial agenda setting for individual meetings and to consider if there is any further documentation they feel they need.

The PRG will agree and prepare a report to be circulated to the unit team for comments on factual accuracy. This will normally happen within 15 working days of the end of the review. A response from the unit will normally be sought within 5 working days. The Director of the QPU will agree a

final version of the report with the PRG for receipt by QPC. The views of relevant senior officers will be sought at this point. QPC will comment on the recommendations and ensure that those that are beyond the remit of the unit under review are passed to the relevant body/committee for response. QPC's comments on the report will be returned to the unit under review and an action plan requested for QPC's consideration.

The report and action plan should be made generally available to students; the action plan should be monitored as part of the annual monitoring process at which students should also be present. (See Appendix 10).

Features of good practice/Recommendations

Features of good practice should recognise those things that make a positive contribution to the work of the unit. They do not necessarily need to be worthy or capable of dissemination to other areas of the University but if this is the case, then the PRG should highlight the fact.

Recommendations are those matters considered desirable to achieve in enhancing or improving the student learning experience and that of staff at either unit or institutional level. Such recommendations may be developmental or may relate to functional matters. Recommendations should be achievable, and should identify the issue, allowing the unit to consider the solution within its staff specialisms, resources, students etc.

Recommendations relating to procedures or services external to the area under review need to be framed in such a way as to reflect the unit's interaction with those external matters. For example, a review may identify that accreditation by a PSRB is at risk due to a resource issue. The review cannot make a recommendation that additional laboratory space be provided, but can recommend that the unit under review develop proposals for the appropriate authority within the University to consider.

Features of good practice and recommendations will be brought to the institutional level annually through thematic reporting to Governing Body. Recommendations that are made to the University rather than to the unit under review will be brought to the University Management Team twice a year. QPC will decide which recommendations are to be forwarded to UMT and will take account of the University's risk register in doing so.

Action planning and one-year follow-up

The course team will be required to provide an action plan that addresses the recommendations in the report (the template for the action plan may be found at <http://www.ucc.ie/en/qpu/guidelines>).

QPC will consider the extent to which the action plan will address the recommendations identified, examples of good practice that may be disseminated more widely within the University, and any particular points (such as generic issues, for example) that require further action.

Follow-up activity will be undertaken through the annual monitoring process. Thus the action plan should be updated on an annual basis and provide the means for evidenced comment at the next periodic review.

Not every recommendation will require an action but it must be demonstrated that serious consideration has been given to each. Where it is proposed not to implement a recommendation of the panel, a clear explanation of the reasons for this must be provided.

Payments to external panel members and student reviewers

Attendees will receive €300 per day or €150 per half day, deemed to be inclusive of all associated reading and preparation, and attendance at the periodic review visit itself.

Travel and subsistence expenses will be reimbursed, where necessary.

Hotel accommodation, where appropriate, will be arranged by QPU.

Fees and expenses will be administered by the QPU.

Appendices

1. *Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG)* (part one)
2. Template and guidelines for the drafting of the Self Evaluation Report
3. Documentation required for periodic review
4. Process for the nomination of experts and conflict of interest form
5. Role of panel members
6. Typical schedule for a review
7. Report template
8. SWOT analysis and benchmarking
9. Use of surveys
10. Template for action plan (QIP)
11. Template for annual monitoring

Standards and guidelines for quality assurance in the European Higher Education Area

DRAFT

Endorsed by the Bologna Follow-Up Group on 19 September 2014.

Subject to approval by the Ministerial Conference in Yerevan, 14-15 May 2015

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Foreword

The *Standards and guidelines for quality assurance in the European Higher Education Area* (ESG) were adopted by the Ministers responsible for higher education in 2005 following a proposal prepared by the European Association for Quality Assurance in Higher Education (ENQA) in cooperation with the European Students' Union (ESU)², the European Association of Institutions in Higher Education (EURASHE) and the European University Association (EUA).

Since 2005, considerable progress has been made in quality assurance as well as in other Bologna action lines such as qualification frameworks, recognition and the promotion of the use of learning outcomes, all these contributing to a paradigm shift towards student-centred learning and teaching.

Given this changing context, in 2012 the Ministerial Communiqué invited the E4 Group (ENQA, ESU, EUA, EURASHE) in cooperation with Education International (EI), BUSINESSEUROPE and the European Quality Assurance Register for Higher Education (EQAR) to prepare an initial proposal for a revised ESG "to improve their clarity, applicability and usefulness, including their scope".

The revision included several consultation rounds involving both the key stakeholder organisations and ministries. The many comments, proposals and recommendations received have been carefully analysed and taken very seriously by the Steering Group (SG). They are reflected in the resulting proposal to the Bologna Follow-up Group. Moreover the proposal also reflects a consensus among all the organisations involved on how to take forward quality assurance in the European Higher Education Area and, as such, provides a firm basis for successful implementation.

Being confident that the revised version of the ESG will be useful and inspirational, we invite Ministers to adopt the proposal.

European Association for Quality Assurance in Higher Education (ENQA)
European Students' Union (ESU)
European University Association (EUA)
European Association of Institutions in Higher Education (EURASHE)
In cooperation with:
Education International (EI)
BUSINESSEUROPE
European Quality Assurance Register for Higher Education (EQAR)

² ESU was formerly known as ESIB – The National Unions of Students in Europe.

Context, scope, purposes and principles

Setting the context

Higher education, research and innovation play a crucial role in supporting social cohesion, economic growth and global competitiveness. Given the desire for European societies to become increasingly knowledge-based, higher education is an essential component of socio-economic and cultural development. At the same time, an increasing demand for skills and competences requires higher education to respond in new ways.

Broader access to higher education is an opportunity for higher education institutions to make use of increasingly diverse individual experiences. Responding to diversity and growing expectations for higher education requires a fundamental shift in its provision; it requires a more student-centred approach to learning and teaching, embracing flexible learning paths and recognising competences gained outside formal curricula. Higher education institutions themselves also become more diverse in their missions, mode of educational provision and cooperation, including growth of internationalisation, digital learning and new forms of delivery.³ The role of quality assurance is crucial in supporting higher education systems and institutions in responding to these changes while ensuring the qualifications achieved by students and their experience of higher education remain at the forefront of institutional missions.

A key goal of the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG) is to contribute to the common understanding of quality assurance for learning and teaching across borders and among all stakeholders. They have played and will continue to play an important role in the development of national and institutional quality assurance systems across the European Higher Education Area (EHEA) and cross-border cooperation. Engagement with quality assurance processes, particularly the external ones, allows European higher education systems to demonstrate quality and increase transparency, thus helping to build mutual trust and better recognition of their qualifications, programmes and other provision.

