

**University College Cork
National University of Ireland, Cork**

Quality Improvement/Quality Assurance

Peer Review Group Report

School of Nursing & Midwifery

Academic Year 2004/05

15th April 2005

A SCHOOL ASPIRING TO EXCELLENCE: A SCHOOL IN TRANSITION

Context

This Quality Assurance Review was undertaken within a context of a range of inter-related but significant changes transacted locally, regionally and nationally. The Review team was mindful of the imperatives for social and economic change mandated by the Department of Health and Children and this report is written within this fluctuating context. These changes have impacted on the Health and Higher Education economy and, in particular, the Southern Area / Health Service Executive and its partner University College Cork. These changes have included:

- the integration into the University of a valued body of expertise from local Schools of Nursing,
- the implementation of an innovative 4-year degree programme that is intrinsically dependant upon partnership with these external health care providers,
- the development and implementation of a new “fit for purpose” campus facility within the University and the emergence of opportunities for inter-professional activities,
- a reform of health service design, workforce planning and delivery and response from the external sector.

MEMBERS OF THE PEER REVIEW GROUP

Professor Susan Ryan, Head of Department of Occupational Therapy, School of Clinical Therapies, UCC (Chair)

Dr. Dolores Dooley, Department of Philosophy, UCC (Internal member, Co-ordinator of Health Care Ethics in UCC)

Ms. Mary McCarthy, Chief Nursing Officer, Department of Health & Children, Dublin, Ireland (External member from the Republic of Ireland)

Professor David Sines, Dean of Faculty of Health and Social Care, London, South Bank University, UK (International external member)

This Peer Review Group [hereinafter referred to as the PRG] used its capabilities to work collaboratively and, through the combination of their individual strengths, were able to realise an appreciable understanding of the issues in health care science nursing education and practice to the context of the subject under review.

PEER REVIEW

Timetable of the visit

The timetable of the visit is attached in Appendix A.

From the outset, the PRG acknowledged the significant work that the department had undertaken in producing an inclusive and representative timetable.

This timetable was challenging yet it enabled the triangulation of key informant data with that of the material in the documents that were delivered beforehand as well as those presented “on the spot”. The timetable included a site visit and for adequate discussion with different groups. It allowed time for further requests for information, such as: more representative samples of work, specific forms relating to “Garda Clearance” and meeting another group of students from a specific age group that the PRG felt was not represented by the other pre-arranged groups.

Peer Review

Methodology adopted

Prior to the visit of the PRG to the School the Self Assessment Document [SAR] and the extensive appended documentation was scrutinised separately by each member. These documents were received within a suitable time-frame to allow for this thorough examination. They formed a comprehensive background to the extensive range of academic and practice programmes that were being offered by the School. This enabled the PRG to highlight areas for further exploration and discussion on their

actual visit. Also, prior to the group meeting, the Chair decided that only representatives of each of the groups would speak to the panel rather than the panel meeting large numbers of students and other parties. This decision was made in recognition that in-depth discussions were needed in order to gather relevant information and clarification.

Throughout the two days of the review the Peer Review Group received multiple presentations from both internal and external stakeholders. These meetings and discussions were complimented by access to a further range of supplementary documents deposited in the review room. These various combinations enabled the PRG to verify and triangulate the evidence that was presented in the original Self-Assessment Report and appendices.

The Group was particularly pleased to meet with senior external stakeholder representatives from Health agencies and their staff from the locality.

Prior to meeting each of these representative individuals and groups, each member of the PRG formulated questions they were interested to pursue from the issues that had arisen in the SAR documentation and related appendices. Professor Susan Ryan presided on the order of questioning and chaired each session.

Site Visit

The site visit comprised a tour of the new health complex, Brookfield House, on the UCC campus. This site demonstrated the physical integration of Nursing & Midwifery, the School of Medicine & the School of Clinical Therapies. The PRG was very impressed with:

- the clinical skills laboratories, the co-ordination of clinical learning opportunities and the broad range of appropriate equipment,
- the new Library facility, the on-line workstations, the provision of access to an extensive range of electronic learning resources and the foreseen provision of study skills programmes to access these,
- the “fit for purpose” range of IT, computer and audio visual facilities, provided and networked throughout the building,

- ❑ the range of “state of the art” learning and teaching resources in rooms of varying sizes and layouts, and
- ❑ the provision of staff facilities that maximised work enhancement activities.

