

SECTION 4:

Action Plan

In Section 4, applicants should evidence how they meet Criterion C:

- Action plan to address identified issues

Present the action plan in the form of a table (on the landscape page to follow).

The plan should cover current initiatives and aspirations for the next four years. Actions, and their measures of success, should be Specific, Measurable, Achievable, Relevant and Time-bound (SMART).

The plan should be published on the institution's website to enable staff, students and the wider community to understand the institution's equality objectives and how these will be achieved.

Confirm the following:

- The action plan will be published on the institution's website. ☒

UCC Athena Swan Action Plan 2024-2029

Key	Institution Priority	Description
GE		Gender Equality
GE1	Improve gender balance at senior leadership roles across the university.	This priority focuses on initiatives aimed at ensuring senior female staff apply for and are supported to apply for senior leadership roles in UCC. This includes formal routes (i.e. promotions scheme) and informal routes (networking, profile building through public profiling / engagement etc, coaching).
GE2	Enhance the human resources/people and culture function to create a positive work culture and environment.	This priority focuses on supports for appropriate training and development, performance assessment processes, advancing promotions and disciplinary processes. This includes continued support for flexible work.
GE3	Provide practical supports for parents and carers.	This priority builds on the establishment of the Carers Network and recent care related policies. Implementation and awareness raising of this Network and care related policies will be key. This includes ensuring managers understand policies and can effectively support team members who are carers.
GE4	Address bullying, harassment and discrimination as red flag / zero tolerance areas.	This priority focuses on advancing the culture raising awareness of right to dignity and respect in the workplace and advance mechanisms to address complaints related bullying, harassment and discrimination.
GE5	Support more men to engage with EDI initiatives.	This priority focuses on encouraging male colleagues to participate in EDI training, events and to advocate and role model EDI practices. Need to highlight the benefits of Athena Swan for male staff.
AEG		Additional Equality Grounds
AEG1	Support staff with disabilities and staff who are neurodivergence at every stage of the employment journey / pipeline.	This priority focuses on developing and resourcing a staff disability and neurodiversity action plan which will include formalising / simplifying processes for accommodations, practical supports / toolkits for managers and awareness of disability / neurodiversity among the wider staff body.
AEG2	Build on Athena Swan data collection processes and expand to wider EDI data categories.	Develop data analytics tools to reflect EDI data success targets and measures so that these can be owned / managed at local level, ensuring EDI is responsibility of all.
AEG3	Ensure EDI is embedded into teaching, research and learning.	This priority focuses on provision of EDI resources to all staff involved in teaching, research and learning with particular focus on EDI proofing curriculum development and assessment across all UG/PG/PGR/Micro-Credential offerings.
AEG4	Advance and support representation from ethnic minorities across all areas of university life.	This priority focuses on the implementation of the Race Equality Action Plan and aims to ensure the university staff is more representative of wider society.
AEG5	Proactively address inequality in contracts of employment.	This priority focuses on this on precarious contracts and related actions which will address hourly occasional and specific purpose staff not having the same opportunities.
AEG6	Appropriately resource EDI to achieve the ambitions presented in the EDI Framework and Athena Swan Action Plan.	This priority focuses on the need to appropriate / priority resourcing to be allocated to EDI initiatives across the university, reflective of its status in the UCC Strategic Plan.

Section 1. Section 2.a Governance and recognition of equality, diversity and inclusion work

Priority	#	Rating	Action	Rationale	Specific actions/ outputs	Responsibility	Timescale	Success Measure
GE1	1.2.1	High	Submit 4 Silver AS School / Departmental Awards. 100% School accreditation by 2030.	UCC holds 17 school / departmental awards but does not currently hold any Silver awards at the School / Departmental level. 2 Schools plan 2026 Silver applications. 4 Schools are considering bronze upgrades (2026-2029) To achieve 100% School accreditation by 2030, confirm submission dates for 7 remaining unaccredited Schools , 2026-2030.	Engage Advance HE to provide briefings for Silver-level applicants. Develop in-house AS handbook for applicants.	Director of EDI; ASPO; Vice Deans for EDI in SEFS, CoMH, CoBL.	Q1 2025 – Q4 2029	4 Silver School submissions by 2029 7 first-time bronze submissions by 2030 (targeting 100% School accreditation by 2030).
GE1	1.2.2	High	Pilot UCC's first joint application (College of SEFS).	Given the number of Bronze renewals, the increased number of first-time Bronze applicants, there is a need to streamline the Athena Swan pipeline. Advance HE has approved grouped applications in SEFS as a pilot.	Agree on thematic / grouped applications in SEFS for Life Sciences, Exact Sciences and Tyndall. Agree on the level of award to apply for with Advance HE. Develop a new data management process for grouped applications in SEFS. Develop a new action planning process for grouped applications in SEFS. Submit first grouped SEFS application for Life Sciences.	DPR; Director of EDI; ASPO; EDI Data Analyst; Head of College SEFS, Vice Dean for EDI SEFS.	Q1 2025- Q2 2027 (Group 1)	AS SEFS Life Sciences Bronze award achieved.
GE5	1.2.3	Med	Develop roadmap/ support for Professional Units AS applications and achieve 3 professional unit submissions by 2029.	No professional units are currently in the pipeline. Three (IT, Student Experience and Library) have expressed interest.	Agree on the process for data requirements and management for Professional Units. Support Professional Unit EDI Committee / SAT establishment and AS application development in three functional areas.	Chief People and Culture Officer (CPCO); HRIS; Director of EDI; DPR; Athena Swan Project Officer (ASPO); EDI Data Analyst; Heads of Functional Areas: Library, IT, Student Experience.	Q1 2025 – Q4 2029 Library Q4 2027 IT Q4 2028 Student Experience Q4 2029.	Three Professional Units Athena Swan Awards achieved.

Priority	#	Rating	Action	Rationale	Specific actions/ outputs	Responsibility	Timescale	Success Measure
GE1	1.2.4	High	Revise EDI and AS governance structures in line with the new GA Committee for People, Culture and EDIB, and EDIB Sub-Committee of ULT.	The new EDIB Sub-Committee of ULT was established in October 2024. AS is one of five key EDI working groups (along with Ending Sexual Harassment & Violence WG; Race Equality WG; Disability & Neurodiversity WG; LGBTQI+ WG).	Develop new terms of reference for AS Steering Group, with membership review and rotation. Develop AS Community of Practice Forum for School SAT Chairs.	Director of EDI; ASPO; DPR; ULT.	Q4 2024 – Q2 2025.	New terms of reference for AS Working Group approved/implemented. Maintain ASSG min. 40% gender balance (taking into account all gender identities); aim for 50% balance. Maintain representation of people in ethnic minorities (3 people); increase to 5. TOR stipulate min. representation for students, Staff networks, PMSS, Research staff. AS Community of Practice Forum established.
AEGB	1.2.5	High	Secure additional EDI resource in the EDI Unit to support the widening pool of AS applicants.	HEA reporting requirements have expanded significantly. The workload and remit of the EDI Unit will expand significantly under the new EDI Framework and Silver AS Action Plan and an additional resource will be required to achieve deliverables in same. The resource will need to support the growing data collection and reporting requirements.	Develop job specifications and secure approval for the new EDI post.	DPR; Director of EDI.	Q1 2026.	Additional EDI resource (1FTE) in post to support EDI / AS implementation.
AEGB	1.2.6	Med	Establish a dedicated EDI awards scheme for staff and students to include a dedicated theme for AS good practice.	President's Equality, Wellbeing and Welfare Award has proved successful in raising awareness of EDI. Staff consultation highlighted need to expand from one award to equality awards scheme to cover, AS, research and student EDI initiatives.	Develop a new EDI Awards scheme with four award categories – staff, student, partnership and research. Issue awards annually as part of EDI Week.	President; President of Students Union; Director of EDI.	Q4 annually from 2025.	Four awards for EDI issued annually to UCC staff and students.

Priority	#	Rating	Action	Rationale	Specific actions/ outputs	Responsibility	Timescale	Success Measure
GEI	1.2.7	High	Appoint Vice Deans for EDI across the four colleges in the next two years with responsibility for Athena Swan (AS).	HEA Recommendation (2022 Gender Expert Group Report). VD EDI will ensure college-level implementation of the EDI Framework, including national reporting requirements.	VDs for EDI (academic, research or professional staff) to chair the College EDI / AS Committee and represent the College on the ULT Sub-Committee for EDI. Support and monitor school/ department level AS action plan implementation.	Heads of College; Director of EDI.	Q4 2024 – Q4 2025.	Four College Level Vice-Deans for EDI appointed. Teaching buy-out of 10 credit course.
AEG6	1.2.8	High	Identify / Appoint AS / EDI project officer roles at the College level to support EDI Structures / Athena Swan applications and implementation of the action plans.	ASPO appointed in CACSSS in 2022. CUBS have also allocated dedicated resources. Increased support is needed for grouped applicants.	ToR developed and the appointment process completed for three college-level EDI / AS Officers.	DPR.	Q4 2025.	Three AS 0.5 resources appointed in SEFS, CoMH, and CoBL.
AEG6	1.2.9	Med	Extend UCC AS Starter Grant Scheme to include Professional Unit AS applicants coming on stream in 2026.	Starter grants of €3000 (to support admin / design costs) were offered to first-time Bronze applicants in 2022; this was extended to renewals in 2024 (€2,000). Professional Units should also be able to avail of this support.	Submit request to bursar to extend existing supports to three professional units.	DPR; Bursar.	Q4 2025.	AS Start Grant Scheme issued to all new Bronze applicants, renewals and three Professional Units.