The ESG are used by institutions and quality assurance agencies as a reference document for internal and external quality assurance systems in higher education. Moreover, they are used by the European Quality Assurance Register (EQAR), which is responsible for the register of quality assurance agencies that comply with the ESG.

Scope and Concepts

The ESG are a set of standards and guidelines for internal and external quality assurance in higher education. The ESG are not standards for quality, nor do they prescribe how the quality assurance processes are implemented, but they provide guidance, covering the areas which are vital for successful quality provision and learning environments in higher education. The ESG should be considered in a broader context that also includes qualifications frameworks, ECTS and diploma supplement that also contribute to promoting the transparency and mutual trust in higher education in the EHEA.

The focus of the ESG is on quality assurance related to learning and teaching in higher education, including the learning environment and relevant links to research and innovation. In addition

³ Communication from the European Commission: Opening up Education: Innovative teaching and learning for all through new Technologies and Open Educational Resources, COM(2013) 654 final, http://ec.europa.eu/education/news/doc/openingcom_en.pdf

institutions have policies and processes to ensure and improve the quality of their other activities, such as research and governance.

The ESG apply to all higher education offered in the EHEA regardless of the mode of study or place of delivery. Thus, the ESG are also applicable to all higher education including transnational and cross-border provision. **In this document the term “programme” refers to higher education in its broadest sense,** including that which is not part of a programme leading to a formal degree.

Higher education aims to fulfil multiple purposes; including preparing students for active citizenship, for their future careers (e.g. contributing to their employability), supporting their personal development, creating a broad advanced knowledge base and stimulating research and innovation⁴. Therefore, stakeholders, who may prioritise different purposes, can view quality in higher education differently and quality assurance needs to take into account these different perspectives. *Quality*, whilst not easy to define, is mainly a result of the interaction between teachers, students and the institutional learning environment. Quality assurance should ensure a learning environment in which the content of programmes, learning opportunities and facilities are fit for purpose.

At the heart of all quality assurance activities are the twin purposes of *accountability* and *enhancement*. Taken together, these create trust in the higher education institution’s performance. A successfully implemented quality assurance system will provide information to assure the higher education institution and the public of the quality of the higher education institution’s activities (accountability) as well as provide advice and recommendations on how it might improve what it is doing (enhancement). Quality assurance and quality enhancement are thus inter-related. They can support the development of a *quality culture* that is embraced by all: from the students and academic staff to the institutional leadership and management.

The term ‘quality assurance’ is used in this document to describe all activities within the continuous improvement cycle (i.e. assurance and enhancement activities).

Unless otherwise specified, in the document *stakeholders* are understood to cover all actors within an institution, including students and staff, as well as external stakeholders such as employers and external partners of an institution.

The word *institution* is used in the standards and guidelines to refer to higher education institutions. Depending on the institution’s approach to quality assurance it can, however, refer to the institution as whole or to any actors within the institution.

ESG: purposes and principles

The ESG have the following purposes:

- **They set a common framework** for quality assurance systems for learning and teaching at European, national and institutional level;
- **They enable the assurance and improvement of quality** of higher education in the European higher education area;
- **They support mutual trust**, thus facilitating recognition and mobility within and across national borders;
- **They provide information on quality assurance** in the EHEA.

⁴ Recommendation Rec (2007)6 by the Council of Europe’s Committee of Ministers on the public responsibility for higher education and research, http://www.coe.int/t/dg4/highereducation/News/pub_res_EN.pdf

These purposes provide a framework within which the ESG may be used and implemented in different ways by different institutions, agencies and countries. The EHEA is characterised by its diversity of political systems, higher education systems, socio-cultural and educational traditions, languages, aspirations and expectations. This makes a single monolithic approach to quality and quality assurance in higher education inappropriate. Broad acceptance of all standards is a precondition for creating common understanding of quality assurance in Europe. For these reasons, the ESG need to be at a reasonably generic level in order to ensure that they are applicable to all forms of provision.

The ESG provide the criteria at European level against which quality assurance agencies and their activities are assessed⁵. This ensures that the quality assurance agencies in the EHEA adhere to the same set of principles and the processes and procedures are modelled to fit the purposes and requirements of their contexts.

The ESG are based on the following four principles for quality assurance in the EHEA:

- Higher education institutions have primary responsibility for the quality of their provision and its assurance;
- Quality assurance responds to the diversity of higher education systems, institutions, programmes and students;
- Quality assurance supports the development of a quality culture;
- Quality assurance takes into account the needs and expectations of students, all other stakeholders and society.

⁵ Agencies that apply for inclusion in the European Quality Assurance Register (EQAR) undergo an external review for which the ESG provide the criteria. Also the European Association for Quality Assurance in Higher Education (ENQA) relies on compliance with the ESG when it comes to granting quality assurance agencies full membership status in the organisation.

European standards and guidelines for quality assurance in higher education

The standards for quality assurance have been divided into three parts:

- Internal quality assurance
- External quality assurance
- Quality assurance agencies

It should be kept in mind, however, that the three parts are intrinsically interlinked and together form the basis for a European quality assurance framework. External quality assurance in Part 2 recognises the standards for internal quality assurance in Part 1 thus ensuring that the internal work undertaken by institutions is directly relevant to any external quality assurance that they undergo. In the same way Part 3 refers to Part 2. Thus, these three parts work on a complementary basis in higher education institutions as well as in agencies and also work on the understanding that other stakeholders contribute to the framework. As a consequence, the three parts should be read as a whole.

The standards set out agreed and accepted practice for quality assurance in higher education in the EHEA and should, therefore, be taken account of and adhered to by those concerned, in all types of higher education provision.⁶ The summary list of standards for quality assurance is placed in the annex for easy reference.

The *guidelines* explain why the standard is important and describe how standards might be implemented. They set out good practice in the relevant area for consideration by the actors involved in quality assurance. Implementation will vary depending on different contexts.

⁶ The standards make use of the common English usage of “should” which has the connotation of prescription and compliance.

Part 1: Standards and guidelines for internal quality assurance

1.1 Policy for quality assurance

Standard:

Institutions should have a policy for quality assurance that is made public and forms part of their strategic management. Internal stakeholders should develop and implement this policy through appropriate structures and processes, while involving external stakeholders.

Guidelines:

Policies and processes are the main pillars of a coherent institutional quality assurance system that forms a cycle for continuous improvement and contributes to the accountability of the institution. It supports the development of quality culture in which all internal stakeholders assume responsibility for quality and engage in quality assurance at all levels of the institution. In order to facilitate this, the policy has a formal status and is publicly available.