Peer Review Group Report

A preliminary report following the standard UCC template was prepared collaboratively by all members of the PRG, under the leadership of the Peer Review Group Chair. This work was assisted by Ms. Aoife Ni Neill from the Quality Promotion Unit. It was presented to the School as a first draft at the end of the second afternoon but no discussion was permitted at this stage. Subsequently yet on the same day, a further draft was prepared in greater depth. A third draft was prepared by the Chair and circulated to all the PRG members for approval prior to it being made public.

OVERALL ANALYSIS

Self-Assessment Report and allied evidence:

The Self-Assessment Report (SAR) did not stand alone. It was supplemented by extensive accompanying appendices comprising three volumes. Further information was also provided by the School on the days of the PRG visit and this related to past examination papers, minutes of relevant meetings, school teaching and learning materials, and course booklets. In addition the PRG was provided with a range of materials relating to the support and transaction of practice learning in the clinical situation.

Whilst the PRG complimented the School on the production of a most satisfactory Self-Assessment Report [SAR] it was noted that the “student perspective” and that of “the clinical voice” was not so much in evidence in the written word. The “student voice” was heard through other channels such as in the meetings with the PRG and it was also documented in the reports from the effective Student Affairs Committee. It appeared that this committee afforded opportunity for student representation at the highest level across all programmes. This was complimented by the PRG. The

“clinical voice” was very evident in the discussions with various local groups but also did not come through strongly in the documentation.

Overall, the PRG appreciated the critical stance in the SAR that was adopted by the School when analysing their activities. However, in a number of areas the PRG felt more detailed analysis of the emergent themes could have been undertaken. This statement will be elaborated upon in the next sections of the report. Upon careful scrutiny the PRG noted some inconsistencies between the cited strengths and weaknesses.

Benchmarking

The School had undertaken a relevant benchmarking exercise in partnership with the University of Nottingham in England. They had also engaged with this School in additional peer review discussions. These provided a satisfactory base line from which to validate their performance.

FINDINGS OF THE PEER REVIEW GROUP

School Details

The School has expanded rapidly since 1994 and has seen a major increase in student numbers from 35 students in that first year to 1,022 students in 2004. This accelerated growth was accompanied by a major increase in staff appointments, many of which have been made in the last two years following the integration of local schools of nursing into the University programme. The integration of these schools, which was welcomed by the University, was so radical that new systems and processes had to be put in place very rapidly to accommodate this new situation. The PRG believe that a period of consolidation needs to occur.

The Department of Health and Children, local health-care providers and the University responded to this challenge through the unprecedented investment of financial, physical and human resources to develop an emergent educational workforce to support the local health services. The School has benefited from this

inward investment by a healthy student-staff ratio and by a supporting infrastructure for all its activities in education, teaching and research.

The School's Organisation & Planning

The Role of the School: The PRG was assured by many and various peoples that the School of Nursing & Midwifery occupied a key role within the Faculty and the University and was fairly represented in the University's Corporate Mission and Business Plan. The PRG noted the involvement of senior officers of the University in negotiating the integration of the expanded nursing portfolio in partnership with the local Health Service. Both the Vice-Presidents and the Dean confirmed the strategic role that the Head of School plays in the transaction of the School's business and academic endeavours. Acknowledgement was also provided of the School's academic achievements and of the Head of School's leadership in promoting the profile of nursing as an academic discipline.

Committees and Structures: The PRG reviewed the organisational and supporting committee structures. Because of the rapid expansion of the school and its associated businesses the PRG endorses the School's recommendation that a review be undertaken of the number of committees within the school. Additionally, the PRG recommends that the School introduces a more participatory model of engagement on these committees to include the other stakeholders both internal and external.