Section 2b. Capturing data on equality grounds.

Priority	#	Rating	Action	Rationale	Specific actions / outputs	Responsibility	Time scale	Success Measure
AEG2	1.2.10a	High	Develop staff data systems (Core HR, ESS) to collect, monitor and report staff equality data such as gender (beyond F / M / Unknown), ethnic background, sexual orientation, disability status, etc. - i.e. across all 9 equality grounds.	The current demographic data collected centrally are limited and do not allow for equality monitoring. Intersectional data is not available to support AS work and strategic planning of EDI-related actions. Data does not allow the fulfilment of mandatory reporting requirements such as reporting under Part 5 of 'Disability Act' or Race Equality Act. EDI data is not collected at application and recruitment stage at present.	All stakeholders agree on the system's data requirements, data management and performance. Core Portal and ESS are developed to enable the Employee Self-Service Diversity Screen.	EDI Data Analyst; HRIS Manager; ITS / EAG.	Feb 25 -Sept 25.	Employee Self-Service Diversity Screen developed and launched in October 2025.
	1.2.10b	High	Ensure Data Protection Requirements and responsibilities are in place to protect the security of all sensitive EDI staff and student data.	Robust Data Protection safeguards are needed to ensure the full security and confidentiality of collected data and to mitigate potential risks of a data breach or security infringement.	All stakeholders agree on the system's data protection requirements. DPIA and DPN are developed.	EDI Data Analyst; Director of EDI; OCLA / DPO	Dec 24 - Feb 25	DPIA and DPN are approved by the DPO Office.
AEG2	1.2.11	High	Develop and roll out a self-declaration campaign for staff encouraging self-disclosure using the newly implemented Diversity Screen.	The self-disclosure element of the demographic data collection will require a tailored communication strategy and a sustained campaign to encourage staff to use the system.	A tailored communication strategy is developed and benchmarked against other HEIs. A campaign is developed and launched for staff and students. Self-disclosure rates are monitored regularly.	EDI Data Analyst; Director of EDI.	August 2025 - Ongoing.	Data Measures: UCC Staff use the Diversity Screen Full Completion Rate: 30% by October 2026 45% by October 2028.
	1.2.12	Med	Develop an EDI dashboard to improve transparency, trustworthiness and engagement with EDI data and topics, and raise awareness of the impact of EDI / AS work in UCC.	General literacy of equality data and EDI impact is low. There is a need to provide a one-stop resource for staff / students with main EDI-related KPIs and achievements.	All stakeholders agree on the resource's concept and data presentation, data management and performance. EDI Dashboard developed using Power BI solution.	EDI Data Analyst; ITS / EAG.	Q4 2025.	Data Measures: Dashboard developed and launched. Engagement Rate (site visits): Minimum 1000 visits in 365 days 40% of respondents aware in the 2026 / 2028 survey.

Priority	#	Rating	Action	Rationale	Specific actions / outputs	Responsibility	Time scale	Success Measure
AEG2	1.2.13	High	Extend the features and reporting capabilities of the AS Gender Analytics part of the Data Hub service as a central data platform for faculties/schools / departments.	Currently, the service offers gendered headcount data for staff and UG students for all AS applicants (school/unit level) - i.e. approx. 20% of data required for AS applications. There is a need to develop it further to allow for full self-service, more efficient support of AS work, and equality monitoring.	All stakeholders agree on the service's data requirements, data management and performance. Data Hub is further developed to enable more reports to be available first-hand to SATs.	EDI Data Analyst; HRIS Manager; ASA Student Data Analyst; ITS / EAG.	Q5 2025.	The resource offers at minimum 50% of staff and student data required for the AS applications. The resource offers data templates and guides to allow applicants to use the available data with no or minimum assistance. The majority of SAT users report using the service successfully.

1.3 Self-Assessment Process

Priority	#	Rating	Action	Rationale	Specific actions / outputs	Responsibility	Time scale	Success Measure
GE5	1.2.14	Med	Undertake a review of ASSG membership every two years to achieve engagement and address any staff turnover. Increase representation of male, research staff, students, and BAME staff members.	Rotation of membership and to ensure increased representation of male staff, research staff, students and staff from Black and Ethnic Minorities.	Issue an open call for membership with a positive action statement.	DPR, Director of EDI.	Jan 2025, Jan 2027, Jan 2029.	Data Measures: 10% Increase in male staff 5% Increase in research staff 5% Increase in Black and Ethnic Minorities staff.
AEG4								
AEG2	1.2.15	Med	Establish the EDI Gathering as an annual event each June to assess the impact of EDI / AS actions and identify any new/topical EDI areas that need to be addressed.	AS fatigue impacted focus group engagement in 2022 so a new approach of facilitated roundtable discussion was used in 2024. 64 (F=88%) participated in focus groups in 2022 while 37 (F=70%) participated in the Gathering event in 2024. Security, Operatives and Ground staff (a cohort with only 12%F representation) and other staff cohorts/underrepresented groups are not easily reached by traditional forms of consultation; their experiences and challenges can be heard in this forum.	Organise the EDI Gathering annually. Analyse data to identify key actions / assess the impact of new actions on the university community.	Director of EDI; ASPO; DPR; EDI Data Analyst.	6/25 and annually thereafter.	EDI Gathering (consultation event) held annually with 50 staff from across the university community identified through open call. Data analysed and the impact identified.
GE2	1.2.16	High	Review Values & Culture EDI Survey question set for researchers and run dedicated researcher EDI survey / round table discussions for researchers to identify key needs.	The researcher response rate was 20% in 2024 and 18% in 2022.	Hold dedicated focus groups with researchers. Revise the researcher questions set in the EDI survey and a communication strategy.	Director of EDI, EDI Data Analyst; VP of Research and Innovation.	Q2 2026 Q2 2028.	30% completion rate by research staff in the 2028 staff survey.

Priority	#	Rating	Action	Rationale	Specific actions / outputs	Responsibility	Time scale	Success Measure
AE2	1.2.17	Med	Increase transparency and staff engagement with EDI / AS delivery through the development/sharing of impact reports.	Qualitative data (EDI Gathering and 2024 EDI Staff Survey) indicated that EDI and AS were being perceived as a 'box-ticking' exercise. Respondents would like to see the real-world impact of EDI/AS work communicated regularly.	AS metrics/impact included in EDI Annual Report / monthly EDI newsletters. EDI / AS Impact Presentation at President's All Staff Town Hall annually. EDI / AS metrics are included on the EDI profession.	Director of EDI; ASPO; EDI Data Analyst	Annually.	AS metrics/impact included in EDI Annual Report, EDI Dashboard. EDI Impact Presentation at President's Town Hall. EDI / AS metrics live on the new EDI Dashboard (see Action 16). Data Measures: EDI Staff Survey Results and EDI Gathering Results: Staff reports feedback on the awareness and real-world change due to EDI/AS initiatives and work.

Section 2: An assessment of the institution's gender equality context and, where relevant, wider equality

2.1 Overview of the Institution and its Context

Priority	#	Rating	Action	Rationale	Specific actions / outputs	Responsibility	Time scale	Success Measure
AE06	2.1.1	High	Implement new EDI Framework & Action Plan 2024-2028 in alignment with UCC Strategic Plan 2023-28.	The new EDI Framework (2023-2028) is now launched and underway. Action 2.2.1 sets out the development / Implementation of the EDI Framework and Action Plan 2024-28. New governance structures for EDI were approved in August 2024.	Implement the EDI Framework 2024-2028. Develop/approve a four four-year costed EDI Action Plan.	President; DPR; Director of EDI; Bursar	Q1 2025 - Q 4 2028	EDI Framework and Action Plan 2024-28 developed and launched.

c. Comment and reflect on the institution's key leadership structures and committees

Priority	#	Rating	Action	Rationale	Specific actions / outputs	Responsibility	Time scale	Success Measure
GE1	2.1.2	Med	Increase gender balance on two GA Sub-Committees: 1M on the Academic Promotion Appeals Board and 2F on Student Experience and Success.	Two out of nine standing GA Sub-Committees have not achieved the minimum 40% representation of either gender.	Ensure positive action measure is included in the ToR of all GA Committees.	GA Secretary.	Q3 2027.	A minimum 40% gender balance achieved across all GA Committees.
GE5	2.1.3	Med	Increase %M on Graduate Studies and Teaching & Learning Sub-Committees of Academic Council to 40%.	Need to achieve a minimum 40% gender balance on all AC Committees.	Review membership of the diversity panel and invite new male AC members to join relevant sub-committees.	Academic Secretary.	Q3 2025.	Minimum 40% gender balance achieved across all AC Committees.
GE1	2.1.4	Med	Amend Terms of Reference of Academic Board (AB) to guarantee minimum 40% gender balance.	Neither UCC Principal Statute nor AB TOR specify minimum gender balance requirements for AB membership. AB an active, influential decision-making body, and the senior standing committee of AC.	Amendment on 40% gender balance drafted/proposed/adopted on ToR of AB.	Academic Secretary.	Q1 2025.	ToR of AB amended and minimum 40% gender balance requirement fulfilled.
GE1	2.1.5	Med	Where key leadership Committees (GA, ULT, AC) have achieved 40% gender representation either M / F gender, establish a new target to achieve 50% gender balance by 2029.	The majority of Committees have now achieved 40% female representation.	Revise the target for 50% of either gender in the membership criteria of ToR.	Chair of GA, President; Academic Secretary	Q4 2029.	50% gender balance achieved on key leadership committees (GA, ULT, AC).
GE1	2.1.6	High	Review HoS Appointment Policy in College of SEFS.	CoMH - 29% of men are HoS. Female candidates are not available or not applying for these roles. Need to assess the pipeline and identify how to make these roles more appealing to female candidates.	Review pipeline and implement positive action measures are advertisement and recruitment.	Head of College of SEFS.	Q4 2029.	40% F Heads of School across the four Colleges.