Quality assurance policies are most effective when they reflect the relationship between research and learning & teaching and take account of both the national context in which the institution operates, the institutional context and its strategic approach. Such a policy supports

- the organisation of the quality assurance system;
- departments, schools, faculties and other organisational units as well as those of institutional leadership, individual staff members and students to take on their responsibilities in quality assurance;
- academic integrity and freedom and is vigilant against academic fraud;
- guarding against intolerance of any kind or discrimination against the students or staff;
- the involvement of external stakeholders in quality assurance.

The policy translates into practice through a variety of internal quality assurance processes that allow participation across the institution. How the policy is implemented, monitored and revised is the institution's decision.

The quality assurance policy also covers any elements of an institution's activities that are subcontracted to or carried out by other parties.

1.2 Design and approval of programmes

Standard:

Institutions should have processes for the design and approval of their programmes. The programmes should be designed so that they meet the objectives set for them, including the intended learning outcomes. The qualification resulting from a programme should be clearly specified and communicated, and refer to the correct level of the national qualifications framework for higher education and, consequently, to the Framework for Qualifications of the European Higher Education Area.

Guidelines:

Study programmes are at the core of the higher education institutions' teaching mission. They provide students with both academic knowledge and skills including those that are transferable, which may influence their personal development and may be applied in their future careers.

Programmes

- are designed with overall programme objectives that are in line with the institutional strategy and have explicit intended learning outcomes;
- are designed by involving students and other stakeholders in the work;
- benefit from external expertise and reference points;
- reflect the four purposes of higher education of the Council of Europe (cf. Scope and Concepts);
- are designed so that they enable smooth student progression;
- define the expected student workload, e.g. in ECTS;
- include well-structured placement opportunities where appropriate;⁷
- are subject to a formal institutional approval process.

1.3 Student-centred learning, teaching and assessment

Standard:

Institutions should ensure that the programmes are delivered in a way that encourages students to take an active role in creating the learning process, and that the assessment of students reflects this approach.

Guidelines:

Student-centred learning and teaching plays an important role in stimulating students' motivation, self-reflection and engagement in the learning process. This means careful consideration of the design and delivery of study programmes and the assessment of outcomes.

The implementation of student-centred learning and teaching

- respects and attends to the diversity of students and their needs, enabling flexible learning paths;
- considers and uses different modes of delivery, where appropriate;
- flexibly uses a variety of pedagogical methods;
- regularly evaluates and adjusts the modes of delivery and pedagogical methods;
- encourages a sense of autonomy in the learner, while ensuring adequate guidance and support from the teacher;
- promotes mutual respect within the learner-teacher relationship;
- has appropriate procedures for dealing with students' complaints.

Considering the importance of assessment for the students' progression and their future careers, quality assurance processes for assessment take into account the following:

- Assessors are familiar with existing testing and examination methods and receive support in developing their own skills in this field;

⁷ Placements include traineeships, internships and other periods of the programme that are not spent in the institution but that allow the student to gain experience in an area related to their studies.

- The criteria for and method of assessment as well as criteria for marking are published in advance;
- The assessment allows students to demonstrate the extent to which the intended learning outcomes have been achieved. Students are given feedback, which, if necessary, is linked to advice on the learning process;
- Where possible, assessment is carried out by more than one examiner;
- The regulations for assessment take into account mitigating circumstances;
- Assessment is consistent, fairly applied to all students and carried out in accordance with the stated procedures;
- A formal procedure for student appeals is in place.

1.4 Student admission, progression, recognition and certification

Standard:

Institutions should consistently apply pre-defined and published regulations covering all phases of the student “life cycle”, e.g. student admission, progression, recognition and certification.

Guidelines:

Providing conditions and support that are necessary for students to make progress in their academic career is in the best interest of the individual students, programmes, institutions and systems. It is vital to have fit-for-purpose admission, recognition and completion procedures, particularly when students are mobile within and across higher education systems.

It is important that access policies, admission processes and criteria are implemented consistently and in a transparent manner. Induction to the institution and the programme is provided.

Institutions need to put in place both processes and tools to collect, monitor and act on information on student progression.

Fair recognition of higher education qualifications, periods of study and prior learning, including the recognition of non-formal and informal learning, are essential components for ensuring the students’ progress in their studies, while promoting mobility. Appropriate recognition procedures rely on

- institutional practice for recognition being in line with the principles of the Lisbon Recognition Convention;
- cooperation with other institutions, quality assurance agencies and the national ENIC/NARIC centre with a view to ensuring coherent recognition across the country.

Graduation represents the culmination of the students’ period of study. Students need to receive documentation explaining the qualification gained, including achieved learning outcomes and the context, level, content and status of the studies that were pursued and successfully completed.

1.5 Teaching staff

Standard:

Institutions should assure themselves of the competence of their teachers. They should apply fair and transparent processes for the recruitment and development of the staff.

Guidelines:

The teacher's role is essential in creating a high quality student experience and enabling the acquisition of knowledge, competences and skills. The diversifying student population and stronger focus on learning outcomes require student-centred learning and teaching and the role of the teacher is, therefore, also changing (cf. Standard 1.3).

Higher education institutions have primary responsibility for the quality of their staff and for providing them with a supportive environment that allows them to carry out their work effectively. Such an environment

- sets up and follows clear, transparent and fair processes for staff recruitment and conditions of employment that recognise the importance of teaching;
- offers opportunities for and promotes the professional development of teaching staff;
- encourages scholarly activity to strengthen the link between education and research;
- encourages innovation in teaching methods and the use of new technologies.

1.6 Learning resources and student support

Standard:

Institutions should have appropriate funding for learning and teaching activities and ensure that adequate and readily accessible learning resources and student support are provided.

Guidelines:

For a good higher education experience, institutions provide a range of resources to assist student learning. These vary from physical resources such as libraries, study facilities and IT infrastructure to human support in the form of tutors, counsellors and other advisers. The role of support services is of particular importance in facilitating the mobility of students within and across higher education systems.

The needs of a diverse student population (such as mature, part-time, employed and international students as well as students with disabilities), and the shift towards student-centred learning and flexible modes of learning and teaching, are taken into account when allocating, planning and providing the learning resources and student support.

Support activities and facilities may be organised in a variety of ways depending on the institutional context. However, the internal quality assurance ensures that all resources are fit for purpose, accessible, and that students are informed about the services available to them.

In delivering support services the role of support and administrative staff is crucial and therefore they need to be qualified and have opportunities to develop their competences.

1.7 Information management

Standard:

Institutions should ensure that they collect, analyse and use relevant information for the effective management of their programmes and other activities.

Guidelines:

Reliable data is crucial for informed decision-making and for knowing what is working well and what needs attention. Effective processes to collect and analyse information about study programmes and other activities feed into the internal quality assurance system.