Whilst the number of committees should be reduced the PRG noted one particular issue relating to the co-ordination of staff development opportunities. It recommends that the School might wish to consider implementing a new Staff Development Committee with a remit to identify and respond to specific academic, clinical and research related needs. The PRG felt that this would encourage and support academic progression and advancement through the existing University structures.

The School Strategy: The PRG looked at the School Strategy written in 1999 in the documentation and noted that this is due to be reviewed following this Quality Assessment exercise. The PRG recommends that a full review be undertaken of the School Strategy. This should incorporate a review of the School's Mission Statement, its values and business plan in the context of the University's new corporate

planning. In addition, the School should consider developing a teaching, learning and assessment strategy (see commentary below). These reviews should all be undertaken in partnership with the key external stakeholders and, in addition, should include an explicit section on clinical practice learning.

Further issues: Two further issues were noted by the PRG from the documentation provided:

- (a) Student absenteeism in the undergraduate programmes was identified in the SAR (page 19) as requiring further attention. The PRG believes that as these are professional programmes this absenteeism should be pursued as a matter of urgency and further systems be put in place to monitor academic attendance and skills training. The PRG acknowledges that this issue may also have been a feature or response to the challenging learning situations the students were exposed to previously. These should be ameliorated in the current learning environment.

- (b) Further consideration should be given to ensuring that the pre-registration students were more aware of their designated hospital /service so that local ownership and positive participation were fostered.

Teaching & Learning

Learning environments: The PRG was fully aware of the difficult learning environments and circumstances that the school underwent consistently prior to entry to the new facilities in 2004. No one of the people that were interviewed criticised these circumstances and many praised the efforts made by the teaching staff to maintain the high standard of education. Everyone complimented the outcome of the taught undergraduate programmes. It was confirmed that the students' "fitness for practice" as an outcome was achieved.

Learning philosophies: However, the PRG noted that a learning philosophy was not made explicit in the Self-Assessment document. There was no mention of any specific learning theories or frameworks that might integrate the diverse undergraduate programmes. At postgraduate level the PRG felt that the wealth of

staff and student experiences had not been fully exploited or articulated with regard to the inclusion of this wealth of prior experience into the modules. The teaching appeared to be didactic. Furthermore, the tight schedule of learning within and between several five credit modules appeared to give rise to surface, strategic learning rather than deeper reflective learning. The PRG believes that this impedes the development of critical reasoning, self reflection and appraisal.

Practice education: These recommendations below are made whilst acknowledging that these new learning / linking systems have been set up in an unprecedented short period of time and only recently.

The PRG endorsed the School's view that clinical practice learning was central to its mission. However, through discussion with the key stakeholders, evidence was received to confirm that further co-ordination and / or other approaches are required to demonstrate and further consolidate the critical relationships that exist between the roles of link-lecturer, preceptor and clinical placement co-ordinator. Many of those interviewed did not know or could not name particular people nor did they appear to understand the various roles of those concerned. In their own words "they used their common sense".

In these discussions with the external stakeholders everyone confirmed that the UCC students are competent and "fit for practice" at the point of award. The preceptors were seen as valued colleagues in assessing the students. It appears that the role of the link-lecturer requires further development to include explicit guidance on the engagement of academic staff in both clinical practice and in the assessment of student competence. The PRG suggests that a range of models should be explored to achieve this objective. A discreet section on clinical / practice learning should be included in the recommended learning and teaching strategy for this School.

Skill acquisition: The PRG noted, through discussion with students and external stakeholders, but not with staff, that opportunities for the acquisition of key skills prior to the commencement of the first placement were not always afforded or offered. For example, manual handling, lifting and infection control were mentioned. These matters came to light on the last set of interviews so there was no opportunity

to recall or to discuss these matters with staff members. In this light the PRG recommends that the School, in partnership with Health Service colleagues, should develop an agreed “survival pack” for students’ first exposure to these learning experiences and that this be made explicit to avoid further uncertainties.

External colleagues: Of equal importance to the above issues has been the School’s acknowledgement of ensuring that members of the existing qualified workforce enhance their skills in clinical reasoning and reflection as it is applied to practice.