Priority	#	Rating	Action	Rationale	Specific actions / outputs	Responsibility	Time scale	Success Measure
AE03	2.1.7	Med	Identify and target underrepresented groups by updating data collection processes for leadership committees to assess demographic composition of current leadership committee membership. Provide training and ensure implementation equality inclusive committee guidelines for Leadership Committee Chairs following rotation/addition of new members in 2023.	While the composition of leadership committees by gender is known, we do not currently have data on other EDI grounds. Diversity on leadership committees has a key impact on the decision-making of leadership teams. Women and ethnic minorities frequently do not apply for leadership posts / chairs of Committees resulting in a lack of diversity in senior roles. Inclusive committee guidelines were rolled out in 2021. Membership of GA and ULT committees changed in 2023. Where diversity on leadership committees has yet to be achieved, the committee chair may use inclusive guidelines to help ground key decisions / actions.	Develop and implement systems to audit membership of leadership committees across equality grounds. Open call for membership with a positive action statement. Provide training and ensure implementation of equality inclusive committee guidelines for Leadership Committee Chairs following rotation / addition of new members in 2023. Development / implementation of inclusive guidelines for leadership committees.	Secretary to GA; Secretary to ULT; Academic Secretary; Director of EDI.	Ongoing - Q4 2028.	Monitoring underway and confirming increase in representation on leadership committees from ethnic minorities, people with disabilities, women, LGBT+ individuals. Inclusive guidelines for leadership Committees published and implemented by Committee Chairs.

2. Supporting and advancing academic and research staff careers

Researcher career pipeline.

Priority	#	Rating	Action	Rationale	Specific actions / outputs	Responsibility	Time scale	Success Measure
GE2	2.2.1	Med	Continue the cohort study of RSO to fully understand career pathways (BAP Action 4.1.2).	Initial study phase (March 2023) indicated 73% of RSO were female (up from 70% in 2018). Need to identify trends over time for RSO career path to see where interventions can be made.	Design a survey in consultation with the target group. Survey all RSO. Run a focus group. Prepare a report for ASSG.	VP Research and Innovation.	Jan 2026 Sept. 2026	Cohort study for RSOs completed, the report presented to ULT EDIB Subcommittee and recommendations implemented.

Hourly Occasional Staff

Priority	#	Rating	Action	Rationale	Specific actions / outputs	Responsibility	Time scale	Success Measure
MEG2	2.2.2	High	Central collection and monitoring of hourly occasional contract data. (This action continues BAP Action 4.1.3).	Hourly paid employment is not monitored on an institution-wide basis. For equality monitoring and gender pay gap reporting, the comprehensive, central registration of information on local hourly occasional employment is needed. Reports need to be developed for access and use by the EDI Data Analyst.	Terms of reference of the university-wide Hourly Occasional Pay Group (HOPG) are finalised. TOR to provide for monitoring of hourly paid contract data. Annual equality monitoring of hourly paid contracts in UCC (prepared jointly by HR, EDI Unit) reported to ULT EDIB Subcommittee.	CPCO; HRIS; ITS / EAG; Hourly Occasional Working Group.	2025-2027.	Data Measures: 90-100% of all hourly paid contracts are monitored centrally EDI Data Analyst uses the reporting for the EDI and Athena Swan purposes. Annual joint reporting on hourly paid contracts to ULT EDIB Subcommittee.
GE4	2.2.3	High	Finalise and adopt an Ethical Hiring Code (This action continues BAP Action 4.1.4).	Draft Principles on the Ethical Employment of hourly paid staff (UCC Equality Committee, 2023) have been prepared and presented to key stakeholders. HEA Key Recommendation , 7, (2nd HEA National Review of GE in Irish HEIs, 2022) recommends the adoption of an Ethical Hiring Code.	Terms of Reference of new Hourly Occasional Pay Group (2024) to be finalized. TOR to provide for consideration/adoption of the Ethical Hiring Code, in line with HEA Key Recommendation. 7, (2nd HEA National Review of GE in Irish HEIs, 2022). Ethical Hiring Code to be presented to ULT for adoption.	CPCO; Hourly Occasional Pay Group.	Q4 2024 - Q4 2025.	Ethical Hiring Code adopted. Implementation monitored, with annual reporting to ULT (as part of reporting outlined in Action 2.2.7 above).

Recruitment: Academic Staff

Priority	#	Rating	Action	Rationale	Specific actions / outputs	Responsibility	Time scale	Success Measure
GE2	2.2.4	Med	Undertake a review of the recruitment process and identify/implement measures to increase the number of (a) female applicants and (b) applicants from underrepresented cohorts for academic and research posts.	While the success rate of female applicants has increased, there are still noticeably more applications from men for academic posts at all grades in SEFS (average 28%F application rate, 2018-2023) and COBL (average 32%F application rate, 2018-2023). Among researchers, female application rates are lower at PDR (42%F), SPDR (32%F), RF (33%F) and SRF (29%F) grades (data between 2018-2023). As we build capacity to monitor recruitment across equality grounds (Action 1.2.10), we need to proactively ensure recruitment processes are inclusive and attract applications from diverse candidates.	Review and improve post descriptions and advertising strategies for academic posts (focussing on SEFS, COBL) and for all researcher grades Specific potential strategies include: (a) piloting a requirement for minimum gender balance on shortlists for recruitment in SEFS, COBL (with minimum balances to be determined depending on the discipline and competition); (b) commitment to explicitly encourage applications from underrepresented gender and people in underrepresented cohorts in recruitment advertising in disciplines that are the most gender imbalanced, or where cohorts are underrepresented; c) Develop a university-wide media package to integrate into HR recruitment webpages, highlighting underrepresented role models, family friendly policies, and commitments to EDI	Recruitment Manager, CPCO	Q4 2025.	Increase in average annual F academic application rate (2025-2029) to 35% (SEFS), 39% (COBL) Increase in average annual F researcher application rate (2025-2029) to 48% (PDR), 38% (SPDR, RF), 34% (SRF). Increase in applications from diverse candidates for recruitment to academic research posts.
GE2	2.2.5		Reduce the size of academic selection committees (continuing BAP Action 5.1.2).	BAP 5.1.2 identified recruitment committee overload as a burden for senior academic women. UCC statutory appointment regulations are under review (2024) with a priority aim of reducing selection committee size.	New regulations providing for reduced selection committee sizes launched. =	CPCO..	2025.	In future staff consultation, senior academic women report reduction in recruitment committee overload.

Priority	#	Rating	Action	Rationale	Specific actions / outputs	Responsibility	Time scale	Success Measure
GEI	2.2.6	High	• Submit applications for forthcoming HEA Senior Academic Leadership (SALI) calls. • Create UCC Core funded match SALI appointments with up to 5 internally recruited Prof posts in 5 areas (1 CACSSS, 2 SEFS, 1 COMH, 1 COBL) and ensure sufficient supports are in place to retain / develop new SALI appointments.	The HEA target of 40% Prof target is not achievable in 2029 based on current trajectory of promotions, retirement etc. It is recognised that a radical measure will be needed to achieve this target.	Submit applications to HEA for next SALI round. Organise focus groups with the existing SALI professors / female professors with a view to developing a wrap around support model, environmental / culture assessment and action. Support establishment of National SALI Network in partnership with IUA universities Build in ramp up period for new SALI Profs. Issue a rolling internal SALI promotions call for internal female applicants ahead of institution wide promotions call, until 40% target is achieved. Apply for forthcoming rounds of HEA SALI calls.	CPCO; Heads of College; DPR; Academic Promotions Manager.	Jan 2025 Jan 2027.	Appoint 1 SALI Prof through HEA Fund. Appoint five women to full Prof posts (1 CACSSS, 1 SEFS, 1 COMH, 1 COBL) through dedicated UCC match SALI scheme, Develop support system to ensure new women professors are successful in their new appointments and that culture is inclusive.