The information gathered depends, to some extent, on the type and mission of the institution. The following are of interest:

- Key performance indicators;
- Profile of the student population;
- Student progression, success and drop-out rates;
- Students' satisfaction with their programmes;
- Learning resources and student support available;
- Career paths of graduates.

Various methods of collecting information may be used. It is important that students and staff are involved in providing and analysing information and planning follow-up activities.

1.8 Public information

Standard:

Institutions should publish information about their activities, including programmes, which is clear, accurate, objective, up-to date and readily accessible.

Guidelines:

Information on institutions' activities is useful for prospective and current students as well as for graduates, other stakeholders and the public.

Therefore, institutions provide information about their activities, including the programmes they offer and the selection criteria for them, the intended learning outcomes of these programmes, the qualifications they award, the teaching, learning and assessment procedures used the pass rates and the learning opportunities available to their students as well as graduate employment information.

1.9 On-going monitoring and periodic review of programmes

Standard:

Institutions should monitor and periodically review their programmes to ensure that they achieve the objectives set for them and respond to the needs of students and society. These reviews should lead to continuous improvement of the programme. Any action planned or taken as a result should be communicated to all those concerned.

Guidelines:

Regular monitoring, review and revision of study programmes aim to ensure that the provision remains appropriate and to create a supportive and effective learning environment for students.

They include the evaluation of:

- The content of the programme in the light of the latest research in the given discipline thus ensuring that the programme is up to date;
- The changing needs of society;
- The students' workload, progression and completion;
- The effectiveness of procedures for assessment of students;
- The student expectations, needs and satisfaction in relation to the programme;
- The learning environment and support services and their fitness for purpose for the programme.

Programmes are reviewed and revised regularly involving students and other stakeholders. The information collected is analysed and the programme is adapted to ensure that it is up-to-date. Revised programme specifications are published.

1.10 Cyclical external quality assurance**Standard:**

Institutions should undergo external quality assurance in line with the ESG on a cyclical basis.

Guidelines:

External quality assurance in its various forms can verify the effectiveness of institutions' internal quality assurance, act as a catalyst for improvement and offer the institution new perspectives. It will also provide information to assure the institution and the public of the quality of the institution's activities.

Institutions participate in cyclical external quality assurance that takes account, where relevant, of the requirements of the legislative framework in which they operate. Therefore, depending on the framework, this external quality assurance may take different forms and focus at different organisational levels (such as programme, faculty or institution).

Quality assurance is a continuous process that does not end with the external feedback or report or its follow-up process within the institution. Therefore, institutions ensure that the progress made since the last external quality assurance activity is taken into consideration when preparing for the next one.

Annex: Summary list of standards

Part 1: Standards for internal quality assurance

1.1 Policy for quality assurance

Institutions should have a policy for quality assurance that is made public and forms part of their strategic management. Internal stakeholders should develop and implement this policy through appropriate structures and processes, while involving external stakeholders⁸.

1.2 Design and approval of programmes⁹

Institutions should have processes for the design and approval of their programmes. The programmes should be designed so that they meet the objectives set for them, including the intended learning outcomes. The qualification resulting from a programme should be clearly specified and communicated, and refer to the correct level of the national qualifications framework for higher education and, consequently, to the Framework for Qualifications of the European Higher Education Area.

1.3 Student-centred learning, teaching and assessment

Institutions should ensure that the programmes are delivered in a way that encourages students to take an active role in creating the learning process, and that the assessment of students reflects this approach.

1.4 Student admission, progression, recognition and certification

Institutions should consistently apply pre-defined and published regulations covering all phases of the student “life cycle”, e.g. student admission, progression, recognition and certification.

1.5 Teaching staff

Institutions should assure themselves of the competence of their teachers. They should apply fair and transparent processes for the recruitment and development of the staff.

1.6 Learning resources and student support

Institutions should have appropriate funding for learning and teaching activities and ensure that adequate and readily accessible learning resources and student support are provided.

1.7 Information management

Institutions should ensure that they collect, analyse and use relevant information for the effective management of their programmes and other activities.

1.8 Public information

Institutions should publish information about their activities, including programmes, which is clear, accurate, objective, up-to date and readily accessible.

1.9 On-going monitoring and periodic review of programmes

Institutions should monitor and periodically review their programmes to ensure that they achieve the objectives set for them and respond to the needs of students and society. These reviews should

⁸ Unless otherwise specified, in the document stakeholders are understood to cover all actors within an institution, including students and staff, as well as external stakeholders such as employers and external partners of an institution.

⁹ The term “programme” in these standards refers to higher education provision in its broadest sense, including provision that is not part of a programme leading to a formal degree.

lead to continuous improvement of the programme. Any action planned or taken as a result should be communicated to all those concerned.

1.10 Cyclical external quality assurance

Institutions should undergo external quality assurance in line with the ESG on a cyclical basis.

Part 2: Standards for external quality assurance

2.1 Consideration of internal quality assurance

External quality assurance should address the effectiveness of the internal quality assurance described in Part 1 of the ESG.

2.2 Designing methodologies fit for purpose

External quality assurance should be defined and designed specifically to ensure its fitness to achieve the aims and objectives set for it, while taking into account relevant regulations. Stakeholders should be involved in its design and continuous improvement.

2.3 Implementing processes

External quality assurance processes should be reliable, useful, pre-defined, implemented consistently and published. They include

- a self-assessment or equivalent;
- an external assessment normally including a site visit;
- a report resulting from the external assessment;
- a consistent follow-up.

2.4 Peer-review experts

External quality assurance should have a professional system of peer review at its core, carried out by groups of experts that include (a) student member(s).

2.5 Criteria for outcomes

Any outcomes or judgements made as the result of external quality assurance should be based on explicit and published criteria that are applied consistently, irrespective of whether the process leads to a formal decision.

2.6 Reporting

Full reports by the experts should be published, clear and accessible to the academic community, external partners and other interested individuals. If the agency takes any formal decision based on the reports, the decision should be published together with the report.

2.7 Complaints and appeals

Complaints and appeals processes should be clearly defined as part of the design of external quality assurance processes and communicated to the institutions.

Part 3: Standards for quality assurance agencies

3.1 Activities, policy and processes for quality assurance

Agencies should undertake external quality assurance activities as defined in Part 2 of the ESG on a regular basis. They should have clear and explicit goals and objectives that are part of their publicly

available mission statement. These should translate into the daily work of the agency. Agencies should ensure the involvement of stakeholders in their governance and work.

3.2 Official status

Agencies should have an established legal basis and should be formally recognised as quality assurance agencies by competent public authorities.

3.3 Independence

Agencies should be independent and act autonomously. They should have full responsibility for their operations and the outcomes of those operations without third party influence.

3.4 Thematic analysis

Agencies should regularly publish reports that describe and analyse the general findings of their external quality assurance activities.