Health service managers also indicated their interest in working with academic staff to develop joint appointments and in identifying knowledge and competencies for specialist advanced practice. The latter should be incorporated within the Higher Diploma programme or other post-graduate awards.

Flexibility: The PRG felt that the School would benefit from reflecting on the modes currently deployed for programme delivery. Further consideration to flexible, self-directed programmes would enhance learning opportunities for certain groups. For example, part-time study routes could be introduced and the accreditation of prior learning and exemptions be further facilitated. It was felt that less face-to-face lecturing and more opportunities for independent, self-directed learning in certain areas would also enhance the School’s repertoire. This reduced staff / student contact would also provide staff with more time for their other research and academic responsibilities.

Postgraduate students noted the assessment burden placed upon them and, in this context, reported that occasionally feedback was not provided in sufficient time to act as a formative tool for making improvements in the next assignment.

The PRG recommends that the assessment schedule for each course should be reviewed and mapped within the context of both the student year and of whole programmes. Finally, realistic benchmarks for timely feedback for students should be developed and published.

Research & Scholarly Activity

The PRG was most impressed with the volume of scholarly activity, recorded and evidenced in Appendix H of the SAR. This was noted in light of the heavy teaching and difficult learning environments the staff had endured as well as the transitional challenges that they have just faced in moving from multiple sites to this new facility.

Research portfolio: The research portfolio compares favourably with other Schools of Nursing in Ireland. It is beginning to demonstrate application by designing four key themes that have been stated in the SAR. The PRG endorses the School's decision to review its research strategy and would recommend:

- that *all staff* should be invited into membership of each thematic research group and that all staff should be facilitated to demonstrate their contribution to research and scholarly activity in various diverse ways that compliment each thematic group and facilitate learning of the research processes,
- that staff should be encouraged to identify opportunities for research in clinical practice areas,
- the extension of these research activities into applied evidence based clinical practice, and
- the demonstration of innovation in teaching and learning through different research methodologies.

All the above should be manifest in peer reviewed professional journals.

Changing cultures: The PRG recognises that research is of utmost significance. The School has a mandate to engage in research and scholarly activity as part of the University's mission. For some staff, the transition from solely hospital-based nurse *training* to University *education* requires a fundamental shift in the self-perception of nurses as they become educators and researchers. The PRG applaud the inception of a relatively new research strategy / programme that will encourage staff to fulfil these research requirements.

Post-graduate research studies could be undertaken in collaboration with practising nurses.

Future research opportunities should be exploited in partnership with other Health Care disciplines within and without the University.

Staff Development

The PRG commend the extensive investment that staff and the School have made in engagement of staff development activities designed to enhance education, research and scholarship activities. In particular team-building exercises such as those afforded by Away Days, monthly research seminars and annual Research Conference attendance were noted. The implementation of a peer mentorship scheme for new staff is commended.

External collaboration: The School has demonstrated enterprise in the appointment of external mentors and a visiting Professor from the USA whose contribution to the enhancement of research and scholarship capability in the School is positive and realistic.

Staff Development Committee: The PRG recommend that a Staff Development Committee should be established supported by a staff development strategy. The primary task would be to facilitate the enhancement of clinical, educational and research skills in support of the School strategy and its associated endeavours.

Promotion & Advancement: The diverse nature of the School's business suggests that a range of staff development activities should be introduced to provide incentives and ladders for staff advancement and progression within the University structures.

Challenging University Structures: The PRG recommend that the School should be proactive in seeking recognition by the University's committees of recognising other forms of scholarship as well as that of research.

A primary task for the proposed Staff Development Committee should be to actively consider the desirability of strengthening the peer mentorship / support scheme for all staff of the School. The reviewers consider on-going peer mentoring to be a very

important aspect of staff development. This could include opportunities for secondment, coaching, co-teaching and peer learning.

The Staff Development Committee should ensure that a portfolio of staff development activities is provided to embrace scholarship, research, clinical (including mandatory up-dates where applicable) and pedagogic / andragogic developments.

External Relations

The PRG was very impressed with the support and admiration expressed by the external partners for the School. In particular, the School has responded positively to external requests for new programmes which have been put in place in an effective manner this developing a considerable portfolio of learning / development opportunities for nurses in the local area.