Recruitment: Researcher

Priority	#	Rating	Action	Rationale	Specific actions / outputs	Responsibility	Time scale	Success Measure
GE2	2.2.7	Med	Undertake review and update of all EDI and unconscious bias training currently provided to recruitment panels/PIs involved in researcher recruitment to ensure that it is fit for purpose and includes broader intersectionality issues such as disability, age, race, ethnicity etc. Ensure all staff have updated this mandatory training every 3 years, including recruitment by PI (with no panel).	All interviewers and panels currently take unconscious bias training and EDI training. This training was developed / rolled out 2020 and needed to be updated. Most researchers are interviewed by just the PI (no panel).	Develop new EDI-related training materials/assessment for all recruitment panels.	Director of EDI; Recruitment Manager; PCO.	Q3-Q4 2027.	New EDI recruitment training materials developed/delivered to all recruitment boards.

Academic promotion

Priority	#	Rating	Action	Rationale	Specific actions / outputs	Responsibility	Time scale	Success Measure
GE1	2.2.8	High	Undertake impact assessment of recent changes to SL and Prof 2 promotions and implement process improvement for upcoming rounds as required.	Low female application rates (36% of applicants) for Prof (2) in most recent call (2019/20). SL and Prof 2 regulations were updated in 2023. The impact assessment will evaluate whether any features of the application process deter women. The bureaucratic nature of the application process may disproportionately deter women applicants, e.g. women at SL (potential Prof (2) applicants) are overburdened with committee responsibilities and may carry higher caring responsibilities.	Undertake consultation with women at SL and Prof (2) to explore their perceptions and experience of (a) planning/preparing for promotion to Prof (2) and (b) the process of applying for promotion. Invite participation from eligible candidates for promotion to Prof (2), recent applicants and recent appointees. Consultation will help identify challenges/barriers perceived or encountered by this cohort in preparing and applying for Prof (2) promotion. Based on consultation feedback, identify and roll out supports for eligible candidates and applicants, and process improvements for future rounds.	CPCO: HR Employee and Organisational Development Services.	Q3 2025 Q3 2027.	Consultation completed with recent Prof (2) and SL applicants and feedback integrated to application form/criteria used in upcoming promotions rounds.
GE2	2.2.9	High	Launch a promotion pathway to full Prof (continuing BAP Action 5.1.3).	Regulations for a new promotion pathway to full Professor are drafted and tabled for ULT approval (Nov 2024). A budgetary projection for the scheme is set. Subject to final approval by AC and GA, a launch in early in 2025 is planned.	Launch new regulation Roll-out staff briefings/trainings in advance of first call, including dedicated briefing sessions for all eligible female applicants encouraging them to apply and offering relevant supports. Minimum targets for F application rates identified in advance of each call (based on %F eligible candidates at grade(s) below).	CPCO: HR Employee and Organisational Development Services.	Q2 2025.	Promotion regulation adopted. Call launched. Minimum targets for F application rates for each call to full Prof, identified and met.

Career development for academics and researchers

Priority	#	Rating	Action	Rationale	Specific actions / outputs	Responsibility	Time scale	Success Measure
GE1	2.2.10	Med	Establish UCC Women Leaders' initiative to provide peer support, mentoring and networking opportunities for Women Professors, research Fellows and Senior Leaders across the university. Aim: support women's progression to the most senior grades.	While three out of four (75%) Heads of Colleges are female, UCC leadership (President, Registrar, CFO) is predominantly male. Women are underrepresented at senior grades, and female application rates for recruitment and promotion to senior grades are lower. EDI Staff Survey Results: 2024: 33% of female academics and 49% of female PMSS with line management responsibilities disagreed they have 'opportunities internally to progress'.	Provision of dedicated seminars for senior female leaders: a) Managing diverse teams; b) Mediation & Conflict Resolution; c) Financial management for schools / departments; d) Senior Leader Media Training; e) Building and maintaining a growth mindset in challenging times.	Director of EDI, Staff Wellbeing & Development Manager.	Q4 2025.	UCC Women Leaders initiative was established to support female applicants for senior leadership roles in UCC.
GE1	2.2.11	High	Make EDI training compulsory for all staff on an annual basis with renewal every 3 years (in line with health and safety training).	On average, 5% of female and 4% of male academic staff completed EDI training (as available via the ESS platform) between 2018 and 2023. An average of 3% of female and 1% of male research staff completed the same training within the 2018-2023 timeframe.	Provision of mandatory EDI training for all staff on the compliance training website for staff. Development of EDI Micro-credential (5 credits).	VP Research & Innovation; HR Research Manager. Micro-credential Unit, Director of EDI.	Q1 2027 onwards. Q1 2025 - Q1 2026.	A minimum of 20% of academic and research staff will complete designated mandatory EDI training by 2029. EDI Micro-credential developed and launched.
GE1	2.2.12	Low	Develop a pilot mentoring scheme to support female academics with research grant applications.	Data Measures: EDI Staff Survey Results: 2024: 50%F academic staff agreed that they are 'Satisfied with the support I receive from my institution to apply for research funding'.	Pilot mentoring scheme for female academic research grant applicants developed / launched.	VP Research & Innovation; HR Research Manager.	Q2-Q3 2027.	Min. 10 women/staff from underrepresented cohorts mentored annually. Data Measures: EDI Staff Survey Results: 2028: 60%F academic staff agree that they are 'Satisfied with the support I receive from my institution to apply for research funding'.

Priority	#	Rating	Action	Rationale	Specific actions / outputs	Responsibility	Time scale	Success Measure
GE1	2.2.13	Med	Provide two annual workshops to support senior female researchers and researchers from underrepresented cohorts applying for funding.	Data Measures: EDI Staff Survey Results: 2024: 42%F research staff agreed that they are 'Satisfied with the support I receive from my institution to apply for research funding.' Only 44% of research staff with a disability were satisfied with support to apply for research funding.	Provide workshops for female researchers and researchers from underrepresented cohorts on impact statements and data management statements for grant applications.	HR Research Funding Manager.	Q1 & Q3 2026 Q1 & Q3 2028.	Four workshops on applying for funding completed by 10 female researchers or researchers from underrepresented cohorts. 3 grant applications submitted by female researchers or researchers from underrepresented cohorts. Data Measures: EDI Staff Survey Results: 2028: 55%F research staff agreed that they are 'Satisfied with the support I receive from my institution to apply for research funding.'
GE1	2.2.14	Low	Monitor grant applications and awards by gender.	Gender breakdown and analysis of grant applications and awards by gender not regularly captured/reported on.	Establish monitoring and reporting mechanism for grant application and awards by gender.	VP research & Innovation.	Q1 2025 onwards.	Grant applications and awards by gender published annually in R&I Annual Report.

Work-Life Balance and Workload – academic and research staff

Priority	#	Rating	Action	Rationale	Specific actions / outputs	Responsibility	Time scale	Success Measure
GE2	2.2.15	High	New PDRS process to include discussion of work-life balance, workload, EDI contribution (research, teaching, training, events, initiatives) (Continuing BAP Action 5.6.8).	EDI Staff Survey Results: 2024: N=154 or 29% of academic respondents report that they completed PDRS in the 'last 12 months'. 43%F and 41%M discussed work-life balance issues. 59%F and 49%M 'Benefitted from participation in the PDRS'.	Undertake needs assessment with staff and managers. Develop and launch a new PDRS scheme for staff. Develop new training materials and forms which include a dedicated EDI metric and descriptor. Provided training for managers before rolling out. Develop a communications plan to raise awareness of new PDRS process using plain English / accessible content to engage staff.	CPCO.	Q1 2025 – Q1 2026.	New PDRS scheme and process for staff developed/launched. Data Measures: EDI Staff Survey Results: 2026: 35% and 2028: 50% of academic respondents participated. 2028: 60% report discussing work-life balance issues. 65% report they benefitted from the process. completion rates.
GE2	2.2.16	Med	Increase researcher/ PI engagement in researcher Personal Development Planning ("PDP") via university-wide PI Forum .	EDI Staff Survey Results: 2024: researcher respondents note low participation in researcher Personal Development Planning with PIs. Only 32%F and 42%M respondents had PDPs in place.	1 PI Forum annually to include an in-depth presentation/workshop on researcher training and PDP planning.	HR Research Team, OVPRI.	Annually, from 2025.	Data Measures: EDI Staff Survey Results: 2028: targeted 10% increase in research staff reporting having PDPs in place and affirming their benefits.