3.5 Resources

Agencies should have adequate and appropriate resources, both human and financial, to carry out their work.

3.6 Internal quality assurance and professional conduct

Agencies should have in place processes for internal quality assurance related to defining, assuring and enhancing the quality and integrity of their activities.

3.7 Cyclical external review of agencies

Agencies should undergo an external review at least once every five years in order to demonstrate their compliance with the ESG.

Appendix 2

Template and guidelines for the drafting of the Self Evaluation Report

Introduction

The SER is the single most important document in the review process and the process of drafting it should be an opportunity for the unit under review to reflect on:

- academic standards
- the quality of the student learning experience provided to ensure that students have the best chance of achieving those standards
- the continuing relevance of courses to both internal and external needs
- alignment with national and international expectations
- good practice or innovation.

The key questions for the unit under review, in considering the major and minor modifications made to the area since the last periodic review and bearing in mind all the evidence provided in the annual monitoring reports, are:

- Is the standard of the provision still appropriate to its location on the Framework of National Qualifications?
- Does the student experience offer students the best opportunity to achieve those standards?

In evaluating standards and quality, it sometimes helps to consider each area in the light of some key questions:

- What are we trying to do and why?
- How is it being done and why is it being done in that way?
- How do we know it's effective?
- What could we do to improve it?

The evaluation should be for all academic provision in the unit, including any collaborative or partnership arrangements.

Process

The unit under review should set up a representative co-ordinating committee with a chair. There is no prescription as to the membership of the committee but it must represent all aspects of the unit under review, there should be a full student member and members should be willing to be responsible for drafting parts of the document, for reviewing the whole document and for ensuring that all other staff and students are aware of and involved as appropriate in the exercise.

The co-ordinating committee will have a period of approximately 8-12 months to draft the SER and will need to ensure that it is lodged with the QPU 10 weeks before the review. The SER and any accompanying documentation should be provided electronically (either on a CD-ROM or in a zipped folder). There is no need to provide hard copies of the documentation. However, the SER should be paginated and clearly referenced to facilitate the PRG's reading of documentation. The unit may decide to provide the PRG with access to its intranet pages.

The views of staff, students and external (including UCC) stakeholders should be sought. Units may choose to make use of existing student surveys (either internal or module surveys) rather than developing another survey for the purpose of the review. Likewise, the opinions of all groups might be sought by other means (e.g. focus groups) rather than by questionnaires. The key is that evidenced results may be presented to the PRG.

Template

(NB: a cover sheet is available on the QPU website at <http://www.ucc.ie/en/qpu/guidelines>)

Introduction

Brief description of the process whereby the SER was drafted and details of the co-ordinating committee

Brief overall view from the unit's perspective on the SER, the views expressed by staff, students and other stakeholders and any areas of improvement highlighted by those views and by the SWOT analysis/benchmarking exercise.

See appendices 8 and 9 for further information on SWOT and benchmarking exercises and surveys.

Context

The provision covered in the scope of the review (including any collaborative partnerships/awards)

Aims and main characteristics of the unit

Aims of programmes/courses that are contained within the review

Future developments – plans for the future, highlighting any areas where the SWOT analysis or any other part of the self-evaluation process to date has challenged current thinking about the future

Key facts

Student profile with commentary on data (reviewers may be referred to annual monitoring templates if that data is deemed to be appropriate).

Staff profile: numbers of full and part-time staff; number of technicians and support staff; number of staff holding or studying for relevant professional qualifications

Resources: teaching and learning resources and academic and personal support available to students

Evaluation

This section of the SER should allow the unit to demonstrate what the unit does, how well it does it and how the unit knows it is doing well. It is also the opportunity to highlight areas of good practice and suggestions for improvement. Evidence that may be extracted from annual monitoring reports should be highlighted.

This is the opportunity to consider the provision to be reviewed in terms of how it has changed since it was last periodically reviewed, the changes that have been made over that period of time and any comments or evaluation over that period of time (e.g. comments by external examiners or evaluation by students, both sets of evidence available from annual monitoring). There should also be an evaluation as to whether or not the provision is still located correctly on the National Framework of Qualifications (NFQ) and if there is good practice pertaining to the student experience provided or if there are areas that could be improved.

Structuring the evaluative section

In order to ensure consistency across reviews of academic provision, the following areas should be covered:

- Comment on the data provided through the annual monitoring process, including responses to external examiners' reports and student feedback. State whether or not accumulated changes have impacted on the location of provision on the NFQ. (ESG 1.2, pg. 17 and 1.7, pg. 21)
- Strategic and curriculum planning
- Teaching, learning and assessment (ESG 1.3, pg.18)
- Research insofar as it impacts on teaching
- Student support (academic and pastoral) (ESG 1.6, pg. 20)
- Student achievement and employability
- Staff development (ESG 1.5, pg. 20)
- Resources (staffing, physical, technical, other) (ESG 1.6, pg. 20)
- Local quality assurance and enhancement activities, including those for student feedback and evaluation
- Academic collaborative partnerships
- External relations

The evaluative section should conclude with consideration of the most recent action plan contained in the annual monitoring template; a list of any recommendations that the unit wishes to make for consideration by the PRG and a list of what the unit considers to be good practice (ESG 1.9, pg 21).

The evaluative section may highlight any particular issue or area on which the unit under review would particularly welcome the PRG's views or that it would like to discuss with the PRG.

Annexes to the SER

An organogram showing the management and committee structure of the unit should be provided. This should indicate how information flows between the unit, the School (where appropriate) and the College. It should also indicate student input to committees and other deliberations

A report on the outcomes of the SWOT analysis (See appendix 8).

A report on the outcome of the benchmarking visit(s) (See appendix 8).

The last periodic (quality review report) and associated quality improvement plan

All other documentation and evidence, as specified in Appendix 3, (e.g. Student Handbooks, module outlines, strategic plans etc.) should be available electronically to reviewers, where possible

Conclusion

A brief summary of the unit's evaluation of provision, highlighting key features of good practice and recommendations that have arisen through the period of evaluation.

Appendix 3: Additional documentation required for the periodic review

Documentation to be provided by the QPU:

- College Strategic Plan
- Last periodic review report for the unit
- Most recent Quality Improvement Plan (in interim period until annual monitoring reports are available)
- Most recent RQR report
- Information for reviewers (guidelines, expense claim forms etc)

Documentation to be provided by the unit:

- Organogram
- Links to academic staff profiles on website
- Any local strategic plan
- Annual monitoring reports (not for 2015-16)
- Student handbooks and other student information
- Module descriptors
- Any other evidence that the unit feels useful (e.g. minutes of meetings).