Governance: The University, the Faculty and School provided evidence of the centrality of the health services mission in their corporate and strategic plans. However the further strengthening of the partnership with health service providers could be achieved by introducing formal governance opportunities. An example might be to populate key school committees with representatives from these external stakeholder groups.

UCC Staff Visibility: Of equal importance to the above is the need to ensure that academic staff are visible in the health service both in practice and as representatives on local and national decision-making committees.

The promotion of more European and international links should be actively encouraged by the School in all its areas of endeavour.

Support Services

The PRG recognise the crucial work that has been transacted by support services both within the School and the wider University. Examples of excellence were noted. The School has integrated successfully academic and support staff in order to achieve its corporate objectives.

Finance: The finance services have been provided effectively and offer confidence with regard to the transparency of both accounting procedures and resource allocation to the school and its external stakeholders.

Library: The Library and information services were impressive. The provision of physical resources for these activities and the library resources themselves were considered to be most satisfactory. Of particular note has been the considerable investment in the provision of e-journals and electronic transfers to students. The unit of resource for books is considered to be above the benchmark and reflects the level of external investment made by external agencies and the rigorous negotiation of their procurement by the Head of School.

The PRG is mindful of the considerable investment required to induct students into the use of a range of library skills to enable them to exploit these opportunities. Further investment may be required to ensure that a full time dedicated librarian is allocated for this purpose. The PRG noted that some library skills sessions are already provided for students. And suggested that the curricula may also need to be adapted to facilitate the inclusion of library skills sessions, on-going and with the facility to provide training in new search data bases, for example. The provision of library services is recognised as a partnership endeavour between the university and the health service providers. Further negotiation is required between the University and the health care agencies to develop service level agreements to connect external library facilities with the University's central network.

Departmental Co-ordinating Committee & Methodology employed in the preparation of the Self-Assessment Report

The PRG noted that every effort was made to include all interested parties in the development of the SAR and its related appendices.

The PRG would strongly encourage all staff in the school to appraise critically the Self-Assessment Report / Document and this Report of the PRG in order to inform further and local action on key issues.

RECOMMENDATIONS FOR IMPROVEMENT

The PRG noted and endorsed the recommendations presented by the school in the SAR and associated appendices. In its own recommendations the PRG noted some anomalies between weaknesses identified in the SAR and recommendations made and this was outlined above. The PRG recommended that the School should address, in particular, the areas of weakness identified in the section on teaching and learning with a view to formulating recommendations that address the weaknesses identified.

Recommendations for Improvement made by the School

1. Re-define the School Mission Statement to reflect a patient / client orientation in the provision of education.
2. Achievement of the Mission Statement needs to be an integral part of discussions and consultations in developing the School Strategy for the next 5 years.¹
3. Define specific aims and objectives for the School to reflect what the School seeks to achieve for its students, staff, discipline, University and society in general, and with consideration to improving the quality of all School activities.
4. Continue to recruit academic, administrative and non-academic support posts to meet immediate and long-term needs of the School.
5. Endeavour to recruit senior academic staff to take leadership and strategic roles in developing the School and identify ways to develop staff (to PhD level) already appointed so that they can (i) compete for advertised senior appointments within the School (ii) compete for progression within UCC's Academic Progression Scheme.
6. Collaborate with Health Service Providers in creating joint appointments for lecturer-practitioner posts.
7. Continue to build on the current strategy of encouraging staff to avail of staff development opportunities.
8. Identify staff who have experienced difficulties in accessing University wide staff development activities and explore how their opportunities can be optimized.
9. Schedule Executive meetings at regular intervals.

¹ This is now integral to School meetings and Away days with all staff.