Supporting and advancing staff careers (all roles) across equality grounds

Priority	#	Rating	Action	Rationale	Specific actions / outputs	Responsibility	Time scale	Success Measure
AE01	2.2.17	High	Appoint Staff Disability Officer.	EDI Staff Survey Results: 2024: 18% of respondents (19%F / 15%M) identified as having a disability and/or ongoing medical illness (15% to 'Some extent' and 3% to 'Great extent').	Develop Terms of Reference for Staff Disability Officer (Grade 6) Identify a core funding stream to support this permanent post. Organise the recruitment process and appoint a Staff Disability Officer. Provide training / onboarding.	Director of EDI; DPR.	Q4 2025.	Staff Disability Officer appointed. Increased provision of support for staff with disabilities.
AE01	2.2.18	Med	Undertake digital accessibility audit (employee experience) to provide improved support/facilities for staff with disabilities.	Feedback from consultation at the launch of the Staff Disability and Neurodiversity Network, and from the 2024 EDI staff survey highlighted the need for greater accessibility to digital infrastructure.	Undertake scoping exercise of accessibility of UCC website, CORE ESS, online forms for registration in Events, IT support services etc.	Director of IT, CPCO, Director of EDI, Communications; Website Manager; Inclusive UCC.	Q1 2026 – Q4 2026.	Digital accessibility audit (employee experience) completed and improved accessibility of online materials .
AE01	2.2.19	High	Develop Disability and Neurodiversity Action Plan in partnership with Disability and Neurodiversity Staff Network.	18% of staff in 2024 indicated they have a disability / ongoing illness and/or are neurodiverse and would benefit from peer engagement and additional support in the workplace. Specific challenges identified in AS Silver self-assessment to be addressed in the Action Plan for Staff with Disabilities and Neurodiverse Staff include: (a) EDI Staff Survey PMSS respondents with a disability reported lower levels of satisfaction with access to mentoring (45% vs. 57% of all respondents), line manager support (45% vs. 63% of all respondents), and opportunities for career development (38% vs. 45% of all respondents), and with all aspects of the promotions process (10% less of satisfaction on average). (b) Staff with disabilities report poorer experience of support applying for family leave (15% less satisfaction vs. all respondents).	Undertake consultation with key staff . Develop and Implement Disability and Neurodiversity Staff Network.	Director of EDI, Staff with Disabilities and Neurodiverse Staff Network.	Q3 2025 – Q3 2026.	Action Plan for Staff with Disabilities and Neurodiverse Staff developed and implemented. Data Measures: EDI Staff Survey Results: 2028: there are no significant differences (by equality ground(s)) in staff experience/ satisfaction levels across a number of indicators (see 'rationale' column.

Priority	#	Rating	Action	Rationale	Specific actions / outputs	Responsibility	Time scale	Success Measure
GE3	2.2.20	Med	Develop and implement Framework for Carers.	EDI Staff Survey Results: 2024: 22%F/ 13%M of respondents have carers' duties (i.e. eldercare, caring for a disabled or sick person).	Undertake needs assessment with Carers' Network to identify policy/supports needed Review good practices in other HEIs and internationally to establish Framework for Carers.	Director of EDI, Staff Wellbeing & Development Manager, Carers' Network.	Q3 2025.	3 key areas of support for staff who are carers identified and addressed.
GE5	2.2.21	Med	Achieve Age-Friendly University accreditation through the development / implementation of the Age-Friendly Action Plan.	EDI Staff Survey Results: 2024: 15% of respondents reported age-related discrimination. It was the second-highest area of discrimination in the 2024 staff survey. Age Friendly application and Action Plan drafted in 2020-21 but were paused due to the COVID-19 pandemic.	Re-establish Age Friendly Working Group Review draft application and update actions based on mini-consultation (roundtables with older staff/retiree groups) Draft a revised Action Plan and submit.	Age Friendly Working Group; Director of EDI; CPCO	Q3-Q4 2026.	Age Friendly University accreditation achieved 5% decrease in reports of age-based discrimination.
AEG4	2.2.22	Med	Develop and Implement Race Equality Action Plan (continuation of BAP4.1.1).	Key actions related to representation and support for racial/ethnic minority staff are already prescribed in the HEA Race Equality Action Plan. While this is informally implemented by the Race Equality Network, with support from the EDI Unit, this work needs to be embedded into EDI central reporting structures.	Develop terms of reference for the Race Equality Working Group. Issue call for membership for Race Equality Working Group in partnership with REN. Develop a dedicated RE action Plan to implement actions set out in HEA audit Plan (2023).	Race Equality Network; Director of EDI.	Q1 2025 – Q3 2025.	HEA RE Implementation plan annual priorities (2025-2029) identified (2025). HEA RE Implementation plan progress reported to ULT annually (from 2025) and presented to all staff (from 2026).

Section 3 – Supporting and advancing professional, managerial, and support staff careers

Priority	#	Rating	Action	Rationale	Specific actions / outputs	Responsibility	Time scale	Success Measure
GE 1/ GE 5	2.3.1	Med	Encourage underrepresented applicants to apply for PMSS roles, particularly men at Admin Grades 3-5 and women at Admin Grades 9+ and at senior technical grades (STO, CTO).	On average, only 30% of applicants at Admin Grades 3-5 are men.	Review recruitment strategy to expand the use of diverse platforms and networks to reach a wider pool of applicants from the underrepresented gender and other underrepresented cohorts.	CPCO, EDI Unit	2026-2029	Increase in male applications to Admin Grades 3 to 5 to average 35%.
				On average, only 32% of applicants at Admin Grade 9+ are women.	Review recruitment advertisements to gender-proof language, and explicitly encourage applications from underrepresented cohorts.			Increase in female applications to Admin Grade 9+ to average 40%.
GE2	2.3.2	Med	Gender-proof PMSS shortlisting, interview processes, to address gender gaps in application/shortlisting success rates at Admin Grades 4-7 and in shortlisting/appointment success rates at Admin Grades 3-5, and at Technical Officer Grade.	Fewer than 40% of applicants to senior technical grades are women (STO: 39%F applicants, CTO: 37%F applicants).	Revise recruitment material to ensure it reflects the diversity of UCC's PMS Staff and highlight support for working parents/carers. Profile men and women in roles in which they are currently underrepresented.	CPCO	2026-2029	Increase in female applications to STO, CTO grades to 45%.
				As we build capacity to monitor recruitment across equality grounds (Action 1.2.10), we need to proactively ensure recruitment processes are inclusive and attract applications from diverse candidates.	Undertake round table with PMSS Grade 8+ and PMSS Grades 4, 5 to identify areas of intervention/support to increase female applicants for higher-grade PMSS roles, male applicants for lower-grade PMSS roles, and to attract diverse candidates from underrepresented cohorts.			Reduction in gender gap in shortlisting, appointment success rates at Admin grades 3-7 to 2%-5% maximum.

Priority	#	Rating	Action	Rationale	Specific actions / outputs	Responsibility	Time scale	Success Measure
GE2	2.3.3	Med	Pilot bespoke induction for new PMSS staff at Grades 3,4.	EDI Staff Survey Results: 2024: Low satisfaction among PMSS staff with formal induction/ orientation arrangements offered to new PMSS recruits (53%F and 48%M were satisfied). Given the scale of PMSS recruitment (with over 700 staff hired during the period) this is a concern. A bespoke researcher induction is offered by HR Research. A similar offering to new PMSS staff may better reflect the many unique features of PMSS employment and be more useful to PMSS staff.	Pilot mini-induction for PMSS staff at Grades 3, 4 developed and trialled, Following assessment, pilot to be expanded or refined.	CPCO, HR Recruitment.	2027-2028.	Assessment of the pilot confirms its success. Data Measures: EDI Staff Survey Results: 2028: targeted 10% increase in satisfaction rates among PMSS staff with formal induction/ orientation arrangements offered to new PMSS recruits.

PMSS Promotions

Priority	#	Rating	Action	Rationale	Specific actions / outputs	Responsibility	Time scale	Success Measure
GE2	2.3.4	Med	Equality-monitor outcomes of 2024 Interim Revised Scheme and forthcoming new Admin Promotions Scheme, with outcomes and recommendations reported to ULT EDI Subcommittee.	Equality monitoring of outcomes has not been a formal part of PMSS promotion schemes. A gender gap in overall success rates for 2022/3 call (16%F v. 21%M) is not dispositive but indicates a need for gender/ equality monitoring and reporting to be integrated in promotions schemes. The interim revised admin promotions scheme and a planned new scheme incorporate significant improvements, e.g. larger, gender balanced boards with mandatory EDI training.	Outcomes of 2024 Interim revised scheme to be reported by CPCO to ULT EDI Subcommittee, within 3 months of conclusion of call. ULT EDI Committee to make recommendations to ULT to address issues identified. Integrate equality monitoring into planned new Admin promotions scheme, across equality grounds, including reporting to ULT EDI Subcommittee.	CPCO, EDI Director.	2025 - 2027.	New forthcoming revised PMSS Admin scheme terms incorporate: (a) monitoring across equality grounds, (b) reporting of outcomes to ULT EDI Subcommittee for assessment of equality issues arising and reporting recommendations for action to ULT.

PMSS Staff - Supports for Career Development and Progression

Priority	#	Rating	Action	Rationale	Specific actions / outputs	Responsibility	Time scale	Success Measure
GE2	2.3.5	Med	Progress adoption of Technicians Commitment. Facilitate technical staff participation in new all-Ireland Technical Staff network.	EDI Staff Survey Results: 2024: Only 47% (35%F/58%M) of technical staff survey respondents reported having access to mentoring to support their career aspirations. UCC Technical Staff reps have proposed that UCC sign the Technicians' Commitment, ensuring visibility, recognition, and career development for technicians in HE.	Technicians' Commitment: Plan for stakeholder consultation implemented, followed by a proposal to ULT for UCC to sign Technician's Commitment; Technical Staff Network: School/College support for technical staff to participate in the all-Ireland Technical Staff Network (workload allocation recognition; support to participate in meetings/projects).	SEFS, COMH EDI Committees, Heads of College and HR Business Managers. SEFS/COMH Heads of School.	2027-2028.	Proposal to sign Technician's Commitment presented to ULT. Data Measures: EDI Staff Survey Results: 2028: targeted 10% increase in satisfaction rates with technical staff experience of support for career progression.