NB: The list of documentation given above is not exhaustive. You may wish to provide other documentation that you think will back up what is said in the SER and that may be useful to the PRG.

All of the above information should be provided electronically where possible. It can either be sent to the QPU on a memory stick or CD-ROM or, if possible/appropriate, reviewers may be given access to the website.

Appendix 4: Process for the nomination of external experts and conflict of interest form

Introduction

The process of nomination of external experts relies on a robust set of appointment criteria and a clear policy regarding conflict of interest to allow for continued independence in the selection of external reviewers. The process has one stage, with nominations made by the unit under review and the final selection being taken by a sub-committee of QPC.

Process

The QPU will ask the unit to be reviewed to provide a long list of between six and ten names of potential reviewers, depending on its size. A form for nominations is provided (see below).

The following *appointment criteria* must be taken into account when compiling the long list of potential reviewers:

- Breadth and depth of reviewer expertise in the discipline/unit area
- Extent of management experience in the area under review and/or at institutional level
- External reputation/profile within the area under review (e.g. representation on relevant national or international bodies)
- Gender balance
- A balance of national and international nominations (but preferably within the continent of Europe)
- At ease with reading and writing reports in English.

The following would constitute a *conflict of interest* and nominators should take these into account at the same time as the appointment criteria:

- Recently (in the last five years) acted as external examiner at UCC
- Recently or currently acting as a consultant or adviser to the unit under review
- Any relationship with the unit under review or its staff that could prejudice independence (including family or personal relationships with any member of the unit under review)
- Current partners in research collaborations or projects within the unit under review

(NB: A conflict of interest and confidentiality form will be sent to nominated reviewers which they will be obliged to sign and return in advance of the review. This form may be found at below).

Nominations should be sent to the Director of the Quality Promotion Unit who will check to ensure that the appointment criteria and conflict of interest statements have been taken into consideration.

A sub-group of QPC (three members) will make the final selection of reviewers from the long list. Membership of the sub-group will rotate annually.

Reviewers will then be invited to participate in the review by the QPU. Other nominations on the long list will be used should the any or all of the initially selected nominations be unable to participate.

The final panel will be communicated to the unit under review for information.

Form for the nomination of external reviewers

Nomination for Membership of a Peer Review Group (Quality Review) (form available at <http://www.ucc.ie/en/qpu/guidelines/>)

Name of unit under review _____ Date of review _____

Nominee Details

(X nominations are required. Please fill in a separate form for each nomination. A short CV or web reference should be provided for each nomination.)

- 1 Name:

- 2 Email address:

- 3 Telephone number:

- 4 Briefly describe why this person might be suitable as a member of the quality review team for your department (please refer to the Appointment criteria below):

- 5 Please read the attached conflict of interest statement which all external reviewers will be required to sign and confirm that, to the best of your knowledge, there is no conflict of interest:

Signed:

Name:

Position:

Date:

Appointment criteria

Please take the following into consideration when filling in 4 above:

- Breadth and depth of reviewer expertise in the discipline/unit area
- Extent of management experience in the area under review and/or at institutional level
- External reputation/profile within the area under review (e.g. representation on relevant national or international bodies)
- Gender balance
- A balance of national and international nominations
- At ease with reading and writing reports in English.

Statement of conflict of interest (to be completed by all external reviewers)

CONFLICT OF INTEREST FOR THE PURPOSE OF QUALITY REVIEW IS DEFINED AS FOLLOWS:

Family etc. Relationship

A member of a unit under review will be deemed to be 'related' to a reviewer if s/he is a spouse, parent, child, sibling, uncle or aunt, first cousin, niece or nephew, fiancée or grandparent or grandchild, or if the reviewer and the member of the unit are living together in the same household.

Academic/Employment Relationship

A reviewer will be deemed to have an academic or employment relationship with a member of the unit to be reviewed if the reviewer is

- Currently a lecturer, tutor or supervisor of a member of the unit who is a registered student at another institution
- Jointly supervising a student with a member of the unit
- Working on joint research project with a member of the unit
- A partner in a research grant proposal or other similar academic activity
- A visiting Professor/Lecturer/Adjunct Professor, etc. in the unit
- Has recently (in the last five years) acted as an external examiner for the unit
- Has worked at UCC in the last five years.

Other Cases

If a reviewer acquainted with a member of staff in the unit to be reviewed, apart from the cases described above then s/he must notify the Quality Promotion Unit of the acquaintanceship prior to the commencement of the review.

Declarations of Interest

1. All reviewers are asked to make a declaration of their interests.
2. As a matter of principle, individuals with major conflicts of interest will be asked not to participate as a member of the panel.

Requests for information

3. Reviewers are asked not to compromise their position by entering into discussions concerning the review with members of the academic units under review which could be perceived to give the unit an unfair advantage.
4. It is therefore strongly recommended that panel members should not discuss issues concerning self-evaluation reports.
5. If any member has concerns over a potential conflict of interest or the propriety of a proposed action s/he should discuss it with Fiona Crozier, Director of Quality Promotion Unit in UCC.

Minor interests

6. Reviewers are invited to declare minor interests on an *ad hoc* basis, so that they can be handled on a case by case basis. The following are offered as examples of minor interests and possible methods of dealing with them. They are illustrative and do not constitute an exhaustive or prescriptive list:
 - a. Panel member supervises or co-supervises one or more doctoral students from a submitting unit. Panel member declares this for the panel to note.
 - b. The reviewer has acted during the assessment period as a member of an appointment or promotions committee for a submitting department or unit, or has provided references for staff members returned in the submission.
 - c. The reviewer acts as an external examiner for research degrees for a submitting department/school or unit.
 - d. The reviewer studied at a submitting unit before the assessment period.
 - e. A member of the reviewer’s wider family studies or works at a submitting department or unit. Panel member declares this for the panel to note.
7. All reviewers are bound by the confidentiality arrangements described below.

Potential conflict of interest check-list

	Yes	No
Have you had any formal association with UCC (e.g. as staff or student) over the last five years?		
Do you teach any member of the unit of assessment at another institution?		

Do you have a personal or family relationship with any member of the unit of assessment?		
Are you jointly supervising any student within the unit of assessment?		
Have you co-authored publications with any member of the unit of assessment?		
Have you collaborated with any member of the unit of assessment on a research project?		
Are you a partner in a research grant proposal or other similar academic activity?		
Have you acted as External Examiner for a thesis in the last three years?		
Have you a commercial interest in the research carried out within the unit of assessment?		
Have you acted in the past as an employer of any member of the unit?		
Are you a visiting professor/lecturer/adjunct professor in the unit of assessment?		
Are there any other circumstances that might jeopardise the independence of your judgement? If so, please give details.		