10. Review existing Committee structures with consideration to merging smaller / subcommittees into the Standing Committee framework
11. Systematically plan as per Faculty Policy to rotate committee membership and roles of responsibilities between staff.
12. Create structures and processes through which staff who are not committee members or leaders of programmes can contribute to agendas and participate in decision making processes concerning activities.
13. Continue to monitor School income and expenditure on an annual basis
14. Establish a permanent Accountancy position in the School.
15. Establish yearly budgets for Postgraduate and specific Branch programme (for example undergraduate or post-graduate psychiatric programmes) within the overall budget as appropriate.
16. Continue to develop a model of workload distribution based on UCC wide criteria and in ways that take account of, and make visible, all work activities to include teaching and assessment, clinical, administration, and research.
17. Develop a timetable of teaching activities for all staff inclusive of realistic protected clinical time (across programmes) and publish this at the beginning of each Academic Year.
18. Explore various approaches to facilitating academic staff meet their clinical commitments within the context of their individual workload distribution.
19. Identify work best carried out by administrative rather than lecturing staff with transfer to administrative staff where this improves efficient and effective use of time.
20. Communicate schedule of Committee meetings including Executive meetings for each period to all staff (already initiated with regard to all Executive meetings and distributed at September 2004 Away Day).
21. Ensure that all staff are informed of how to access Faculty agendas and minutes of meetings through the intra-net and encourage staff to submit any issues for consideration at Faculty to School Executive meeting in advance and in a timely manner.
22. Complete the current work on updating and reconstructing the School web page and continue to update it at regular intervals through a dedicated team.
23. Strengthen School participation in Faculty and University wide Committees.
24. Build on existing relations with Health Service Providers in ways that address

- research activities and practice development initiatives.
25. Strengthen interdisciplinary relations with colleagues in other Schools of the University.
 26. Increase the School profile of academic and professional standing on international bodies and activities.
 27. Initiate dialogue about and explore the provision of flexible approaches to programme delivery with all relevant parties within UCC.
 28. Strengthen the curriculum planning, development and review processes within the School to include all its elements and in ways that adopt a whole school approach and that involve student participation.
 29. Appoint a Senior Lecturer to lead School curricular activities.
 30. Increase opportunities for lecturers to access teaching and learning seminars to enhance their practice (e.g. seminars held in school).
 31. Evaluation of Modules, Programmes and Lecturers be planned, and conducted, by one individual.
 32. Review the library holdings for nursing and midwifery to identify deficits specific to individual programmes and branches/specialties.
 33. Continue to build research capacity of staff.
 34. Increase the number of peer-reviewed publications (likely to arise out of developing capacity).
 35. Increase collaboration between staff in team publishing, presenting and grant applications within and without the School.
 36. Develop the research strategy to identify other research themes led by staff with relevant capacity and expertise.
 37. Build a national and international reputation for high quality research from effective responsive research teams as staff capacity develops.
 38. Develop a recruitment strategy to attract increasing numbers of students for Master's and PhD degrees by research.
 39. Strengthen local, national and international collaborative links with academic and professional colleagues.
 40. Develop interdisciplinary research links starting locally with Faculty colleagues and other disciplines in UCC.

Recommendations for Improvement made by the PRG

The PRG recommends that:

1. the School introduce a more participatory model of collaboration with internal and external stakeholders,
2. a review should be undertaken of the number of committees within the School.
3. the School consider establishing a new Staff Development Committee with a remit to identify and respond to specific academic, clinical and research related needs to encourage and support academic progression and advancement within the University system,
4. a full review be undertaken of the School Strategy, incorporating a review of the School's mission, values and business plan in the context of the University's new corporate planning,
5. the School should consider the development of congruent teaching learning and assessment strategies,
6. systems be put in place to monitor academic attendance and skills training,
7. the assessment schedule for each course should be reviewed and mapped within the context of the student year and of a complete programme,
8. Benchmarks for timely feedback for students should be developed and published,
9. the role of the link-lecturer be further developed to include explicit guidance on the engagement of academic staff in both clinical practice and in the assessment of student competence,
10. the School, in partnership with Health Service colleagues, should develop an agreed "survival pack" for students' first exposure to these learning experiences and this should be made explicit to all parties concerned,
11. the School reflect on modes of delivery of programmes, with a view to increasing flexibility. For example, the introduction of part-time study routes and the accreditation of prior learning and exemptions should be considered. Less face-to-face lecturing and more opportunities for independent, self-directed learning in certain areas is recommended as this would provide staff with more time for their other research responsibilities,
12. the extension of research activities into applied evidence based practice, the demonstration of innovation in teaching and learning and in the transaction of research evidenced through publication through peer reviewed journals,

13. staff should be encouraged to identify opportunities in research in clinical practice,
14. all staff should be invited into membership of the thematic research groups and be facilitated to demonstrate their contribution to research and scholarly activity,
15. the partnership with Health Care providers be strengthened,
16. the promotion of European and international links should be actively encouraged and pursued by the School.