PMSS Workload Allocation

Priority	#	Rating	Action	Rationale	Specific actions / outputs	Responsibility	Time scale	Success Measure
GE2	2.3.6	Med	Incorporate workload management training into PDRS training for Heads/line managers, and into institutional leadership/management training programmes for line managers/Heads.	EDI Staff Survey Results: 2024: PMSS survey responses point to deficiencies in workload allocation and management. A significant minority feel their workload is unreasonable. Only 51%F and 47%M respondents agreed work in their unit is allocated transparently/fairly, or actively managed (50%F/47%M). Only 57%F/51%M PMSS respondents believe their workload is reasonable.	The new PDRS system will incorporate a discussion of workload (Action 2.2.15). New PDRS training for Managers to include specific, in-depth training on workload management. UCC's suite of leadership training programmes (s. 2.2.e) includes discrete programmes/modules/workshops to train/support managers to manage staff workload.	CPCO.	2027-8.	Line managers accessing training on managing staff workload via PDRS line manager training and via UCC leadership development programmes (measured by monitoring uptake). Following the availability of manager training, improved PMSS staff experience of workload management. EDI Staff Survey Results: 2028: targeted 10% increase in PMSS satisfaction rates with workload allocation and management.

4. Evaluating culture, inclusion and belonging

Priority	#	Rating	Action	Rationale	Specific actions / outputs	Responsibility	Time scale	Success Measure
GE4	2.4.1	High	Establish a Dignity & Respect Support Hub to support anonymous reporting, disclosures and formal complaints from staff and students.	EDI Staff Survey Results: 2024: 20%F(n=156) /14%M (n=59); With Disability=32% (n=48); Ethnic Background of 'Preferred' Not to Say'=48% (n=9) Agreed to 'I experienced Bullying and/or Harassment in my workplace in the past 12 months'. 2024: 27%F (n=215) /21%M (n=95) Agreed to 'I witnessed Bullying and/or Harassment in my workplace in the past 12 months'. 43%F/47%M Agreed to 'I am confident that the complaints would be appropriately managed'. 2024: 20%F (n=159) /14%M (n=64); With Disability=26% (n=59); LGBTQ+=19% (n=20) Agreed to 'I experienced Discrimination and/or Unfair Treatment in my workplace in the past 12 months'. Gender, age and family status were the most frequently reported grounds for perceived discrimination / unfair treatment. 41%F/44%M Agreed to 'I am confident that the complaints would be appropriately managed'.	Undertake internal review of all units/staff involved in managing anonymous reporting, disclosures and formal complaints mechanisms within the university undertaken. Complete benchmarking and review of good practice in other HEIs (e.g. Dignity and Respect Support Service in UCD). Develop proposal/terms of reference & value add/costing for establishment of D&R Hub in UCC. Identify key postholders (existing or new) and establish new support unit.	President; CPCO; Director of OCLA, Director of Student Experience, Director of EDI.	Q3 2025 – Q4 2028.	Dedicated Dignity and Respect Hub established that has the authority and autonomy to deliver its mandate and the trust and confidence of the university community. Data Measures: EDI Staff Survey Results: 2028: 60% Agree "I am confident that complaints about bullying and/or harassment would be appropriately managed". 2 Dignity and Respect Hub staff appointed and budget line identified. Streamlining of existing reporting mechanisms within the university related to bullying, unfair treatment, harassment, discrimination, sexual harassment and violence.

Priority	#	Rating	Action	Rationale	Specific actions / outputs	Responsibility	Time scale	Success Measure
AE2	2.4.2	High	Establish clear data collection and monitoring processes for formal and informal complaints, anonymous reports and disclosures.	There were formal reports under the DRRD policy by staff between 2019 and 2024. (Staff, Students, Other) reports were made under the Speak Out tool between October 2021 and November 2024.	Develop clear metrics to establish baseline data and monitor the impact of interventions related to Dignity and Respect. Continue to promote and submit annual data returns to the national Speak Out Anonymous Reporting Tool. Review question set related to complaints, anonymous reports and disclosures in the EDI staff survey and developed dedicated Dignity and Respect Pulse Survey. Disaggregate data under equality grounds to determine patterns and areas where specific interventions are required.	CPCO, Director of OCLA, Director of Student Experience. Director of EDI, EDI Data Analyst, HRIS Data Analyst.	Q2 2026 – Q4 2029.	Ability to measure % increase in reporting once baseline established. Ability to measure % increase in provision of supports once baseline established.
GE4	2.4.3	High	Develop Policy Framework for Dignity and Respect to provide overview and show how existing policies related to complaints, disclosures and reporting overlap and intersect.	The Right to Dignity at Work Policy was reviewed in 2020. The Student Rules were reviewed in 2021 A new Sexual Misconduct Policy was approved in March 2024. EDI Staff Survey Results: 2024: 45%F/53%M Agreed to 'If I felt unfairly treated, I would feel comfortable reporting it.' 2024: 56%F/56%M Agreed to 'I know how to report Bullying and/or Harassment'. 2024: 59%F/69%M Agreed to 'I would feel comfortable reporting Sexual Violence and/or Sexual Harassment'.	Undertake a review of existing policies and procedures related to managing/ responding to disclosures, reporting and complaints and establish clear policies and guidelines to improve the experience of staff and students involved in these processes. Identify where amendments are needed to existing policies and update or develop new policies and procedures related to disclosures, reporting and complaints as necessary. Ensure all policies and procedures are trauma-informed.	CPCO, Director of OCLA, Director of Student Experience. Director of EDI, Head of Student Counselling.	Q2 2026 – Q4 2029.	Dignity and Respect Policy Framework developed and implemented. Review of existing policies and procedures related to disclosures, reporting and complaints completed and policy gaps/amendments identified. New policies and procedures related to disclosures, reporting and complaints developed, consulted upon and launched. Sexual Misconduct Policy & Procedure fully implemented. Data Measures: EDI Staff Survey Results: 2028: 65% know how to report and are comfortable reporting incidents related to dignity and respect (i.e. discrimination / unfair treatment, bullying/harassment, sexual violence / sexual harassment).

Priority	#	Rating	Action	Rationale	Specific actions / outputs	Responsibility	Time scale	Success Measure
GE4	2.4.4	High	Provide Dignity and Respect training and education to all staff. Provide training to managers on how to manage and support complaints, and disclosures related to bullying, harassment, discrimination, sexual harassment, and unfair treatment. Increase % of staff taking Bystander Intervention training. Develop and provide consent training to all staff.	Incivility is frequently cited in the qualitative feedback in the staff survey 2024. In the 2024 survey responses to questions related to values declined - there was a decrease from 59% to 57% for respect and 54% to 50% related to compassion. Managers report in the qualitative data that they would value more training/supports in this area. 241 UCC staff have engaged in the Bystander Intervention Survey (2024 Staff Survey) 84 staff have completed the full Digital Badge in BI (BI programme - Sept 2024). 103 staff have completed consent training (2024 staff survey).	Launch WorkWiz Dignity and Respect Training & Resource Hub for provision of key trainings/supports for staff in these areas. Develop and roll out mandatory online Dignity and Respect training for all staff to complete annually as part suite of training (Data Protection, Cyber Security, Health and Safety etc) Develop dedicated disclosure training for managers / those receiving disclosures Roll out an online disclosure training programme to all staff on Dignity and Respect. Develop dedicated online and classroom-based Consent Training for staff.	CPCO; Director of EDI; Director of OCLA; Supporting and Ending Sexual Violence & Harassment Manager; Bystander Intervention Programme Manager; Director of OCLA; Director of EDI.	Q1 2025 – Q2 2026 Q2 2026 – Q4 2029.	Dignity and Respect training and resource hub developed and launched. Dignity & Respect training developed and launched. Data Measures: 50% of staff have completed WorkWiz Dignity and Respect training annually. New consent training for staff and students launched and 50% uptake by 2029. Classroom-based disclosure training developed and completed by 50% of line managers. 40% completion rate of online disclosure training. 20% increase in staff completed Bystander Intervention Digital Badge/classroom-based training. EDI Staff Survey Results: 2028: Values related to respect and compassion have a 10% increase.
	2.4.5	High	Develop a communications plan to increase awareness of report and support mechanisms for bullying, harassment, discrimination, sexual harassment, unfair treatment in UCC.	EDI Staff Survey Results: 2024: 45%F/53%M Agreed to 'I felt unfairly treated, I would feel comfortable reporting it.' 2024: 56%F/56%M Agreed to 'I know how to report Bullying and/or Harassment'. 51% reported they know how to report unfair treatment and discrimination; 55% they know how to report sexual harassment and violence.	Develop It's Time video and social media awareness-raising campaign as part of the annual anti-bullying, harassment, discrimination, sexual harassment, and unfair treatment initiative. Make single slides/flowcharts on how to report bullying, harassment, discrimination, sexual harassment, and unfair treatment formally / informally Introduce a survey question on awareness of Speak Out and other reporting mechanisms in the staff survey 2026.	Director of Communications; CPCO; Vice Deans/ Heads for EDI.	Q2 2025 – Q2 2029.	Data Measures: EDI Staff Survey Results: 2028: 65% of staff report that they know how to report bullying/harassment, unfair treatment and discrimination; and sexual harassment and violence. 5 annual anti-bullying, harassment, discrimination, sexual harassment, and unfair treatment awareness-raising campaigns aimed completed.