Confidentiality arrangements

1. The purpose of this section of the document is to set out arrangements for ensuring that all information pertaining to the review is treated confidentially by panels. The arrangements described below provide for maintaining the confidentiality of all information unless or until such time as it becomes freely available in the public domain.

Obligations on reviewers

Information contained in self-assessment reports or additional to those reports

2. Reviewers shall use any information received in the review submissions from units only for the purposes of carrying out functions as a panel member.
3. Copies of information cannot be made except as is necessary to carry out the function as a reviewer. Originals and any copies made of any information must be returned to UCC or destroyed as soon as they are no longer needed for that function. This provision applies equally to paper copies or those stored in electronic formats or other non-paper formats.

4. Information received shall not be disclosed to any other person except fellow reviewers.

5. Acceptance of these confidentiality obligations is a condition of appointment as a reviewer.

Declaration of absence of conflict of interest

I declare that I have read the above information on conflicts of interest. I confirm that I have no conflict of interest with the unit of assessment or any of the members therein.

Signed:

Date:

Acceptance of confidentiality obligations

I declare that I have read the obligations on reviewers with regard to confidentiality. I agree to abide by those obligations.

Signed:

Date:

Appendix 5: Role of PRG members

Chair

The Chair will be a senior member of UCC staff and, as such, will be knowledgeable about the University, its structure and functioning. The Chair is an internal member of the panel so as to allow the external members to fully bring to bear their discipline expertise on the review. The Chair's role is to:

- Chair all meetings of the PRG and all meetings with those people that the PRG is scheduled to meet;

- Take charge of the preparatory meeting: the first meeting of the panel will be immediately after the briefing on the process at the start of the review. This is the PRG's opportunity to reflect on what it has read, on the comments it has made prior to the review and on the schedule as it stands. The Chair will need to ensure that, by the end of that preparatory meeting, agendas for the first few meetings have been drafted and that skeleton agendas for other meetings are in place and that the final report has been discussed and responsibilities for drafting sections of it have been allocated;

- Ensure that an exit presentation is prepared and that the PRG members are clear on its delivery
- Ensure that a good draft of the final report exists at the end of the visit and that the PRG members are clear on the work that must be done to finalise the report;
- Ensure that an agreed final report is sent to the Director of the Quality Promotion Unit no more than three weeks after the end of the site visit.

Rapporteur

The rapporteur may be an internal or external member of the PRG. The rapporteur's role is to:

- Co-ordinate the writing, editing and finalising of the review report;
- With the Chair, ensure that a good first draft of the report is available by the end of the site visit;
- Subsequent to the site visit, co-ordinate the completion of the report;
- Send the final draft of the report to the Director of the Quality Promotion Unit no more than three weeks after the end of the site visit and
- Co-ordinate the communication of any changes to the report following the corrections of factual error by the unit under review.

NB: The rapporteur does not write the report and is not a note-taker.

Members of the PRG

There will be internal, external and student members of the PRG. All members of the PRG, including the Chair and the Rapporteur, will be expected to:

- Read and analyse the Self- Evaluation document and other documentation submitted by the unit under review;
- Participate fully in the review, in both scheduled meetings and private meetings of the team;
- Draw conclusions and come to decisions about features of good practice and recommendations
- Contributing in writing to the compilation of the draft report and commenting on the final draft and on the response made by the unit under review on matters of factual error, in line with scheduled deadlines.

NB: Student members of the review team will be treated as full members of the team. The QPU will work with the Students' Union to ensure that participating students are briefed and trained so that they can participate fully. Students' travel expenses will be reimbursed at approved rates.

Appendix 6: Typical schedule for a review

Day 1

PRG arrives in time for working lunch, including briefing by QPU

12.30 Lunch and briefing by Director of QPU

13.30 Private meeting of the PRG for discussion and agenda-setting purposes

15.00 Meeting with Head of Unit

16.00 Private meeting of PRG

16.30 Meeting with Head of College

17.30 Private meeting of PRG

19.00 Dinner (PRG, Director of QPU, Head of Unit and up to three other members of staff from the unit under review)

Day 2

08.30 PRG assembles at UCC

09.00 Meeting with all staff from the unit under review

11.00 Coffee and private meeting of PRG

11.30 Meeting with senior management of the University (to include the Registrar, the VP for Teaching & Learning, the VP for Research and Innovation, the Head of Student Experience. Other senior members of staff may be included depending on the PRG's lines of enquiry).

13.00 Lunch and private meeting of PRG

14.00 Meeting with students (the PRG may wish to divide into two and to have two separate meetings with UG and PG students)

15.15 Tea break and private meeting of PRG

16.00 Meeting with officers of the university, to include the College Financial analyst and other officers, depending on the PRG's lines of enquiry

17.15 Meeting with external stakeholders

19.00 Private dinner for PRG. To discuss/work on the report

Day 3

AM

Further meetings as previously agreed/as necessary

Wrap-up meeting with the Head of Unit

Feedback to staff

Carry on work on the report (begun at dinner the night before)

LUNCH

PM

Further work on drafting the report/agreeing next steps. PRG joined by the Director of the QPU if desired

16.00 Reviewers depart

Appendix 7: Report template

Periodic review of {subject area}

Introduction

1. A periodic review of UNIT was held on {DATES}. The members of the panel were: {NAMES/JOB TITLES/INSTITUTIONS}.
2. The panel also received {EVIDENCE ie SELF-EVALUATION etc}.

General Observations

3. Overarching remarks, including, for example, comment on the SER and its usefulness and the outcomes of the SWOT and benchmarking exercises

Academic standards

4. Aims and Outcomes (is the provision still located correctly on the NFQ?)
5. Strategic and curriculum planning
6. Student progress and attainment
7. External reference points (including external examiners' reports and requirements of PSRBs)

Student Experience

8. Teaching and learning, including the impact of research on teaching
9. Assessment
10. Staff development
11. Learning resources
12. Student support
13. Employability/involvement with the wider community

Collaborative partnerships

14. Details of collaborative/partnership arrangements and the quality assurance mechanisms employed in terms of monitoring of standards and quality

Enhancement

15. Effectiveness of quality management processes within the unit
16. Conclusions on the way the unit enhances its provision and the experience of their students.

Conclusions on innovation and good practice

17. A statement on any current aspects of the unit and its provision which the PRG feels is particularly innovative or representative of good practice.

Recommendations

18. Comment on actions taken since last review (monitoring of action plan through annual monitoring process)
19. Comment on any recommendations made by the unit in its SER
20. Recommendations by the PRG for consideration and response.

Appendix 8: SWOT analysis and benchmarking

Benchmarking:

All units are required to undergo a benchmarking exercise. The purpose of this exercise is to allow the unit under review to draw comparisons with other national/international institutions, to benchmark internal practices against those used in other institutions and to see if any of those practices used elsewhere could be useful and adopted in UCC to improve current ways of working.