CONCLUSION

This report has followed the advised UCC template and has covered three areas:

Area one: the School's preparation for the review, the methods adopted by the PRG, and the findings from the site visit in Brookfield House.

Area two: the PRG's examination of the Self Assessment Document,

Area three: the rapid expansion of the School, the School's organisation and planning, the teaching and learning strategies, the research and scholarly activities, staff development, external relations, the support services provided and the recommendations of both the School and the PRG.

Many of the above recommendations of the PRG were already identified by the School itself in their Self Assessment Document. The School is entering a completely new phase of development with its installation into purpose built premises, its ability to deliver "state of the art" learning experiences that contrast so dramatically from the previous venues for learning, and its proximity to other Health Science disciplines that will foster opportunities for inter-disciplinary learning and research. It is therefore a School in transition but one that continues to foster and pursue excellence. The PRG wishes it well.

Timetable for conduct of Peer Review Visit

School of Nursing & Midwifery

Sunday 6th February 2005

- 17.30 Meeting of members of the Peer Review Group
Briefing by Director of Quality Promotion Unit, Dr. N. Ryan.
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.
- 19.30 Dinner for members of the Peer Review Group and Head of Department and
Departmental Co-ordinating Committee.

Monday 7th February 2005

- 08.00 Convening of Peer Review Group and Tour of facilities in Brookfield Health Science
Complex, escorted by Professor McCarthy, Head of School, with Ms. Nuala Walshe &
Ms. Rena Creedon (Project Managers)

Consideration of Self-Assessment Report

Venue: Board Room, Room 1.19, Brookfield Health Science Complex

- 09.00 Professor Geraldine McCarthy, Head of School
- 09.30 Meeting with members of the co-ordinating committee responsible for preparation of the
Self-Assessment Report
- Dr. Eileen Savage (Chair); Senior Lecturer & Branch Leader of General Programme
Professor Geraldine McCarthy, Head of School
Dr. Harry Gijbels, Senior Lecturer & Director of BSc (Nursing) Undergraduate
(Pre-registration) Programme
Ms. Regina Murphy, Department Manager
Ms. Connie Mulcahy, Programme Administrator of BSc (Nursing) Undergraduate (Pre-
registration) Programme
Mr. Sean McCloskey, Allocations Officer
Ms. Anna O Leary, Lecturer

- 10.30 Tea/Coffee
- 10.45 Representatives of co-ordinators of programmes
- Mr. Mark Tyrrell (Co-ordinator, BSc (Nursing) Programme for Registered Nurses)
Ms. Patricia O'Dwyer (Co-ordinator, HDip Public Health Nursing)
Ms. Mairin O'Mahony (Co-ordinator of HDip Peri-operative Nursing).
Mr. John Sweeney (Co-ordinator, MSc (Nursing) (taught Mode) 2000-2002)
- 11.15 Representatives of lecturers who transferred in from hospitals onto staff in School
- Ms. Siobhan Murphy (General Programme)

Ms. Teresa Wills (General Programme)
Ms. Bridie McCarthy (General Programme)
Ms. Angela Twomey (Intellectual Disabilities Nursing)
Mr. Rick Deady (Psychiatric Nursing)

11.45 Representatives of temporary (full-time/part-time) staff

Ms. Elaine Lehane (General Nursing)
Ms. Aine O'Donovan (Psychiatric Nursing)
Ms. Jill Murphy (Gerontological Nursing)