Priority	#	Rating	Action	Rationale	Specific actions / outputs	Responsibility	Time scale	Success Measure
GE4	2.4.6	Med	Raise awareness of the new Domestic Violence Policy (DVP) with managers and staff.	The Domestic Violence Policy was developed and launched in 2024. To date, no staff member has availed of the policy.	Develop an information campaign for staff to highlight new policies. Develop an FAQ guide for managers using the policy so that the confidentiality of staff members are protected. Ensure ESS is set up so that applications for DV leave are logged as annual leave without impacting annual leave availability. Engage with Women's Aid and Men's Aid to host information session on good practice for supporting survivors.	Staff Wellbeing & Development Manager; Director of Communications.	Q1 annually Q1 2025 Q1 2025 Q2 2025.	Guide and FAQ for Managers on DVP published Guidelines included on ESS on how DV leave is recorded confidentiality is noted when booking leave. Two information sessions for survivors and how to support DV survivors provided.

Transgender and Non-Binary Staff

Priority	#	Rating	Action	Rationale	Specific actions/outputs	Responsibility	Timescale	Success Measure
GE2	2.4.7	Med	Complete Standard Operating Procedure for changing staff records under the Gender Identity and Expression Policy (BAP 6.1). Undertake GIEP-proofing of wider policy portfolios, ensuring gender-appropriate language in collaboration with key stakeholders such as the Academic Secretariat, HR, and the Office for Corporate and Legal Affairs.	SOP for changing staff records commenced but delayed due to the departure of key staff in TENI. A review of GIEP points to the need for a review of a wider policy portfolio to ensure the inclusion of transgender and non-binary options on forms and policies.	Complete SOP for changing staff records. Audit existing policies and forms and include options for transgender/non-binary staff.	EDI Unit, LGBT+ Network, EDI Policy Review Group.	Q3-Q4 2026.	SOP for changing staff records completed. More inclusive application of policies and processes for transgender and non-binary staff.
GE2	2.4.8	Med	Develop a new handbook for managers and teams where colleague is transitioning / using the GIEP, in consultation with staff who have already transitioned.	GIEP was developed in 2018 and a review by staff, students and TENI is underway in Q4 2024 (BAP 6.1). Lessons learned from managers to be integrated into the handbook.	Consultation with managers of staff and staff who have transitioned / are non-binary. Development/launch of new handbook.	EDI Unit, LGBT+ Network.	Q3-Q4 2026.	Handbook published to support transgender and non-binary staff, their colleagues and managers.

Flexible Working

Priority	#	Rating	Action	Rationale	Specific actions / outputs	Responsibility	Time scale	Success Measure
GE2	2.4.9	High	Develop and launch a new Work-Life Balance Policy for staff.	UCC blended work pilot commenced in March 2022. Working Group to establish Work-Life Balance Policy established in May 2024. (Blended Working Policy Framework for the Civil Service issued in March 2022; Work-Life Balance and Miscellaneous Provisions Act issued April 2023; Code of Practice for Employers and Employees on the Right to Request Flexible Working and Right to Request Remote Working issued March 2024). EDI Staff Survey Results: 2024: 59%F/63%M report satisfaction with work-life balance. 78%F/75%M of respondents report that 'Flexible work arrangements are available to suit their needs.'	Undertake consultation with a diverse group of key stakeholders to ensure the new policy reflects diverse lived experiences. EDI proof new Work-Life Balance Policy. Conduct a pulse survey with all staff one year after launch to assess the impact of the new Work-Life Balance Policy. Incorporate new questions on the Work-Life Balance Policy in the 2026 Values & Culture / EDI Survey. Conduct an Equality Impact Audit of Work-Life Balance Policy 12 months post-launch). Review and update any other flexible / blended work policies related to the new Work-Life Balance Policy.	CPCO; Director of EDI; Director of OCLA, People and Culture.	In process – Q2 2025.	Work-Life Balance Policy and Updated Flexible Working Policy Launched. Plain English / Accessible user guide to policy developed / launched as part of Work-Life Balance communications to ensure staff understand how different policies – e.g. how flexible working and work-life balance policy work together. Optimised quality of life outside normal working hours due to reduced daily commute, the challenge of finding parking and the ability to attend to personal or domestic circumstances. Data Measures: EDI Staff Survey Results: 2028: >80% of staff report satisfaction with flexible working. >70% of staff report satisfaction with the work-life balance. >70% of respondents with disabilities / those who are neurodiverse, parents and carers report satisfaction with flexible working and work-life balance. Positive response to the pulse survey.
GE2	2.4.10	High	Review current flexible working policies to align with the new Work Life Balance Policy .	New work-life balance Policy overlaps with other flexible working options. Need to review the latter and amend it as needed. EDI Staff Survey Results: 2024: 12%F (n=33) /7%M (n=17) of Academic staff Agreed to 'I believe that working flexibly would negatively impact on my career' progression.	Audit existing flexible working policies and identify any needed amendments and submit to GA for approval. Develop a communications campaign / plain English guide to support policy users.	CPCO, EDI Policy Review Group.	Q1-Q2 2025.	Flexible work policies are updated to reflect new work life balance policy. Amendments are clearly communicated to staff. Data Measures: EDI Staff Survey Results: 2028: <10% of academic female staff Agreed to 'I believe that working flexibly would negatively impact on my career' progression.

Built Environment, Events, Meetings

Priority	#	Rating	Action	Rationale	Specific actions / outputs	Responsibility	Time scale	Success Measure
AEGB	2.4.13	Med	Undertake full equality space audit of main UCC buildings and develop a protocol for audit process in other buildings.	The budget was not available to complete this action from the 2019 action plan (BAP Action 5.5.9). A building checklist was developed but a more comprehensive audit is still required.	Complete equality space of main UCC buildings.	Director of Buildings & Estates; Director of EDI; Staff networks.	Q1 2026 – Q3 2026.	Equality space audit completed and key recommendations implemented.
AEGB	2.4.14	Med	Develop a suite of way-faring videos to show students, staff and visitors how to find central locations on campus.	To supplement existing maps, develop way-faring videos for staff and students to find their way to key UCC buildings/rooms.	Identify a list of spaces Develop video format and record wayfaring videos Launch on social media and on the UCC website.	Director of Buildings and Estates; Director of EDI.	Q1 2026.	12 wayfaring videos developed and published on the UCC webpage.
GE1, GE4	2.4.15	Med	Develop a dedicated LGBT+ Action Plan in line with EDI Framework commitment.	UCC has the longest-standing LGBT+ Staff Network in an Irish university. Need to formalise support in line with other HEA reporting requirements highlighted in staff consultation.	Undertake consultation with LGBT+ staff Engage with HEA on good practice at the national level. Develop and launch LGBT+ Action Plan.	Director of EDI; LGBT+ Staff Network.	Q1 2025 onwards.	UCC LGBT+ Action Plan developed and launched.

Priority	#	Rating	Action	Rationale	Specific actions / outputs	Responsibility	Time scale	Success Measure
GEI	2.4.16	High	Diversify all male portraits in the Aula Maxima and complete the Women on Walls project.	Feedback during the 2022 and 2024 in-person consultations/focus groups indicate that the all-male President's Wall is out of step with the EDI culture and equal opportunity ethos we wish to promote. Women on Walls commenced in 2024 with an open call for subjects. The artwork is due to be completed in 2025.	Create/unveil four new artworks of women leaders to hang in the Aula Maxima. Identify stage 2 for Women on Walls.	President, Director of EDI, WoW Steering Group, Building and Estates, Accenture, Business to Arts.	Q2 2024 – Q4 2025.	Addition of four portraits (11 female subjects) to the Aula Maxima.
AEGI	2.4.17	Med	Develop a dedicated Irish Sign Language (ISL) policy, which will include guidance of the provision of ISL at events and meetings.	Deaf staff members report that they cannot participate in all staff events, meetings and training in the absence of ISL. Deaf staff members are required to use external ISL interpreters who may not always be available. There is no dedicated budget line to support ISL interpretation so deaf staff may sometimes be unable to participate in key staff events/trainings etc.	Develop an ISL working group to develop an ISL Policy for Staff and Students which will provide guidance on interpretation services, ISL training and support for deaf staff and students.	ISL Policy Working Group.	Q1 2025.	ISL Policy launch with clear guidance and supports related to ISL.
AEGI	2.4.18	Med	Develop an interactive map of accessible meeting and conference spaces and include an accessible button on the room booking system.	The room booking system does not currently set out which spaces are accessible. A filter to identify the same would be beneficial.	Audit existing spaces to identify accessibility. Create a listing of accessible spaces through a room bookings filter. Create a button to allow easy booking of these spaces.	IT, Room Bookings Manager, EDI Unit, Director of Buildings and Estates	Q3-Q4 2026.	Accessible meeting spaces are clearly available on the room booking system.
NA	2.4.19	High	Create and deliver a cohesive communications and marketing framework for UCC which includes an EDI-proofed internal communications plan.	New internal communications and marketing framework will be developed in 2025. EDI will be a key cross-cutting theme in delivery.	EDI proof new UCC communications strategy in terms of messaging, representation and accessibility. Develop a checklist and suite of EDI brand guidelines for imagery and alt text on the UCC website, workvivo and social media posts.	VP Global: Director of Communication; Director of Marketing; Director of EDI.	Q1 – Q2 2025.	Inclusive accessible internal communications and marketing framework implemented. UCC brand refresh includes imagery which is representative of a diverse UCC community.