The benchmarking exercise must be:

Appropriate: benchmarking must be carried out at an institution against which the UCC can reasonably compare itself with a view to improving its practice.

Focused: the unit should be clear about the practices it wishes to compare and should provide the external institution(s) with a list of objectives for the meeting in advance of the visit.

Reported: The benchmarking exercise must be reported on in the SER. The report should detail:

- The institution(s) visited and why they were chosen
- The focus of the visit and the objectives provided in advance of the visit
- The outcome(s) of the visit, lessons learned and impact on the unit's internal practices, including whether or not they will be highlighted in future strategic planning and/or led to any internal recommendations made in the SER.

Resources

The QPU will provide up to €700 to support the benchmarking exercise. The unit under review may add to that amount should it wish. A cost plan should be drawn up and shared with the QPU; an internal transfer will then be arranged.

SWOT analysis

A key part of the self-evaluation process is the undertaking of a SWOT (strengths, weaknesses, opportunities and threats) analysis. This exercise allows the unit to consider the review which it is undertaking in the light of future planning and the recommendations that it might make in its SER for comment by the PRG.

It is important that the SWOT analysis is undertaken by as many staff (academic and administrative) as possible. The unit may also wish to consider inviting students to participate in the exercise.

The SWOT analysis should:

- Consider the unit as a whole
- Make the analysis as full and frank as possible
- Consider each heading in the light of all relevant factors (e.g. vision, mission, academic standards, the student experience, staffing and staff development, organisation, resources, external engagement and collaborative provision).

Strengths

A strength relates to the internal environment of the unit and is something that the unit is particularly good at (it may be useful to consider strengths under the categories of strategy, structure, systems, staff, skills culture and management style and shared values).

Weaknesses

A weakness also relates to the internal environment of the unit and is an areas where the unit could improve. (It may be useful to consider weaknesses under the categories of strategy, structure, systems, staff, skills culture and management style and shared values).

Opportunities

An opportunity is a feature of the external environment that the unit could use to its advantage. (It may be useful to consider opportunities under the categories of political, economic, social, technological, environmental and legal).

Threats

A threat or challenge is some feature ion the external environment that could damage the unit. (It may be useful to consider threats under the categories of strategy, structure, systems, staff, skills culture and management style and shared values).

Recommendations

The analysis carried out and the information gained through the SWOT should assist the unit in making its own recommendations for improvement that can be validated or commented upon by the PRG.

It is recommended that the SWOT analysis is facilitated by someone external to the unit under review. The QPU can offer assistance in finding a suitable facilitator from within UCC to lead the SWOT analysis. It will also cover the cost of a venue such as a meeting room at the River Lee Hotel and tea and coffee, if the unit would like to take the opportunity of conducting the SWOT analysis off-site. Please contact the QPU for further information.

Appendix 9: Use of surveys

The unit must be able to provide the views of the following in its SER:

- Students
- Staff of the unit
- UCC staff external to the unit
- External stakeholders

However, it may not be necessary to conduct four separate surveys. If all staff participate in the SWOT analysis then the unit may decide that there is no need to conduct a further survey.

If students' views are sought elsewhere (e.g. at university level through the module survey or student experience survey and through internal means for hearing students' views such as internal surveys and focus groups) and the feedback received is being considered through the annual monitoring process, then the unit may feel it is not necessary to conduct an additional survey of students.

However, it is expected that survey of staff external to the unit and external stakeholders will be carried out. The unit may devise one survey to cover both groups or it may decide to conduct two separate surveys. It may also decide to target those stakeholders who are external to the unit whose views are most important.

The feedback from staff, students and external stakeholders should be summarised in the SER. The survey used for external stakeholders should be appended to the SER.

The QPU can provide samples of previous surveys used in quality reviews. However, it cannot conduct surveys on behalf of the unit.

Appendix 10: Annual monitoring template

DRAFT TEMPLATE: ANNUAL MONITORING

Annual monitoring requires comment on three key areas:

- i) Management information data (pre-populated)
- ii) Comment on feedback from external examiners and students
- iii) Comment on any major/minor revisions to programmes and on recommendations made by any programme approval panels and by the last Quality Review PRG.

It is important that all relevant staff and students have the opportunity to be involved in the monitoring process, either through their attendance at the relevant meeting or by providing comment on the completed template.

It may be that certain sections of the template are dealt with in different ways a within a department/School or College. That need not change so long as the relevant part of the template is completed. For example, if management information data is considered by a particular forum and external examiners' reports by another, so long as the comments from both fora are fed into the template this will not be an issue. However, it is important that the template in full is returned for consideration by the College XXX Committee by XXX

Programme title	
Academic session to be monitored	
Name of contact for programme	

1. Management information data

Key questions to consider when responding:

- Are the intake, progression and exit patterns similar to those of the last three years? If they are different, might there be a reason for this?
- Are you aware of any similar patterns in other disciplines/Schools?
- Any further comment?

a. Student Intake

			Intake				
			2009/10	2010/11	2011/12	2012/13	2013/14
UG/PG	Qualification	Qual Code					
UG							

	Total						
PG							
	Total						
Total							

b. First Year Progression

School	Course	2012/ 13					
		Intake	Withdrew *	Repeating Year 1 Original Course	Repeating Year 1 Different Course	% Intake Retained Original Course	% Intake Retained UCC

** Withdrew – Students who officially withdrew during the Academic Year or who did not return to College in the following Academic Year*

c. Student Achievement

		2013							Total
		1 H	2H1	2H 2	2H	3H	PASS	AWARDED	
UG/PG	Qualification								
PG									
	Total								
	Total								

2. Comments from external examiners' reports

This section could form the basis of a response to the external examiner. If no action will be taken in response to a suggestion, the reason should be given.

Issues raised	Comment/response	Action	Response to external examiner (with date)

3. Issues raised by students and programme response

This section may be informed by feedback from student rep comments at committee meetings and by the results of module/programme surveys.

Issues raised (through surveys/via reps in meetings)	Programme response	Action	Feedback/loop closed (with date)

4. Overview and comment on major and/or minor modifications to the programme/modules over the year

The intention of this section is to allow the programme to monitor the extent of on-going changes to modules and to be alerted to the any impact these changes might have on the future of the programme as a whole.

5. Programme approval process: comment on progress made with regard to recommendations made by the panel

This provides a rolling update on recommendations/actions taken. Possible questions might include:

Are all the recommendations/actions still relevant? If not, why not?

Have any further actions been added or achieved during the course of the year?

6. Periodic programme review: comment/update on the Quality Improvement Plan put in place following the last periodic review

See comments under 5 above.

7. Any other comments