12.15 Representatives of administrative staff

Ms. Niamh Kiely (Executive Assistant)
Ms. Therese Ahern (Executive Assistant)
Ms. Bernadette O'Donovan (Executive Assistant)
Ms. Geraldine O'Sullivan Conway (Clinical Skills Laboratory Technician)

12.45 Working private lunch for members of Peer Review Group

14.00 Professor Áine Hyland, Vice-President, Acting Vice-President for Academic Affairs and Acting Vice-President for Research Policy & Support

14.45 Private time for consideration of issues by PRG

15.00 Representatives of 1st and 2nd year undergraduates

Mr. Mark McKeon, BSc 1
Mr. O. Wallace, BSc 2
Ms. Sylvia Murphy, Degree
Ms. Joycelyn Coughlan, BSc 1

15.30 Representatives of 3rd and 4th year undergraduates

Ms. Breifne Callanan, BSc 3
Ms. Alison Jeffers, BSc 3
Ms. Jennifer Nicholson, Access
Ms. Joanne Barry, Degree
Ms. Sylvia Murphy, Degree

16.00 Representatives of postgraduates

Ms. Aoife Buckley, HDip Perioperative
Ms. Sadie McCarthy, HDip Gerontology
Mr. Patrick Coakley, HDip Cardiac and Intensive Care / A&E
Ms. Margaret Keohane, HDip Psychiatric
Ms. Vicki Campbell, HDip Midwifery 1
Ms. Catherine McMahon, HDip Midwifery 2
Ms. Ann Marie Healy, HDip Public Health
Ms. Patricia English, MSc 1
Ms. Hannah Kelleher, MSc 2

17.00 Representative selections of recent graduates and employers

Venue: Board Room, Room 1.19, Brookfield Health Science Complex

Directors of Nursing:

Sr. Helena (Bon Secours Hospital)
Ms. Kay O Sullivan (Cork University Hospital)
Ms. Mary Dunnion (Mercy Hospital University)
Ms. Helen Donovan (South Infirmiry-Victoria Hospital)
Mr. Sean Abbott (COPE Foundation)
Mr. Michael Cortrell (Regional Psychiatric Services)

Recent Graduates:

Ms. Jean Dunlea (HDip Perioperative Nursing 2003-2004)
Mr. PJ Cooke (HDip Accident & Emergency 2002-2003)
Mr. Finbarr Kiely (HDip Psychiatric Nursing 2003-2004)
Ms. Lynn Marsh (BSc (Nursing) (2002-2004)
Ms. Helen Mulcahy (HDip Public Health Nursing 1995-1996; BSc (Nursing) 1996-1997;
MSc (Research) 1999-2002)
Ms. Mary White (HDip Gerontological Nursing 2002-2003)

19.00 Meeting of Peer Review Group to identify remaining aspects to be clarified and to finalise tasks for the following day followed by a working private dinner for members for the Peer Review Group.

Tuesday 8th February 2004

08.30 Convening of Peer Review Group in Board Room, Room 1.19, Brookfield Health Science Complex

09.00 Ms. Catherine Clehane-Power, Nursing & Paramedical Librarian

09.30 Professor Joyce Fitzpatrick, Visiting Professor

10.00 Mr. Michael Kelleher, Secretary & Bursar/Vice-President for Administration & Finance

10.30 Ms. Aine Foley, Finance Office

10.45 Preceptors

Ms. Anne Broderick (COPE Foundation)
Ms. Helen Costigan (South-Infirmiry Victoria Hospital)
Ms. Josephine Looby (Bon Secours Hospital)

11.30 Professor Michael Murphy, Dean of Faculty of Medicine & Health

12.00 Consideration of outstanding issues

12.30 Professor Geraldine McCarthy, Head of School

13.00 Working private lunch for members of the Peer Review Group

14.00 Preparation of first draft of final report

17.00 Exit presentation made to all staff of the School by the Peer Review Group summarising the principal findings of the Peer Review Group.

Venue: G04, Brookfield.

The presentation will be followed by a reception for staff and members of the PRG.

19.00 Working private dinner for members of the Peer Review Group to complete drafting of report and finalisation of arrangements for speedy completion and submission of final report.

Wednesday 9th February 2005

Externs depart