Support for Family Leave

Priority	#	Rating	Action	Rationale	Specific actions / outputs	Responsibility	Time scale	Success Measure
GE3	2.4.20	Med	Continue and advance maternity leave supports:	EDI Staff Survey Results: 2024: 15%F(n=121) /9%M (n=41) Agreed to 'In the last 24 months I have taken Family Leave'.	(i) Establish buddy / check in scheme for mothers returning from maternity leave. Provide guidelines for managers on how to support staff returning from maternity leave.	Chief People and Culture Officer; Staff Wellbeing & Development Manager; EDI Unit.	Q1-Q2 2027.	Data Measures: EDI Staff Survey Results: 2028: 80% Agree 'Arrangements were made for me to keep in touch...' 32% Agree to 'Part-time or temporary staff were hired to cover some / all of my responsibilities'. 45% Agree 'On return from leave, supports were put in place to facilitate my re-engagement'.
			New buddy/check-in scheme for maternity leave returners;	Among leave-takers, 66%F/76%M Agreed that 'Arrangements were made for me to keep in touch..' 23%F/20%M Agreed that 'Part-time or temporary staff were hired to cover some / all of my responsibilities'. 29%F/41%M Agreed 'On return from leave, supports were put in place to facilitate my re-engagement'.	(ii) Managers' Insights Hub training sessions for managers, focussing on supporting staff prior to, during and on return from maternity leave.			
			Continue BAP 5.5.7 – minimum standard maternity leave for academic staff.		(iii) monitor the use of hourly paid cover for academic maternity leave with a view to reducing inappropriate/excessive reliance.			
GE3	2.4.21	Med	Continue BAP 5.5.10 – 1 year pilot in CACSSS/COBL of researcher returners' grant.		(iv) BAP 5.5.10: Pilot in CACSSS/ COBL of grant for researchers returning from mat leave to support the transition to work.	Director of EDI; EDI Officer; Parents' Network Chairs..	Q2 2026.	Parents' Network launched and membership base established. Three Parents' Network gatherings per annum.
GE3	2.4.22	Med	Establish Parents' Network.	EDI Staff Survey Results: 2024 staff identified Family Status as the area they would most like to see work on (n=559). Key issues raised in qualitative data include supporting parents' workloads during summer holidays/midterm and providing backfill/workload allocation during periods of parental leave.	Develop terms of reference and call for membership in the Parents' Network. Allocate additional funding to support the new staff Network. Each staff Network receives 2000 per annum through the EDI Unit budget line.	Director of EDI; EDI Policy Group; Welfare Manager	Q3 2026.	Pregnancy Loss Policy and Guidelines for Managers developed and launched. Pregnancy loss leave agreed and set up on ESS.

GE2	2.4.23	Med	Review the impact of the Menopause Policy and continue to provide support through the Menopause Support Hub.	EDI Staff Survey Results: 2024: 36% of female respondents (n=346) are aged 45-54. Menopause Hub was launched in 2023 (100+ staff attending key events) and Menopause Support Policy was launched in 2024.	Continue engagement with staff through the menopause hub to identify/address the needs of staff who are menopausal. Undertake a review of the menopause policy two years post-launch. Provide training for managers on Menopause Policy/Supports.	Staff Wellbeing & Development Manager.	Q1 2025 – Q4 2027.	3 Menopause awareness/support events run through the Menopause Hub per annum. Review of Menopause Policy complete. 2 dedicated Menopause trainings for managers undertaken annually.
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Students

Priority	#	Rating	Action	Rationale	Specific actions / outputs	Responsibility	Time scale	Success Measure
AEG3	2.4.25	High	Develop an Access Dashboard for students to monitor progress on meeting targets as per the HEA National Access plan.	Required under HEA National Access Plan, under the Strategic Dialogue process.	Establish Access Dashboard working group. Identify priority data. Review the dataset to identify thematic areas. Build and test the dashboard.	Director of IT, Head of Access, DPR.	Q1 2025 – Q4 2025.	Access dashboard launched on DataHub. Annual reporting to HEA complete. Baseline data established to support retention and success of priority access students.
AEG3	2.4.26	Med	Review student data collection model and internal data sharing framework.	Equal access survey issued to all students at entry. Data is currently utilised for HEA reporting only. Explore opportunities (in line with data protection) for Access and EDI to leverage existing data sets.	Engage with HEA regarding the inclusion of Access and EDI indicators in the student records system. Engage with the Student Academic Systems Administration to review current data-sharing agreements with Access and EDI.	Director of IT, Head of Access, DPR, Director of EDI.	Q3 2026 – Q4 2027.	Student data collection model and internal data sharing framework reviewed and updated.
AEG3	2.4.27	Med	Review EDI student survey question set to increase engagement with student EDI survey to understand student needs and perception of EDI.	7% of students completed the EDI survey in 2021 and <1% of students completed it in 2024. This may be due to the survey issue date (April 2024) and survey fatigue.	Review/shorten student EDI survey. Identify an earlier date to issue a student survey. Engage with SU to issue the survey on behalf of the EDI Unit. Develop a communications plan to raise awareness of the survey.	Director of EDI, Student Union President, Director of Communications.	Q1 2026; Q1 2028.	Increase student survey response rate to >5% Identification of two student-related EDI actions to advance by 2028.

Priority	#	Rating	Action	Rationale	Specific actions / outputs	Responsibility	Time scale	Success Measure
AE3	2.4.28	Med	Organise a dedicated EDI Forum for students to identify student EDI needs.	Limited engagement with student EDI surveys required a new approach. Student Forum (similar to the People's Assembly) was established in 2022. It takes place 3 times per annum.	Identify the date for the EDI Student Forum.	Student Union President and Equality Representative; VP Teaching and Learning; Director EDI; Dean of UG and PG Studies .	By End Q4 2026.	Dedicated EDI Student Forum held with 80 students. 3 priorities identified.
AE3	2.4.29	Med	Improve accessibility of course materials to enhance student experience.	An average of 7% of UCC students between 2018-2023 came through DARE Access routes and require an accessible learning environment.	Expand the use of accessibility auditing software, Anthology Ally, on the Virtual learning Environment (VLE) to improve the accessibility of course materials. Expand the adoption of the UCC Accessible VLE template to ensure a consistent student experience and a more inclusive, accessible course design.	Deputy President and Registrar; Head of Access; Inclusive UCC Manager; VP teaching & Learning.	Q1 2025 onwards. Q3 2025 onwards.	VLE (Canvas) content accessibility score to increase. Establish the UCC Accessible VLE template as a default for all new modules.
AE3	2.4.30	Med	Undertake a review of the First Year of Inclusive Assessment across UG programmes in four Colleges.	Responds to strategic priority 2.5 to provide a digitally enabled learning and teaching experience, equitable to all, which incorporates Universal Design principles. Responds to commitment in Assessment Framework to make First Year Assessment distinctive.	Appointment of Inclusion Facilitators in all four Colleges to devise inclusive assessment templates and protocols. Develop implementation strategy for roll-out.	Dean of UG and PG Studies, Office of the DPR, Vice-Heads of Teaching and Learning, all Colleges.	Q4 2026.	Expansion and diversification of assessment portfolio. Reduction in reliance on formal written examinations in first-year UG programmes.
ASG3	2.4.31	High	Renew University of Sanctuary accreditation to consolidate and further embed Sanctuary in UCC.	University of Sanctuary accreditation expires in April 2025. 38 undergraduate scholarships have been offered since 2018 – accreditation is required to be eligible for funding.	Complete review and prepare/submit application to renew Sanctuary accreditation.	VP Global.	Q2 2025	University of Sanctuary accreditation renewed and support for Sanctuary students continued.
AE3	2.4.32	Med	Develop and roll out an intercultural awareness training pilot for teaching and frontline staff.	Academic staff report that they would like to be better equipped to support a diverse support cohort. Aligns with UCC Global Engagement Plan Object 4, Priority Action 2: Promote UCC as a place where all identities and cultures are celebrated and intercultural understanding is advanced.	Develop and pilot intercultural awareness training for frontline student staff in Finance, Student Experience, VD EDI and Library.	VP Global: Director of EDI, Vice President for Teaching and Learning; CPCO; Vice Deans for EDI.	Q2 – Q4 2027.	Pilot intercultural awareness training pilot developed and delivered to frontline staff.

Priority	#	Rating	Action	Rationale	Specific actions / outputs	Responsibility	Time scale	Success Measure
GE3	2.4.33	High	Update pregnant student policy and guidelines (continuing BAP Action 5.5.4).	Action not completed in 2019 AS Action Plan.	Policy and guidelines for pregnant students drafted and approved.	Director of Student Experience.	Q2 – Q3 2025.	Policy and guidelines for pregnant students published.

